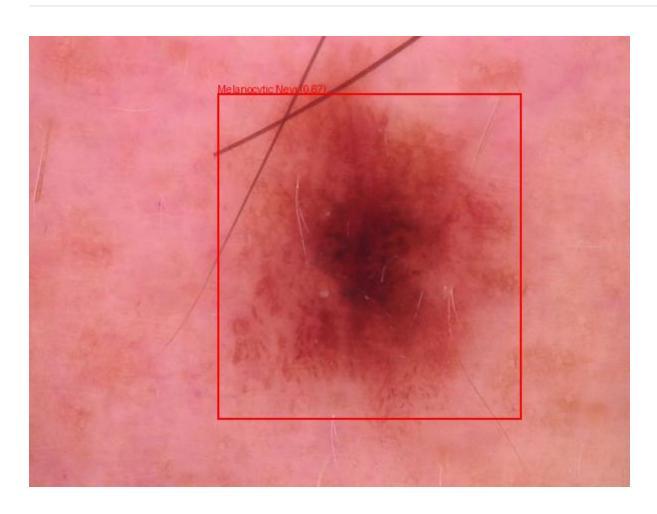
# Disease Report #REP-202505-PEIU

### **Report Details**

Report Number: REP-202505-PEIU

**Date:** 24 May 2025

Disease: Melanocytic Nevi



## **Diagnosis and Recommendations**

## Health Report: Melanocytic Nevi (Moles)

#### 1. Medical Description:

Melanocytic nevi, commonly known as moles, are growths on the skin that result from an accumulation of melanocytes, the cells that produce melanin (skin pigment). They are generally benign (non-cancerous) but can sometimes develop into melanoma, a serious type of skin cancer. Moles vary greatly in size, shape, color, and texture. They can be flat or raised, smooth or rough, and range in color from light brown to black. Different types of nevi exist, including congenital nevi (present at birth), acquired nevi (developing after birth), and dysplastic nevi (atypical moles with an increased risk of melanoma).

#### 2. Common Symptoms:

Most moles are asymptomatic and require no treatment. However, it's crucial to monitor for changes in existing moles or the appearance of new ones. Symptoms warranting medical attention include:

Asymmetry: One half of the mole doesn't match the other half.

Border irregularity: The edges are ragged, notched, or blurred.

Color variation: The color is uneven, with shades of brown, tan, black, red, white, or blue.

Diameter greater than 6mm: The mole is larger than a pencil eraser.

**Evolving:** The mole is changing in size, shape, color, or elevation. This includes itching, bleeding, or crusting. (This is often remembered by the acronym ABCDEs of melanoma)

#### 3. Causes and Risk Factors:

The exact cause of most melanocytic nevi is unknown, but genetics and sun exposure play significant roles. Risk factors include:

**Genetics:** A family history of moles or melanoma increases the risk.

**Sun exposure:** Exposure to ultraviolet (UV) radiation from sunlight or tanning beds is a major risk factor for both mole development and melanoma.

Fair skin: Individuals with fair skin, light hair, and blue or green eyes are at higher risk.

*Many moles:* Having a large number of moles increases the risk.

**Dysplastic nevi:** The presence of atypical moles significantly increases the risk of melanoma.

**Weakened immune system:** Individuals with compromised immune systems may have a higher risk.

#### 4. Preventive Measures:

**Sun protection:** Use sunscreen with an SPF of 30 or higher, wear protective clothing (long sleeves, wide-brimmed hats), and seek shade during peak sun hours (10 am to 4 pm).

**Avoid tanning beds:** Tanning beds emit harmful UV radiation that significantly increases the risk of skin cancer.

**Regular self-exams:** Perform monthly skin self-exams to check for new moles or changes in existing ones. Use a mirror to examine hard-to-see areas.

**Professional skin exams:** See a dermatologist for regular skin exams, especially if you have many moles or a family history of melanoma. The frequency of these exams will depend on your individual risk factors.

**Early detection:** Promptly report any suspicious moles or changes in existing moles to your doctor.

#### 5. Recommended Diagnostic Tests:

**Visual examination:** A dermatologist will visually examine the mole(s) using a dermatoscope (a magnifying device with a light source).

**Biopsy:** If a mole is suspicious, a biopsy may be necessary. This involves removing a small sample of tissue for microscopic examination to determine if it's cancerous. Types of biopsies include excisional (removal of the entire mole), incisional (removal of a portion of the mole), and shave biopsy.

**Imaging studies:** In rare cases, imaging techniques like ultrasound or CT scans may be used to evaluate the depth and extent of a mole.

#### 6. Suggested Treatments and Medications:

Treatment for melanocytic nevi depends on the type and characteristics of the mole. Most benign moles require no treatment. However, moles that are cosmetically undesirable, prone to irritation, or exhibit suspicious features may be removed. Treatment options include:

**Surgical excision:** Surgical removal of the mole, often the preferred method for suspicious lesions.

**Shave excision:** A thin layer of the mole is removed using a scalpel.

Cryotherapy: Freezing the mole off with liquid nitrogen.

Laser therapy: Using a laser to remove the mole.

No medications specifically treat benign moles. However, medications may be used to manage complications such as inflammation or infection after mole removal.

#### 7. Lifestyle and Dietary Recommendations:

While diet doesn't directly prevent moles, a healthy lifestyle is crucial for overall skin health. Recommendations include:

**Balanced diet:** Consume a diet rich in fruits, vegetables, and antioxidants, which may help protect the skin from damage.

Hydration: Drink plenty of water to keep your skin hydrated.

**Stress management:** Chronic stress can negatively affect overall health and may indirectly impact skin health.

**Quit smoking:** Smoking reduces blood flow to the skin, potentially making it more vulnerable to damage.

**Disclaimer:** This report provides general information and should not be considered medical advice. Always consult with a healthcare professional for diagnosis and treatment of any medical condition. Early detection and intervention are crucial for managing melanocytic nevi and reducing the risk of melanoma.