Melanoma and Other Skin Cancers
- What to Look Out For

Patient Advice
Most moles are healthy and will stay that way.

**Healthy moles** tend to have the following appearances:

- **Symmetry** in shape and colour ie if you draw a pretend line through a mole, one half will look like the other

- A **smooth, even border**

- An **even colour**

- Some moles become elevated ie grow up out of the skin. Such moles tend to be **soft and wobbly** with a smooth or warty surface

The following page will show you examples of healthy moles ....
Symmetry - in shape and colour
Border - smooth

Symmetry - in shape and colour
Even though there are two colours they are a similar shade of brown and the colour is evenly distributed in a symmetrical fashion
Border - smooth

Soft and wobbly moles
Symmetry - in shape and colour
Borders - smooth
When you look very closely at your moles they may not all be completely symmetrical and so it is important to **compare your moles**, **something we call pattern comparison**.

If a mole is **similar** in shape, colour and size to the others on your body and is behaving in the same way it is likely to be normal.

It can be helpful to take photographs of your moles and store them on your computer. You and your partner / family member can check them every three months to look for change. If one mole is changing when compared to the others it should be reported to your GP as soon as possible.

The patient below had healthy moles. They appeared similar and photographs taken confirmed that none of them were changing.
Cancerous moles are called melanoma. They may or may not itch and they may or may not bleed. Melanoma tend to have the following appearances, which are best remembered by the ABCD rule:

**A = A**symmetry in shape and / or colour

**B = B**order. Look around the edge of the mole. Melanoma will often have an irregular, uneven or notched border

**C = C**olour. Several different colours or shades of colour, or a single colour that is different to your other moles

**D = D**imensions (changing dimensions / size). Melanoma can spread outwards as a flat lesion, or it can grow upwards as a hard lump. Some do both

The following page shows examples of melanoma ...
Asymmetry in shape
Border - jagged
Colour - black, different to the patient's other moles

Asymmetry in shape
Border - notched (red arrow)
Colour - black and brown. Different to the patient's other moles

Asymmetry - shape and colour
Border - notched and irregular
Colour - mainly black, but a close-up look shows pink and brown in the middle

Asymmetry - shape and colour
Border - notched and irregular
Colour - black, brown and red/pink. Three or more colours is always suspicious

Asymmetry - shape and colour
Border - notched
Colour - pink and brown, and not distributed evenly throughout the mole i.e., colours are asymmetrical
As well as melanoma there are other types of skin cancer. In addition to the ABCD rule, also look out for EFG which can apply to melanoma and other skin cancers:

E = Elevated (raised)
F = Firm (or hard)
G = Growth ... persistent growth

The next page shows examples of skin cancers presenting in this way ...
Elevated - this melanoma had grown outwards and upwards to form areas of hard lumps and give it a 'bubble wrap' appearance
Firm to palpate
Growth - persistent growth

Elevated - this melanoma had grown upwards
Firm to palpate
Growth - persistent growth

Elevated - this melanoma had grown upwards. It is termed amelanotic as it produces no colour
Firm to palpate
Growth - persistent growth

Elevated - this is a squamous cell carcinoma, most commonly found on sun-exposed parts of the body. This lesion had grown upwards and had produced a rough, scaly surface
Firm to palpate
Growth - persistent growth

Elevated - this is a basal cell carcinoma, which can bleed and scab intermittently, and never properly heals. They tend to have a shiny ‘pearly’ appearance
Firm to palpate
Growth - persistent growth
So far we have looked at the ABCD and EFG rules, but it is also important to remember the **ugly duckling**, which is any skin, nail or mucosal (lips and genitalia) lesion that looks or is behaving differently to the rest of your moles / skin lesions.

- Melanoma of the nail
- Melanoma of the nail
- Melanoma of the lip
- Lentigo maligna of the nose
- Squamous cell carcinoma of the lip
- A superficial (thin) basal cell of the back

- this is precancerous and would turn into a melanoma if left untreated
SO TO SUMMARISE

Check for:

- A = Asymmetry / B = Border / C = Colour / D = Dimensions (changing size)
- EFG = an elevated and firm growing lesion
- The ugly ducking

And get to know your own moles .......

Get to know your moles –
This patient had many harmless moles. They were the same colour and symmetrical in shape. The patient was confident that they had not changed.

Get to know your moles –
The lesion with an arrow was new and different to the rest. It was removed and found to be a melanoma.

This advice (and website) can be viewed for free by GPs and patients at www.pcds.org.uk