

Just to Let You Know

Oral Health Toolkit

Here comes summer!

Everyone relishes the sunshine and “feel-good” factor of longer daylight and less clouds.

The sunshine should be enjoyed and provides our bodies with much needed Vitamin D. However as with all good things moderation is the order of the day.

We are always vigilant for sun damage and suspicious patches on our patients skin. We refer about 10-12 patients each year to the Maxillo-facial Department of the Royal Surrey County Hospital for review and often removal of the offending lesions. Fortunately most are just skin surface changes due to sun damage but occasionally they have been found to show malignant and pre-malignant changes.

Skin cancers are of two types:

Malignant Melanoma-is the most serious form of skin cancer and usually presents with a mole, which changes in shape, size, colour or texture. There is a great increase in this incidence of type of skin cancer, nearly 10,000 cases diagnosed every year and about 2,500 deaths. It is the second most common cancer in young adults and twice as common in young women as young men. The increasing incidence is almost certainly linked to an increase in sunbathing abroad and the use of sun-beds.

Interestingly, last year a new law was passed in Scotland banning under 18's from using sun-beds.

Please do not leave check-ups for children and University students until just before they go back- we might not be able to accommodate them

Non-melanoma Skin Cancer-is much commoner than malignant melanoma and more easily treated. There are about 100,000 new cases each year.

There are two types:

Basal Cell Carcinoma-usually presents as a flattened lump and often has a slightly pearly appearance. Sometimes it looks flaky or crusty. It will only spread across and into the skin. It is easily removed.

Squamous Cell Carcinoma-this is more serious as it can spread deeply into the surrounding tissues and then on to other parts of the body. It is often a red and scaly patch or ulcerated.

Prevention is most important and should start very early in life.

Cover up

1. Loose clothes-close weave
2. A hat with a brim- we see many “more mature” male patients with quite severe sun damage to the edges and top of their ears. They diligently wear baseball caps and have short hair, which just leaves the ears exposed. Surgery to remove lesions form ears is difficult as there is poor blood supply and little tissue to close the wound.
3. Sunglasses

Sunscreen

1. A Sun Protection Factor (SPF) of at least 15
2. “**broad-spectrum**” sunscreens with a star rating of **four stars** or more
3. Water resistant
4. Within its shelf life

Check skin regularly and if in doubt ask us.

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