Basal Cell Carcinoma—A Preventable Disease

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**Introduction**

Basal cell carcinomas (BCCs) is a non-melanoma skin cancer. According to the American Cancer Society, “BCC is the most frequently occurring form of all skin cancers. More than one out of every three new skin cancers are BCCs, and the vast majority are BCCs” (American Cancer Society, 2021). This is due to exposure to UV rays, with over 90% of UV rays reaching the skin (Firnhaber, 2012). The main factors that lead to BCCs are exposure to UV, age, and family history (Thompson, 2012). The incidence of BCCs is increasing, with an estimated 4.5 million cases diagnosed in 2019 (American Cancer Society, 2021).

**Symptoms and Signs**

Patients should be on the lookout for lesions that look abnormal, but do not usually present as moles. Any lesion that lingers for over a month should be investigated. As mentioned earlier, any lesion that has a change in size or shape over a period of time is a sign of potential cancer. BCCs are characterized by their appearance, which can be described as firm, red, and raised. They can also be white, crusted, or have an elevated surface. The lesions can appear on the skin or under the skin. In some cases, the lesions may be pigmented or have a blue or purple coloration. BCCs may present as a single lesion or may appear as multiple lesions. They can be mistaken for cysts, comedones, or warts (Firnhaber, 2012). The appearance of BCCs is often distinctive, and patients should be encouraged to seek medical attention if they notice any changes in their skin.

**Pathophysiology**

Basal cell carcinoma is a type of cancer that is preventable. While there is a lack of skin cancer in our society. The obsession with getting a tan setting up society for future health issues that could have been easily prevented. It is important to begin good sun protection practices at a young age, but it is never too late to start protecting their skin. With proper education, hopefully the majority of these diagnosed warnings will not be done externally.

**References**

Bach, C.H., Bach, C.T., Reijer, S., & Ruggles, E.V. (2013). Use of sunscreen and indoor tanning devices among a nationally representative sample of high school students, 2000-2011. Preventing Chronic Disease. 11(1-4). D’Orazio, J., Jamar, S., Amen-Oriti, A., & Scott, T. (Jan 2013). UV radiation and the skin. The international journal of Molecular Sciences. 14(2). D’Orazio et al., 2013, p.12231. UV exposure is not the only thing that individuals should be educated on, healthcare professionals should also educate patients on the dangers of using tanning beds. Research shows that the younger a person is, the more likely they are to develop skin cancer. Over 90% of skin cancer is caused by sun exposure (D’Orazio et al., 2013). UVB rays are absorbed by the skin, while UV- rays are absorbed by the epidermal melanocytes. UV exposure can lead to the development of photoproducts, which can cause damage to the skin (D’Orazio et al., 2013, p.12230).

**Implications for Nursing**

For healthcare professionals, it is imperative to educate patients on the dangers of unprotected sun-exposure. “Research suggests that 1 in 5 Americans will develop skin cancer in their lifetime” (D’Orazio et al., 2013, p.12231). Sun exposure is not the only thing that individuals should be educated on, healthcare professionals should also educate patients on the dangers of using tanning beds. Research shows that the younger a person is, the more likely they are to develop skin cancer. Over 90% of skin cancer is caused by sun exposure (D’Orazio et al., 2013). UVB rays are absorbed by the skin, while UV- rays are absorbed by the epidermal melanocytes. UV exposure can lead to the development of photoproducts, which can cause damage to the skin (D’Orazio et al., 2013, p.12230).

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**Skin Cancer Foundation**

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