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Skin Cancer

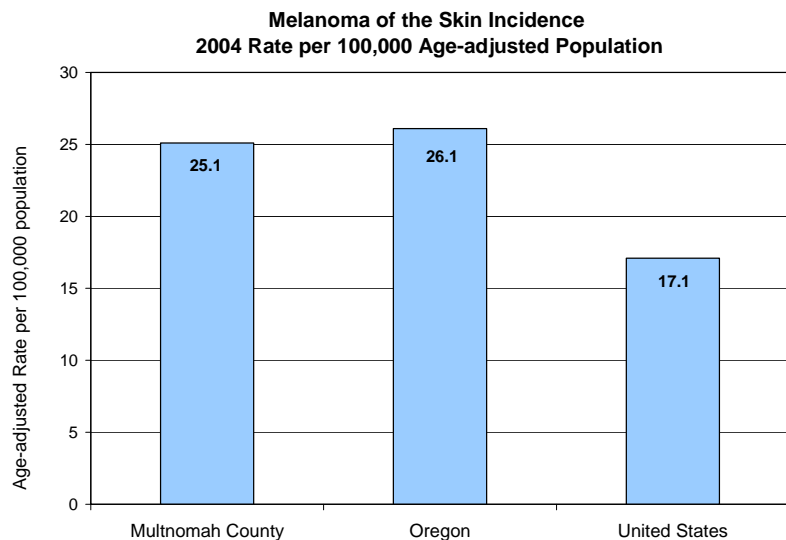
Although the Northwest is known for its cloudy, rainy climate, Oregon has one of the highest incidence rates in the U.S. of melanoma, the most serious type of skin cancer. Basal cell and squamous cell carcinomas are the two most common types of skin cancer, and they are highly curable. Melanoma, the third most common skin cancer, is more serious because it can be fatal, although if detected early it can also be highly curable. Skin cancer is the most common form of cancer in the United States, and the percentage of people who develop melanoma, the most serious form, has more than doubled in the past 30 years.¹

Risk Factors: Anyone can get skin cancer, but certain factors put some people at higher risk. Heavy exposure to ultraviolet (UV) rays from the sun increases the risk for melanoma. UV rays from tanning beds and sunlamps are just as dangerous as those from the sun. Other general risk factors include:

- Fair complexion, including light skin color, blue or green eyes, or blond or red hair
- History of severe, blistering childhood sunburns
- Certain types of moles
- A large number of moles
- Family history of skin cancer
- Skin that burns easily in the sun

The chance of developing melanoma increases with age, but this disease affects people of all ages. It can occur on any skin surface, and often the first sign of melanoma is a change in the size, shape, color, or feel of an existing mole. Any changes in an existing mole, or a new mole with an irregular shape, uneven color, or without a clear border should be examined by a health care provider.

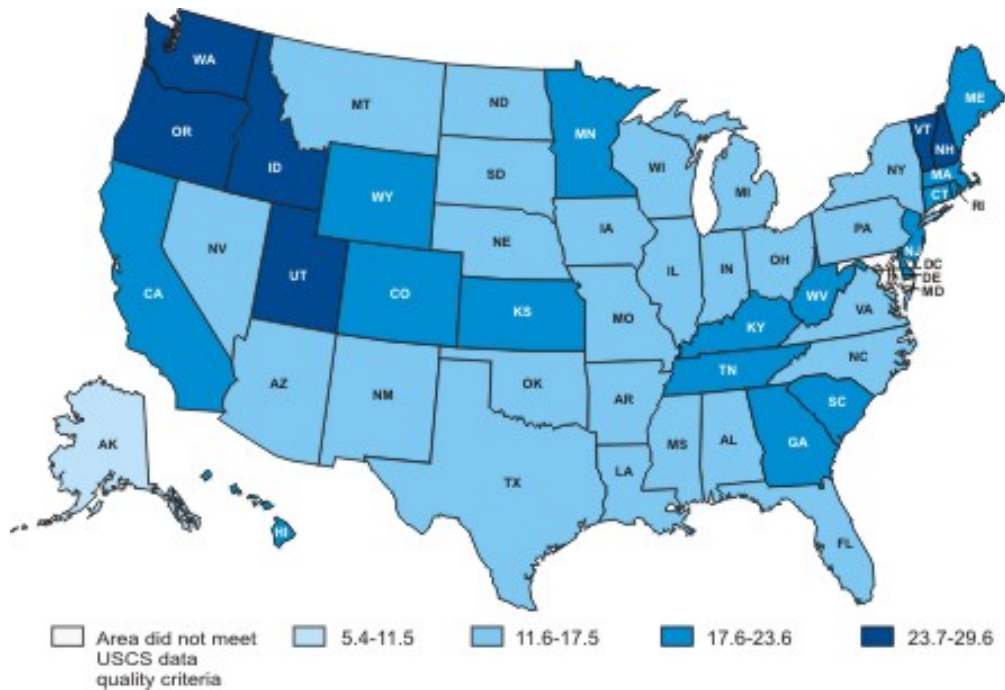
The number of people who get skin cancer during a specific time period is called the skin cancer incidence and is usually expressed as a rate per 100,000 population. The chart below shows the incidence rate of melanoma per 100,000 age-adjusted population for Multnomah County, Oregon, and the United States in 2004.



Source: Oregon Dept. of Human Services, Oregon State Cancer Registry and National Program of Cancer Registries, CDC

In the United States, the risk of getting skin cancer varies from state to state. Oregon, Washington, Idaho, Utah, New Hampshire and Vermont had the highest rates of melanoma incidence in the Nation in 2004, the most recent year data is available.

**Melanoma of the Skin Incidence Rates*
by State, 2004†**



*Rates are per 100,000 and are age-adjusted to the 2000 U.S. standard population.

†Source: U.S. Cancer Statistics Working Group. *United States Cancer Statistics: 2004 Incidence and Mortality*. Atlanta (GA): Department of Health and Human Services, Centers for Disease Control and Prevention, and National Cancer Institute; 2007.

Nationally, as well as in the Pacific Northwest, Whites have the highest incidence rate for melanoma of the skin, followed by Hispanics.

2004 Melanoma Incidence Rate per 100,000 Age-adjusted Population by Race & Ethnicity

Geographic Area	All Races	White	Black	Hispanic
United States	17.1	18.9	1.0	4.1
West*	19.6	22.0	1.0	4.5
Pacific*	20.3	23.7	0.9	4.8

Source: U.S. Cancer Statistics Working Group. *United States Cancer Statistics: 1999–2004 Incidence and Mortality Web-based Report*.

*Census divisions; West includes the Mountain Division (Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, & Nevada) and the Pacific Division (Washington, Oregon, California, Alaska, & Hawaii).

The reasons for the higher rates in Oregon are unclear. Oregonians enjoy outdoor activities and spend their time outside during sunny weather. Higher usage of tanning beds by Oregonians, and exposure to the sun during childhood and on vacations to sunny climates could contribute to the higher rates of melanoma.

There has been a sharp increase in the number of cases of melanoma among younger white women in the United States, according to a new study². The number of cases among young women, ages 15 to 39, increased from 9.4 per 100,000 population in 1980 to 13.9 per 100,000 in 2004. During the same time period, rates among young white men in the same age group leveled off. It's not clear what the reasons are for the increase; tanning bed usage, which has been recently evaluated as a probable cause of melanoma, is increasing among U.S. adults and is most prevalent among young women. Recreational sun exposure has also increased, as well as the prevalence of sunburn.

Mortality: In 2005, Multnomah County had a rate of 2.6 deaths due to melanoma per 100,000 age-adjusted population; this was slightly lower than the Oregon rate of 3.1 deaths per 100,000 age-adjusted population. National data for 2005 are not available; however, in 2004 the National rate was 2.7 deaths per 100,000 age-adjusted population.

Prevention: Data suggest that most skin cancers can be prevented if children, adolescents, and adults are protected from UV rays. CDC (Centers for Disease Control & Prevention) recommendations for sun protection include: 1) seeking shade, especially during the midday hours (10:00 a.m. – 4:00 p.m.) when UV rays are strongest; 2) cover up exposed skin with protective clothing; 3) wear a hat with a wide brim to shade the face, head, ears and neck; 4) protect eyes with wrap-around sunglasses that provide 100% UVA and UVB ray protection; and 5) use sunscreen and reapply frequently.³

The U.S. Preventive Services Task Force recommends that clinicians be aware that fair-skinned men and women age 65 and older, and people with atypical moles or more than 50 moles, are at greater risk for developing melanoma. They also recommend that clinicians be alert for skin abnormalities when conducting physical exams for other purposes.⁴

References:

- ¹ National Cancer Institute. *What You Need to Know About Melanoma*. National Institutes of Health, 2003. NIH Publication No. 02-1563.
- ² *Journal of Investigative Dermatology* online publication 10 July 2008; doi: 10.1038/jid.2008.159.
- ³ National Institutes of Health. *PDQ: Skin Cancer Prevention*.
- ⁴ United States Preventive Services Task Force. *Screening for Skin Cancer. Recommendations and Rationale*. Rockville, MD: Agency for Healthcare Research and Quality.

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