



Basal Cell Carcinoma

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What is Basal Cell Carcinoma?

Basal Cell Carcinoma (B.C.C. or Rodent Ulcer) is the most common form of skin cancer. Over 50,000 new cases of B.C.C.s are reported each year in the U.K. Fortunately it is a very slow growing form of skin cancer and rarely spreads to other areas or organs in the body. If left untreated, B.C.C.s can disfigure, especially on the face - therefore early recognition and treatment are important.

B.C.C.s are caused by long-term intermittent exposure to sunlight and frequently occur on sun exposed skin, such as the face, scalp, ears, hands, shoulders and back.

The white adult population is at risk of developing B.C.C.s. Those with a history of sunburn, recreational sun exposure, outdoor occupations and fair skin are most at risk

B.C.C.s are frequently seen in persons aged over 50 years, but a greater number of younger adults are developing this form of skin cancer.

REMEMBER BASAL CELL CARCINOMAS ARE CURABLE Recognise the early warning signs.

What are the early Warning Signs?

If you develop a skin lesion or sore that fails to heal within 4 - 6 weeks and has two or more of the following features SEEK MEDICAL ADVICE:



I. B.C.C.s may appear as an open sore or ulcer. It may bleed or crust but does not heal.



2. B.C.C.s can look like a red patch on the skin, which may be itchy, painful or crusty. Sometimes no symptoms are felt, but the lesion does not heal or fade.



3. A smooth raised growth can appear with an ulcer in the centre. These B.C.C.s can be flesh coloured, pink, red or brown like a mole.



4. B.C.C.s can also look like a firm nodule in the skin. These, too, can appear flesh coloured, pink, shiny, red or pigmented like a mole.



5. B.C.C.s can take on the appearance of a flat scarred area in the skin. This area appears pale or white compared to surrounding skin and may have an ulcer or indentation in the centre. This form of B.C.C. can grow more quickly, making the affected skin look taut and shiny.

How are B.C.C.s Treated?

B.C.C.s are usually treated by minor surgery, photodynamic therapy (PDT), radiotherapy and some may be suitable for treatment with prescribed creams. Treatment is usually carried out on an outpatient basis, with minimum disruption to your daily routine. All of these treatments aim to cure. The most appropriate form of treatment depends on size, site and number of B.C.C.s Your G.P or specialist will be able to advise you on treatments available.

How can we Prevent B.C.C.s?

If you have had one B.C.C. it is likely others will develop over the years. Examine your skin every 6-12 months for early warning signs.

Systematically look and feel for any changes in your skin. Ask someone you feel comfortable with to examine your back, neck, ears or scalp. Alternatively, a mirror can be used to examine these areas. Seek advice from your G.P.

Aim to cover up and wear wide-brimmed hats when outdoors to protect the areas most at risk.

Wear 100% U.V. protective sunglasses, as the skin surrounding the eyes is vulnerable to sun damage.

Seek shade between 11.00am and 3.00 pm.

High factor sunscreens (SPF 15+) are vital. Apply them before going out in the sun and re-apply every 2 -3 hours, or more frequently if perspiring or swimming.

Make sure you do not burn and take extra care with children.

Avoid using artificial sun tanning beds.

Advise others, especially family and friends, to protect themselves and carry out annual whole body checks.



This leaflet has been written by: Pauline Buchanan, Clinical Nurse Specialist

Revised by: Jo Allum and Linda Burt Clinic Nurse Specialists in Skin Cancer Prevention

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Designed by: Belinda Poore, Publications Officer © March 2004

Updated by:

Denise Hancock, Skin Oncology Nurse Specialist © January 2011 - Version I

Other information leaflets on skin cancer available from the Wessex Cancer Trust:

No. 17: Living with Melanoma

No. 26: Skin Cancer

No. 27: Squamous Cell Carcinoma

No. 29: Malignant Melanoma

WESSEX CANCER TRUST

The Wessex Cancer Trust supports many aspects of cancer care for adults and children, including research, counselling, the production of cancer prevention/patient information leaflets, the appointment of breast care nurses, the improvement of patient facilities, the purchase of equipment and the provision of mobile breast screening units, as well as financial help for cancer patients and their families.

This leaflet has been published as part of the Wessex Cancer Trust's Information Service ©

We depend upon voluntary contributions to maintain our cancer information service for patients and the public.

We need your help to help others; and would welcome your financial support.

WESSEX CANCER TRUST

Bellis House, 11 Westwood Road, Southampton SO17 1DL Tel. (023) 8067 2200 Fax (023) 8067 2266 web: www.wessexcancer.org e-mail: wct@wessexcancer.org

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