



Society of Dermatology
SkinCare Specialists

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Approved Provider

MELANOMA

COA#PCIA1013

CE Activity provided by PCI Journal

INSTRUCTIONS

1. Read the article.
2. Take the test, record your answers in the test answer section (Section B) on CE Registration Form.
3. Complete the CE Registration information (Section A) and Course Evaluation (Section C).
4. Mail completed CE Registration Form and fee to: PCI Journal, 484 Spring Avenue, Ridgewood, NJ 07450-4624.

PROVIDER ACCREDITATION

Paramedical Consultants, Inc., publishers of the PCI Journal and WWU have been approved by the NCEA COA. This educational activity has been approved for 1.0 CE – COA#PCIA1013

GENERAL PURPOSE STATEMENT

To provide the skin care professional with a review of Melanoma.

LEARNING OBJECTIVES

After reading this article and taking this test, the skin care professional will be able to:

1. Understand the cause of Melanoma cancer and how to lessen the chance of this cancer
2. Understand the treatment options .

About Melanoma Skin Cancer

Melanoma skin cancer, Malignant Melanoma, or Cutaneous Melanoma is a disease of the skin caused by high exposure to ultraviolet rays. On the top layer of the skin, the epidermis, melanin is a cell that creates the pigment of the skin. The darker the melanin is naturally, the less likely the cells are to become infected with melanoma. Due to that, Caucasians are much more prone to melanoma than African Americans. Although the prior is true, melanoma of the palms of hands, under the nails, and the bottoms of feet are equally as likely for all races. The most common sites for melanoma are the legs, face, and neck, but can occur all over the body. Many benign tumors can begin in the melanocytes but very rarely are they dangerous, some are more likely to develop into cancer than others, such as moles, but it depends on the type of the mole. Other benign tumors can be mistaken for melanoma, the most common tumor confused for melanoma is the Spitz Nevus, and is usually removed as a precautionary effort. Other benign tumors are Seborrheic Keratoses, Hemangiomas, warts, and Lipomas, which very rarely become malignant.

Risk Factors and Preventing Melanoma

The risk factors of melanoma skin cancer have not all been determined but some things are more likely to cause this type of cancer than others. One is genetics, if a family member has had skin cancer. Also, if a person has had melanoma before than it is very likely that they will get this cancer again and should be diligent with dermatologist appointments to check for skin cancer, and be sure to take extreme caution when going out in the sun. Another risk factor is atypical moles, often called Dysplastic nevi. These are moles with an irregular border, those that are bumpy, or even those with strange coloring. These may be a sign of melanoma and should be evaluated by a physical. Dysplastic nevi often run in the family so it is best to check children of anyone who has these potentially harmful moles. A chart that is helpful in identifying irregular moles is the ABCDE chart: A is for asymmetry- if the sides aren't even, B is for border- if the edges are ragged or irregular, C is for color- if the color is not the same all over or includes pinks, reds, white, or sometimes blue, D is for diameter- if the mole is larger than a pencil eraser, and E for evolving- if the mole changes size shape or color. Lastly, anyone who has a weakened immune system by any means is at a higher risk of developing skin cancer. In general, everyone should make sure to use protection when going out in the sun, wear sunscreen, clothing, and hats to avoid harmful exposure to UV rays. Parents should teach their children healthy sun habits, such as always using sunscreen, and avoiding tanning beds or

booths at all costs as these are known to increase the risk of skin cancer by 74%.

Diagnosing Melanoma

Melanoma is usually a grouping of melanocytes that creates a mole, or a skin melanoma on the skin. A mole infected with Melanoma cancer will usually have a pigment of some kind but it is not unheard of that the mole will be pink or even a bump on the skin. These moles will almost always have an irregular border with odd coloring, the ones that are most easily detected are those bigger than a pencil eraser but there is technology now in place that allows for doctors to find the cancerous area at earlier stages. There are two main types of skin melanoma, one is "situ" melanoma and the other is Invasive melanoma. Situ melanoma is confined to the upper layer of the skin or the epidermis, this type of melanoma does not spread once it is removed, thus is much easier to cure. The other, invasive melanoma, enters the body and can infect anything from the lymph nodes to the brain, the deeper the cancer the more disastrous the effects.

Treatment:

Treatment begins by determining the stage of the cancer, but the first step is always to take out as much of the melanoma as possible. This is done by a surgical extraction or resection. If the melanoma is not invasive or if it has yet to spread to too large of an area, this procedure can be done in a doctor's office under local anesthesia. The scars are usually very small and heal over time. Another option is called a lymphadenectomy, in which the lymph nodes are removed and checked for cancer post surgery. Another form of a lymphadenectomy is a sentinel lymph node biopsy. This one differs from the previous because only the first lymph node is removed. The potential of being a much less invasive surgery. This lymph node is also checked for cancer cells and if none are found no more lymph nodes need to be removed. Another option, if surgery is unsuccessful, is chemotherapy. This form of therapy includes the use of drugs that aim to stop the growth of cancer cells. Chemo can be given intravenously or by the mouth, but both approaches allow the drug to enter the bloodstream and attack the cancer throughout the body. The way the chemotherapy is given to the patient depends on how severe and or aggressive the cancer is. Another option for this cancer is radiation which more directly targets the cancer cells. Again the amount and intensity depends on the stage of the cancer. Immunotherapy is another treatment that is commonly used, in this doctors use a drug called ipilimumab, marketed as Yervoy and distributed by Bristol-Myers Squibb, which attempts to activate the immune system to fight the cancer from within.

References:

Memorial sloan-kettering cancer center; mskcc.org, Skincancer.org

MELANOMA

- 1.) What type of skin cell does melanoma grow?
 - a) Keratinocytes
 - b) Melanocytes
 - c) Fibroblasts
 - d) Squamous cells
- 2.) What type of benign skin tumor can be confused for melanoma?
 - a) Mole
 - b) Hemangiomas
 - c) Spitz nevus
 - d) Lipomas
- 3.) Where can melanoma occur?
 - a) All over the body
 - b) Arms
 - c) Legs
 - d) Hands
- 4.) What layer of the skin is melanoma usually found?
 - a) Epidermis
 - b) Basement Membrane
 - c) Dermis
 - d) Subcutis
- 5.) Who has a higher risk of melanoma skin cancer?
 - a) Asians
 - b) Caucasians
 - c) African Americans
 - d) All of the above
- 6.) Non-Invasive cancer is called:
 - a) superficial
 - b) situ
 - c) lentigo
 - d) cutaneous
- 7) Dysplastic nevi are not:
 - a) bigger than a pencil eraser
 - b) irregular or ill-defined borders
 - c) oddly colored
 - d) Smooth
- 8.) A weakened immune system causes:
 - a) higher risk of developing cancer
 - b) warts
 - c) moles
 - d) extensive sunburn
- 9) Parents should
 - a) Teach their children healthy sun habits
 - b) Make their children to wear sunscreen
 - c) Visit dermatologist annually
 - d) encourage all of the above
- 10.) Risk of melanoma increases by 74% by:
 - a) Having a weakened immune system
 - b) not wearing sunscreen
 - c) using a tanning bed

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- d) having two or more family members with melanoma
- 11.) Situ melanoma
 - a) is just as dangerous as invasive melanoma
 - b) is confined to the upper layer of skin
 - c) spreads rapidly
 - d) is one of the three main types of melanoma skin cancer
- 12.) Treatment depends on everything except
 - a) The severity/stage of the cancer
 - b) The location
 - c) The patients needs
 - d) The pigment of the affected area
- 13.) Radiation
 - a) directly targets the cancer cells
 - b) includes large dosages of pills
 - c) has many potentially dangerous side effects
 - d) circulates through the bloodstream to attack cancerous cells
- 14.) The first step of treatment is
 - a) to determine the stage
 - b) to surgically remove the cancerous area
 - c) to take out all lymph nodes
 - d) to immediately begin chemotherapy
- 15) The least invasive surgery is
 - a) Lymphadenectomy
 - b) An excision of the cancerous area in the dermatologist's office
 - c) Sentinel lymph node biopsy
 - d) Removal of large tumors inside the body
- 16.) Sentinel lymph node biopsy differs from a lymphadenectomy in that
 - a) It takes out the least likely to be affected lymph node
 - b) It takes out 2 Lymph nodes instead of all of them
 - c) It is much less invasive
 - d) They are exactly the same
- 17.) Chemo is given to the patient
 - a) intravenously
 - b) through a nasal spray
 - c) through surgical implantation of the medicine
 - d) through radiation
- 18.) The point of chemo is to
 - a) identify the cancer in the body
 - b) get information about the cancer calls such as dna
 - c) determine the stage of cancer
 - d) stop the growth of cancer cell

CE REGISTRATION FORM

Section A	Melanoma	COA# PCIA1013
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PRINT CLEARLY (*Illegible forms will not be processed*)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ + _____

Tel: _____ Fax: _____

Email: _____ *Delivery Method used to send CE Certificate

Are you certified? ___Yes ___No

NCEA Certification# _____

Other Certification _____

Type of License:

Esthetician ___ Cosmetologist ___ Medical Professional ___ Other ___

License # _____ State of Issue _____

Section B

Test Answers:

Darken one for your answer to each question

	A	B	C	D		A	B	C	D
1.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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9.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	18.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section C

Course Evaluation:

1. Did this CE activity's learning objective relate to its general purpose? ___Yes ___No
2. Was the elearning format an effective way to present this material? ___Yes ___No
3. Was the content relevant to your skin care practice? ___Yes ___No
4. How long in minutes did it take you to read the article _____, study the material _____, and take the test _____?
5. Suggestions for future topics _____

Section D

Payments and Discounts:

The registration fee for this test is \$24.95. (Check or money order payable to PCI Journal) to 484 Spring Avenue, Ridgewood, NJ 07450-4624.

Society of Dermatology SkinCare Specialists Members - \$4.95

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