PATIENT GUIDE: CHECKING YOUR SKIN AND MOLES

WHY DOES IT MATTER?

Skin cancer is one of the most common cancers in the world, and here is the key thing about it: caught at an **early** stage, it can almost always be treated.

Caught at a **late** stage, it can threaten your health and even your life.

Most patients whose exam revealed a malignant growth had no idea it was there.

Not because they ignored the problem — but because in its early stages a malignant growth does not look alarming and caused them no trouble at all.

That is exactly what **dermoscopic screening** is for.

HOW DO I BOOK AN EXAM?

Book an exam at the Trichology Institute. Appointments are with Dr. Nazar V. Tsalin.

Address: 17 Danylevskoho St, Kharkiv
Booking phone: 095 926 2585

More about the appointment: dermato-oncology consultation with digital dermoscopy.

HOW DOES THE EXAM WORK?

The doctor examines your entire skin surface with a dermatoscope — a special optical instrument that shows structures in skin growths the naked eye cannot see.

It is a **painless, surface-only** procedure.

You **cannot** tell a benign growth from a malignant one on your own. The way a growth looks is **not** a reliable criterion.

That is the dermato-oncologist's job.

WHO IS AT HIGHER RISK?

Regular exams are especially important if you have at least **one of the following factors**:

- Fair skin, light hair, light eyes
- A tendency to sunburn
- Many moles — more than 50, or large ones with an unusual shape
- Long hours working in the sun, or tanning bed use
- Skin cancer in the past

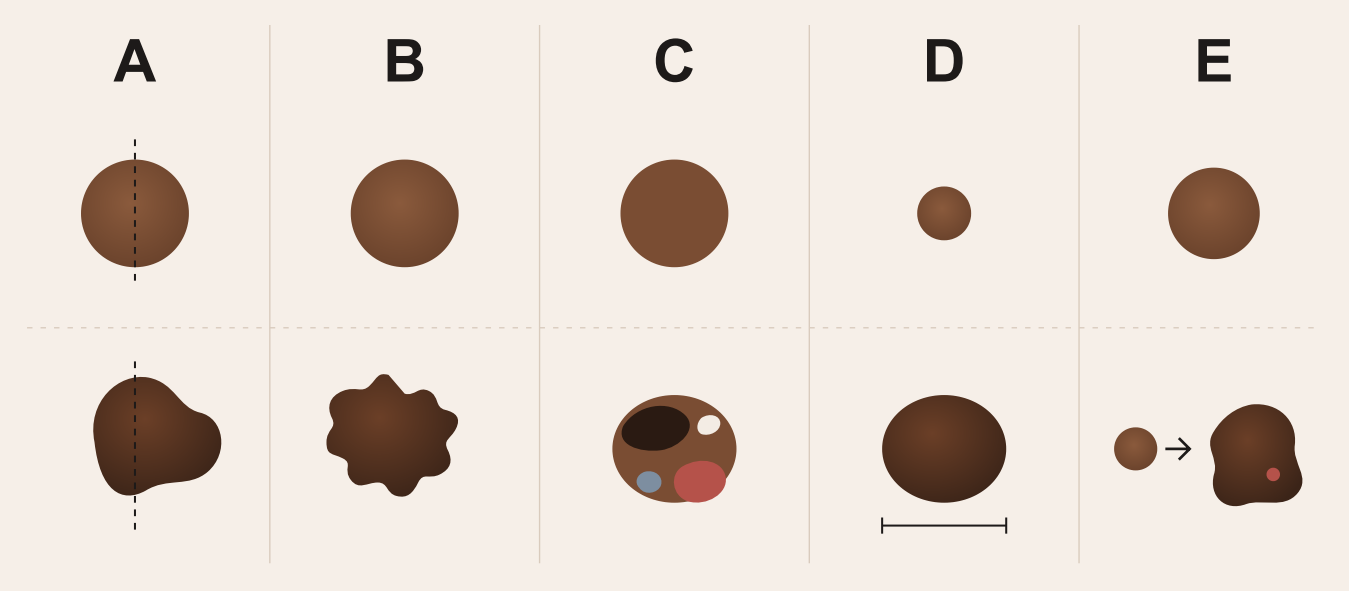
- Weakened immunity — after an organ transplant, with autoimmune diseases or on immunosuppressive therapy

If you have even one of these factors, **a yearly exam is a must**. For everyone else, it is **strongly recommended**.

HOW CAN I SPOT A PROBLEM MYSELF?

The criteria below **do not replace** a doctor's exam, but they help you get help in time — and you can check not only yourself but your loved ones too.

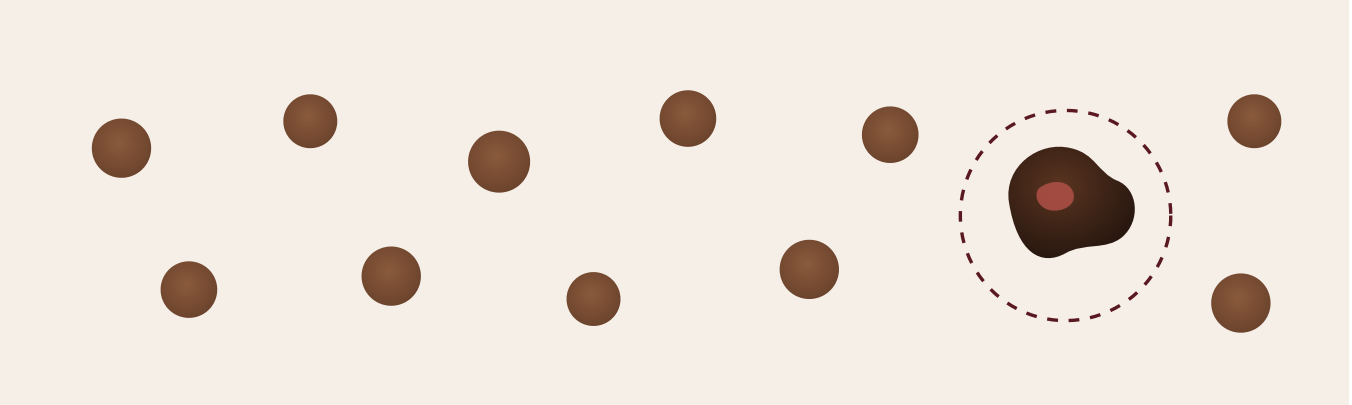
Criterion 1 – ABCDE (melanoma)



- **A — Asymmetry.** If you draw a line through the center of the mole, its two halves do not match in shape.
- **B — Border.** The edges are indistinct, blurred, uneven, “ragged” or notched.
- **C — Color.** Several shades in one growth: brown, black, red, white, blue.
- **D — Diameter.** Larger than 6 mm (the size of a pencil eraser). Smaller melanomas exist too, so this criterion is not the main one.
- **E — Evolution.** The growth has changed: it has grown, changed color or shape, started to bleed, itch or flake.

The letter **E is the most important one.** Any change you notice in a growth is a reason to see a doctor, whatever the other criteria say.

Criterion 2 – the “ugly duckling”



Look over all the moles on your body as a whole. In most people, the moles on the body look like one another — in shape, color and size. That is normal.

A growth that clearly stands out from the rest — one that looks different from all the others — needs to be seen by a doctor.

It may be darker or lighter than the others, a different shape, a different color — even bluish, reddish or almost white. That growth is the “ugly duckling.”

Important: in its early stages, melanoma often looks completely harmless — a small, barely noticeable spot. That is why ABCDE and the “ugly duckling” sign add to a doctor's exam rather than replace it.

Criterion 3 – warning signs of non-melanoma skin cancers

Basal cell and squamous cell skin cancers are far more common than melanoma: basal cell carcinoma (basalioma) and squamous cell skin cancer.

In the early stages, patients often describe them as:

- A small reddish or skin-colored spot that appeared recently
- A “pimple” or bump that grows slowly and will not go away — no matter how it is treated
- A patch of skin that bleeds now and then, crusts over, then “heals” — and then it all happens again
- A shiny, pearly or waxy bump

Any of these signs is a reason to see a dermato-oncologist, even if the growth does not hurt or bother you. More examples: what skin cancer looks like.

SUN PROTECTION – NOT OPTIONAL, BUT ESSENTIAL

Ultraviolet radiation is a proven carcinogen and the main risk factor for skin cancer.

Practical tips:

- Use SPF 50+ every day — including on cloudy days and in winter
- Apply sunscreen 20–30 minutes before going outside, and reapply every 3–4 hours when you are active in the sun
- Stay out of direct sun from 10 a.m. to 4 p.m.
- Wear clothing that covers your skin, hats and sunglasses

- Give up tanning beds — artificial UV radiation is no less dangerous than the sun's

THE BOTTOM LINE

> "No one is ready to hear the diagnosis 'cancer.' But it can sound like a sentence — or like a chance to get rid of it in time.
>
> The difference between these two scenarios is often measured not in years but in weeks — the time between 'I noticed it and came in' and 'I noticed it, but waited.'
>
> Come in yourself. Bring the people you love.
>
> Early diagnosis is not paranoia. It is taking responsibility for yourself."

— Dermato-oncologist and surgical oncologist Dr. Nazar V. Tsalin, Kharkiv