

# Skin Cancer of the Hand & Upper Extremity

Cancer can affect any area of the body and the skin is no exception. 3.5 million new cases of skin cancer are discovered and diagnosed each year. Skin cancer can usually be detected by a routine skin examination, which makes it important to have routine exams. Treatments are more effective when skin cancer is detected early.

## Causes

Many forms of skin cancer—including squamous cell (SC), basal cell (BC) and melanoma—are related to long-term sun exposure. These cancers are seen more often in patients who have light or fair skin or who have autoimmune diseases. Other potential causes include inherited conditions or exposure to radiation or chemicals.

## Signs & Symptoms

Squamous cell carcinoma (SCC) may look like a firm bump on the skin. They often are brown or tan in color and can show open areas, bleeding or crusting. The scaly, crusty top layer can build up, forming a thickened region (**see Figure 1**). This type of cancer is often seen on the back of the hand or around the fingertips or nails. Sometimes SCC can be confused with a cut or an infection that will not heal (**see Figure 2**). Some SCCs will look like a large mushroom. SCC can spread elsewhere in the body, especially to the local lymph nodes.

Basal cell carcinoma (BCC) is the most common type of skin cancer, accounting for about 80% of all skin cancers. However, BCC only makes up about 10% of hand and upper extremity cancers. Sun light exposure is thought to be the most common cause of BCC. BCC tumors may present with a well described border, and they are often clear, red or pearly with many tiny blood vessels. The tumors also may open and look like a long lasting sore. Unlike SCC, they grow much slower and are much less likely to spread.

Melanoma is a fast spreading and serious form of skin cancer. It is therefore important to make the diagnosis and treat melanoma quickly. The number of melanoma cases is quickly rising, especially in younger individuals. Melanoma tumors (lesions) often look like moles or birthmarks, but any skin lesions that begin to grow rapidly or change shape or color should be checked. The letters 'ABCDE' are an easy way to remember warning signs that could suggest a melanoma (**see Figure 3**). Melanoma lesions often spread to other areas of the body, including internal organs.

## Diagnosis

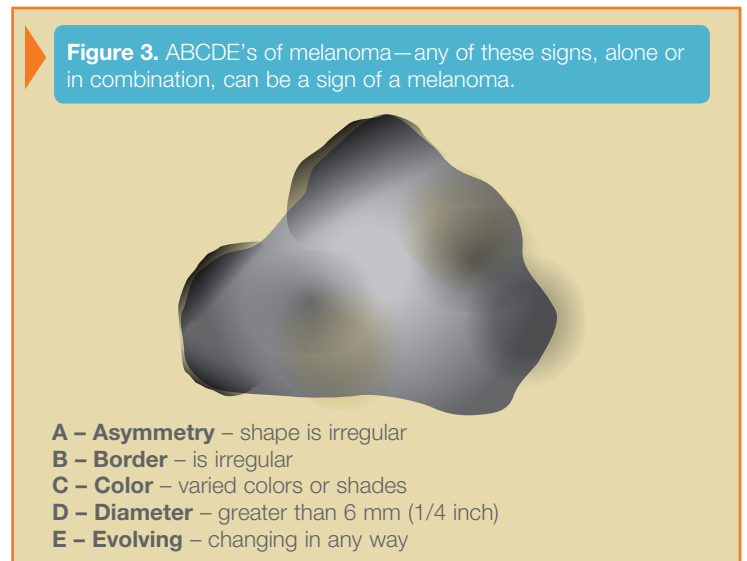
The physician will look at the area and inspect the size of the skin lesion, the presence of open areas, and any color changes or bleeding.



**Figure 1.** Squamous cell carcinoma with small cutaneous horn.



**Figure 2.** Squamous cell carcinoma sometimes looks like a cut or infection that doesn't heal. This is an example of one in the nail bed.



**Figure 3.** ABCDE's of melanoma—any of these signs, alone or in combination, can be a sign of a melanoma.

The physician will also want to know information such as history of sun exposure, personal and family history, and changes in any areas of the skin.

The diagnosis of skin cancer is confirmed with a biopsy, which is taking a portion of the tissue and examining it under the microscope. Occasionally, additional tests such as x-rays or other special tests are required.

## Treatment

The standard treatment is to completely remove the cancer, leaving a layer of normal tissue around the former tumor location. Occasionally after removal, the skin cannot be closed and may require a skin graft (taking skin from somewhere else on the body) or rearranging local or distant tissue to close the area. Sometimes additional treatments, such as radiation or chemotherapy, may be needed to prevent or treat cancer spread.

The best treatment is prevention. Wear protective clothing and use sunscreen when expecting sun exposure, even on a cloudy day. Early detection is also very important, so please check your skin often and show any areas of question to your doctor.