



Clinicians' Role in Reducing the Risk of Skin Cancer: Barriers and Solutions

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Texas Skin Cancer/Melanoma Screening & Prevention Summit

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& Friday, October 30th, 2015

The University of Texas MD Anderson Cancer Center
Mid-Campus Building, 3rd Floor Meeting Center Ballroom
707 Bertner Avenue, Houston, Texas 77030

Registration
Now
Open!

USPSTF recommendations

Grade	Definition	Suggestions for Practice
A	The USPSTF recommends the service. There is high certainty that the net benefit is substantial.	Offer or provide this service.
B	The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.	Offer or provide this service.
C	The USPSTF recommends selectively offering or providing this service to individual patients based on professional judgment and patient preferences. There is at least moderate certainty that the net benefit is small.	Offer or provide this service for selected patients depending on individual circumstances.
D	The USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits.	Discourage the use of this service.
I	The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined.	Read the clinical considerations section of USPSTF Recommendation Statement. If the service is offered, patients should understand the uncertainty about the balance of benefits and harms.

BEHAVIORAL COUNSELING TO PREVENT SKIN CANCER

CLINICAL SUMMARY OF U.S. PREVENTIVE SERVICES TASK FORCE RECOMMENDATION

Population	Children, Adolescents, and Young Adults Aged 10 to 24 Years With Fair Skin	Adults Older Than 24 Years
Recommendation	Provide counseling about minimizing exposure to ultraviolet radiation to reduce risk for skin cancer. Grade: B	No recommendation. Grade: I (Insufficient Evidence)
Risk Assessment	Individuals with a <u>fair skin type</u> are at greatly increased risk for skin cancer. Fair skin type can be defined by eye and hair color; freckling; and historical factors, such as usual reaction to sun exposure (always or usually burning or infrequently tanning).	
Behavioral Counseling	Effective counseling interventions were generally of low intensity and almost entirely accomplished within the primary care visit. Successful counseling interventions used <u>cancer prevention or appearance-focused messages</u> (such as stressing the aging effect of ultraviolet radiation on the skin) to reach specific audiences.	
Interventions	Behavior change interventions are aimed at reducing ultraviolet radiation exposure. Sun-protective behaviors include the use of a <u>broad-spectrum sunscreen with a sun protection factor ≥ 15, wearing hats or other shade-protective clothing, avoiding the outdoors during midday hours (10 a.m. to 3 p.m.), and avoiding the use of indoor tanning.</u>	
Balance of Harms and Benefits	For children, adolescents, and young adults aged 10 to 24 years with fair skin, primary care counseling interventions can increase the use of sun-protective behaviors by a moderate amount, with no appreciable harms.	For adults older than 24 years, there is inadequate evidence to determine the effect of counseling on the use of sun-protective behaviors.
Other Relevant USPSTF Recommendations	The USPSTF has made recommendations on screening for skin cancer. These recommendations are available at www.uspreventiveservicestaskforce.org .	

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to www.uspreventiveservicestaskforce.org.

Who: fair, sun sensitive

Why: cancer reduction, photoaging

What:

- Sunscreen
 - Neutrogena, Vanicream
- Sun protective clothing
 - REI, Target, Lands End, Amazon
- Avoid high intensity hours
- NEVER tanning bed

BRIEF REPORTS

Induction of withdrawal-like symptoms in a small randomized, controlled trial of opioid blockade in frequent tanners

Mandeep Kaur, MD,^a Anthony Liguori, PhD,^b Wei Lang, PhD,^c Stephen R. Rapp, PhD,^{c,d}
Alan B. Fleischer Jr, MD,^a and Steven R. Feldman, MD, PhD^{a,c,e}
Winston-Salem, North Carolina

Behavioral Counseling

- Barriers

- Provider time
- Patient disinterest
- Tanning

- Solutions

- Brochure, handout
- Low-key message, repeat
- Addiction, risk

SCREENING FOR SKIN CANCER CLINICAL SUMMARY OF U.S. PREVENTIVE SERVICES TASK FORCE RECOMMENDATION

Population	Adult General Population*
"I" Statement: Insufficient Evidence	No recommendation due to insufficient evidence
Risk Assessment	<p>Skin cancer risks: family history of skin cancer, considerable history of sun exposure and sunburn</p> <p>Groups at increased risk for melanoma:</p> <ul style="list-style-type: none"> • fair-skinned men and women older than 65 years • patients with atypical moles • patients with more than 50 moles
Screening Tests	There is insufficient evidence to assess the balance of benefits and harms of whole-body skin examination by a clinician or patient skin self-examination for the early detection of skin cancer.
Suggestions for Practice	Clinicians should remain alert for skin lesions with malignant features that are noted while performing physical examinations for other purposes. Features associated with increased risk for malignancy include <u>asymmetry, border irregularity, color variability, diameter >6 mm ("A," "B," "C," "D"), or rapidly changing lesions</u> . Suspicious lesions should be biopsied.
Other Relevant Recommendations from the USPSTF and the U.S. Task Force on Community Preventive Services	<p>The USPSTF has reviewed the evidence for counseling to prevent skin cancer. The recommendation statement and supporting documents can be accessed at www.preventiveservices.hhrq.gov.</p> <p>The U.S. Task Force on Community Preventive Services has reviewed the evidence on interventions to reduce skin cancer. The recommendations can be accessed at www.thecommunityguide.org.</p>

For a summary of the evidence systematically reviewed in making these recommendations, the full recommendation statement, and supporting documents, please go to www.preventiveservices.hhrq.gov.

*Note: The USPSTF did not examine outcomes related to surveillance of patients with familial syndromes, such as familial atypical mole and melanoma (FAM-M) syndrome.

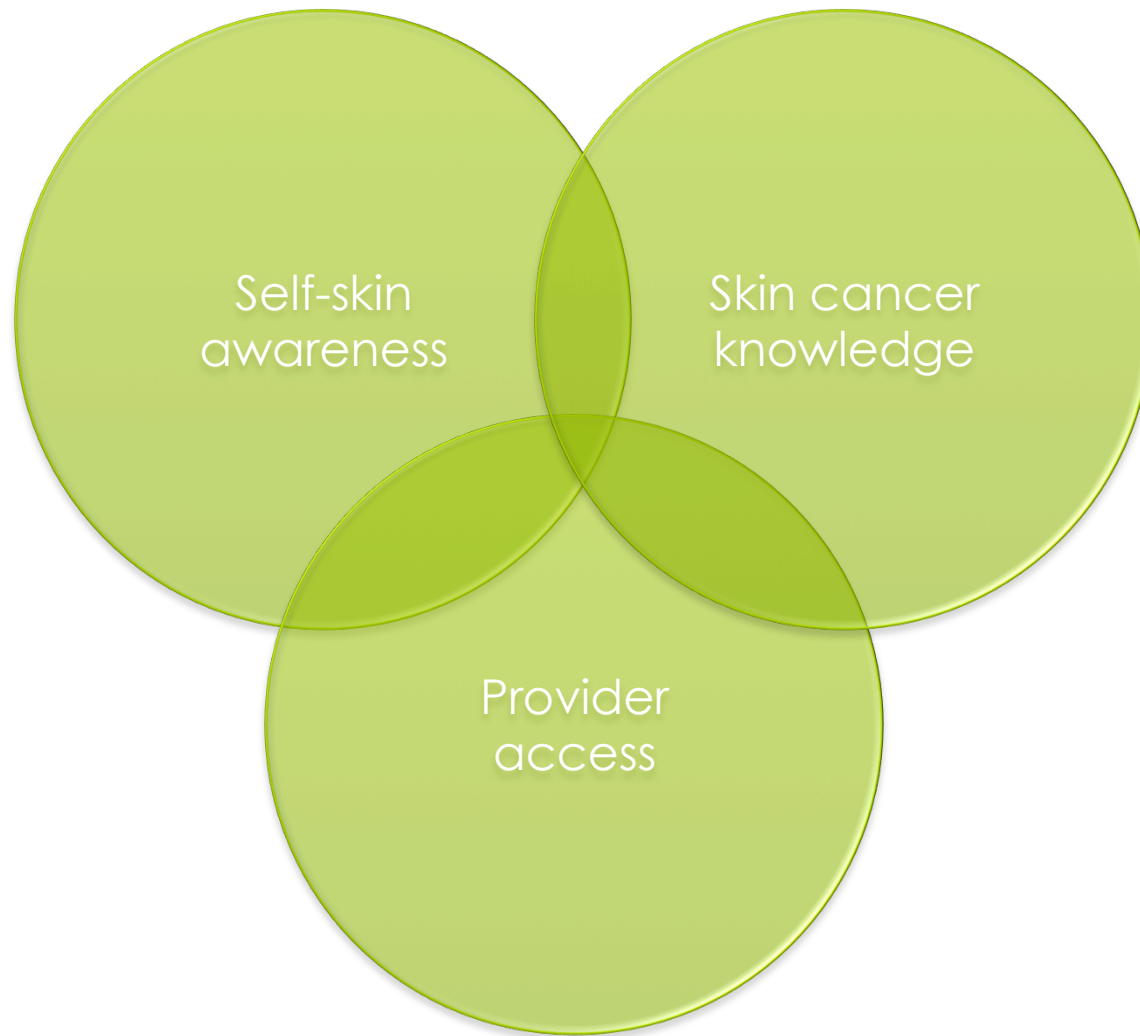
Barriers: Patients

“I didn’t know it was there”

“I knew it was there, but thought it was ...”

“I knew it was there and that it was a problem, but I couldn’t/ wouldn’t see a provider”

Barriers: Patients



STUDY

Even patients with changing moles face long dermatology appointment wait-times: A study of simulated patient calls to dermatologists **ancer Screening by Dermatologists, Practitioners, and Internists**

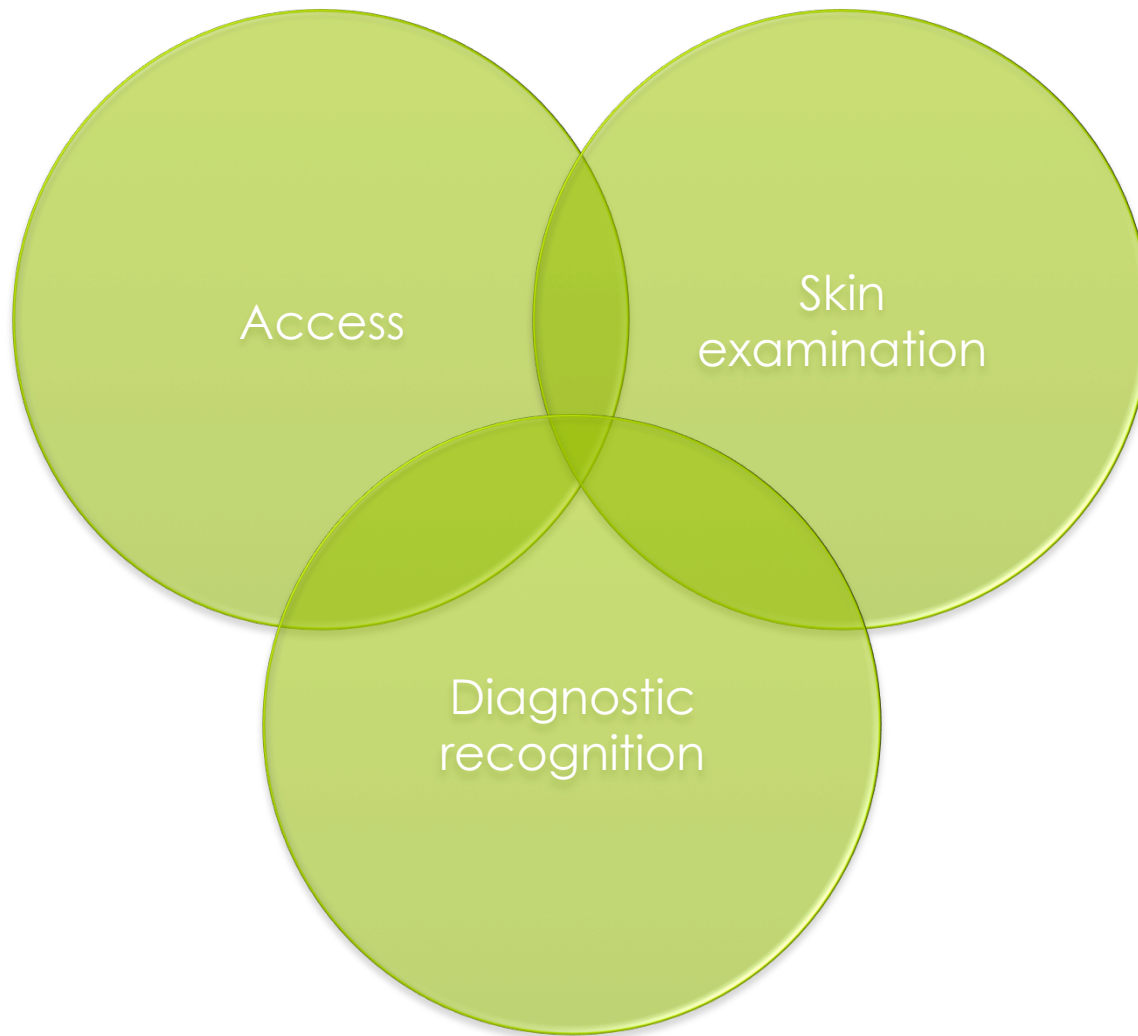
Matthew W. Tsang, MSt,^a and Jack S. Resneck, Jr, MD^b
San Francisco, California

d Facilitating Factors

^a, ScD, MPH; Maureen K. Heneghan, MS; Linda F. Cushman, PhD;
^b; Allan C. Halpern, MD

“I saw the patient and their skin but didn’t see a problem”

Barriers: Providers



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o 1-877-632-6789

The screenshot shows the MD Anderson Cancer Center website. At the top, there is a navigation bar with the MD Anderson logo, "Making Cancer History", and buttons for "Request an appointment" and "You can help: Give now". Below this is a secondary navigation bar with links for "International Center", "English", "myMDAnderson", "Newsroom", and social media icons. A third navigation bar contains "About Us", "Locations", "Events", "How You Can Help", "Careers", "Clinical Trials", and "Contact Us".

The main content area features a search bar and a navigation menu with options like "Patient and Cancer Information" and "Education and Research". The breadcrumb trail reads: "Home > Care Centers and Clinics > Multidisciplinary Cancer Care Centers > Melanoma & Skin Center".

The central section is titled "Melanoma & Skin Center" and includes a photo of a smiling woman. Below the photo, a paragraph states: "The Ben Love/El Paso Corporation Melanoma and Skin Center is committed to fighting every type and stage of skin cancer. Our goal is to give each patient personalized care that provides the most advanced treatment with the least impact on the body for:"

A bulleted list follows:

- Melanoma of the skin (ie, cutaneous melanoma)
- Rare forms of melanoma including:
 - Melanoma of the eye (uveal melanoma)
 - Mucosal melanoma (for example, vaginal, rectal or sinonasal)
- Squamous cell cancer
- Basal cell cancer
- Cutaneous lymphoma
- Other skin conditions experienced by cancer patients

Below the list, a paragraph reads: "And at MD Anderson you're surrounded by the strength of one of the nation's largest and most experienced comprehensive cancer centers, which has all the services needed to treat the whole person – not just the disease."

A final paragraph states: "If you have been diagnosed with melanoma or skin cancer, it is important to be evaluated by expert physicians as soon as possible. We can help. Call 1-877-632-6789 to make an appointment or [request an appointment online](#)."

On the right side of the page, there are three sidebar boxes: "Make an Appointment" with links for "Request an appointment online" and "New Patient Checklist (pdf)"; "MD Anderson Resources" with links for "Melanoma", "Skin cancer", "Undiagnosed Dermatology Clinic", "Melanoma clinical trials", and "Melanoma Horizons newsletter"; and "Departments & Programs" with links for "Dermatology" and "Melanoma Medical Oncology".