



Cancer Society New Zealand
Te Kāhui Matepukupuku o Aotearoa

National Office
Level 2, Red Cross House
69 Molesworth Street, Thorndon
PO Box 12700
Wellington

Telephone: 64 4 494-7270
Facsimile: 64 4 494-7271

Websites: www.cancernz.org.nz
www.daffodilday.org.nz
Email: admin@cancer.org.nz

November 2008

Protect yourself from the sun when around water

Kiwis love to go to the beach or to get out on the water during summer - whether it's for swimming, boating, fishing or jet skiing. What is not always recognised is that UVR levels, which are high to extreme in New Zealand during the daylight saving months, are intensified by reflection from water and even sand. This increases the risk of sunburn and eye damage. But there are safe ways to enjoy these activities!

The Cancer Society urges people to avoid being sunburned this summer, given that sunburn is associated with an increased risk of melanoma in later life. New Zealand has one of the world's highest melanoma incidence rates, with over 1,800 new melanoma cases each year. There are also approximately 45,000 new non-melanoma cases confirmed by laboratory tests every year. Skin cancer kills over 300 New Zealanders annually. Yet, it is largely preventable.

Dr Judith Galtry, the Cancer Society's Skin Cancer Control Advisor, notes that, "Excess UVR is the cause of over 90 per cent of all skin cancers in high UVR environments like New Zealand. It also increases the risk of later eye damage, including cataracts. Around water, UVR intensity is much higher. It's important to protect yourself and your family from the sun when at the beach, the pool or out on the water. Even sand reflects UVR with levels up to 15 to 18 percent higher than non-reflective surfaces. The intensity of the sun's rays means that you will burn much more quickly, so it's especially important to protect yourself during the daylight saving months, especially between 11am and 4pm."

The Cancer Society's three yearly survey of New Zealanders' sun protection awareness and behaviour identifies that individuals involved in water based activities are among those most likely to report sunburn. Frequently, this occurs when people forget to cover up in the sun.

The Cancer Society is trying to keep its sun-protection message simple. Avoid burning by:

- Wearing broad brimmed (>7.5cm) sunhats that protect the face, head, neck and ears
- Covering up with sun protective clothing (covering the neck, torso and ¾ of the limbs) and swimwear, such as rash vests, wetsuits and board shorts. Take a beach tent or large umbrella to provide local shade for you and your family
- Using and frequently reapplying a broad-spectrum SPF30+ sunscreen. Water resistant sunscreens are necessary for water sports but still need to be reapplied frequently
- Staying indoors or in the shade in the middle of the day, when the sun is most fierce.

When choosing swimsuits, darker colours in a tightly woven fabric offer better protection but when wet, fabrics can lose up to 50 percent of the sun protection they offer. Choose a good fit: stretched fabric has reduced protection. Look for UPF ("clothing SPF") above 30+ and preferably 50+.

Cover up with a sunhat, shirt or towel when out of the water and apply sunscreen 15-20 minutes before going for a swim. Zinc cream on nose, lips, cheeks and tips of the ears gives extra protection. Also wear sunglasses or UVR blocking goggles to reduce the glare.

Swimmers should also reapply sunscreen on dry skin after getting out of the water as a precaution. "You have to take into account, salt water, and sand," Judith Galtry says. "Swimming, sweating, sitting on sand or rubbing yourself with a towel can all reduce the film of sunscreen protecting you from burning and reapplication is crucial yet often gets neglected. But remember to cover as much skin as possible with sunhats and clothing."

For further information on sun protection, skin cancer and skin cancer statistics visit the Cancer Society of New Zealand website: www.cancernz.org.nz

Contacts

Dr Judith Galtry
Cancer Society
Mobile: 0274 583 484
Tel: (04) 494 7196
Email: judith.galtry@cancer.org.nz

Dr Louise Reiche
New Zealand Dermatological Society
Mob: 0274 498 529
Email: Louise@aorangihospital.co.nz



**Cancer Society New Zealand
Te Kāhui Matepukupuku o Aotearoa**

National Office
Level 2, Red Cross House
69 Molesworth Street, Thorndon
PO Box 12700
Wellington

Telephone: 64 4 494-7270
Facsimile: 64 4 494-7271

Websites: www.cancernz.org.nz
www.daffodilday.org.nz
Email: admin@cancer.org.nz

November 2008

Men need to take care in the sun during summer!

Many New Zealand men are not taking enough care in the sun during the summer months. A three yearly survey of New Zealanders' sun protection awareness and behaviour shows that many men are unaware of or choose to ignore the risks of excessive UVR during summer.

During the 2005/06 summer (when the survey was last carried out) of the men surveyed:

- 38 percent reported a previous history of moderate to severe sunburn.
- Nearly a third believed that a suntan protected them against skin cancer
- Just over half wore a hat when outside in the weekend (although many wore caps which do not protect the neck and ears, common sites for sunburn)
- Two thirds did not use sunscreen during the previous weekend, with nearly a quarter feeling there was no need.
- Very few applied sunscreen to their back and chest
- And nearly a third wore sunscreen so they could stay in the sun longer
- Less than half wore sunglasses

On the plus side, many men are physically active and play sport. But because they also tend to spend long periods outside they need to be especially careful to protect themselves from the sun.

According to Dalton Kelly, Chief Executive of the Cancer Society, "It is critical to avoid sunburn as this increases the risk of melanoma in later life. This country has one of the world's highest melanoma rates. In 2004 (the year for which the latest statistics are available) there were over 152 deaths and 900 cases of melanoma among men. Yet, the sad thing is that skin cancer is largely preventable."

The Society advises that between September and March, especially between 11am and 4pm

- Wear clothing that covers as much skin as possible, hats that protect the face, ears and neck and wrap around sunglasses
- Use SPF 30+ water resistant sunscreen, and reapply every two hours especially after swimming or being in water
- Seek shade

Although New Zealand and Australia have the highest incidence of melanoma in the world, Dermatologist Dr Marius Rademaker said many New Zealanders, particularly older men, weren't taking the sun protection messages seriously enough, still believing, 'it won't happen to me'. He also stressed that men need to check their skin regularly and go to their GPs if they see any change in a mole or freckle or other skin lesion.

"Early detection is absolutely critical with melanoma, but many people, again particularly men over 60, don't get their moles checked at all. If you notice any change in a mole or freckle, especially on your back, ask your GP to take a look or to refer you to a melanoma specialist.

For further information on sun protection, skin cancer and skin cancer statistics visit the Cancer Society of New Zealand website: www.cancernz.org.nz

Contacts

Dalton Kelly

Cancer Society

Mobile: 0274 583 484

Tel: (04) 494 7196

Email: judith.galtry@cancer.org.nz

Associate Professor Marius Rademaker

Dermatologist

Waikato Hospital, Hamilton

Mobile: 027-288-8996

Email: rademaker@xtra.co.nz

Signs of skin cancer

Some examples of skin changes are: a spot or sore that does not heal, an itchy bleeding or ulcerating spot or changes in a mole or freckle, e.g. in colour, size or shape. Check your skin regularly (at least once a month) and if you notice anything unusual that does not go away within one month show it to your doctor.

How is skin cancer diagnosed?

- Physical examination by your doctor
- Removal or biopsy of the area that has changed.

The people most at risk of skin cancer are those with:

- a history of sunburn
- fair skin and/or having freckles or many moles
- a personal and/or family history of skin cancer

Men at risk include those who work or spend long periods of time outdoors, work indoors but get a lot of sun exposure in their leisure time or use sunbeds, sunlamps or solariums. There is a greatly increased risk of skin cancer if your immune system is lowered by drugs such as those taken after an organ transplant

Get your partners or family members to check your skin for any changes.



**Cancer Society New Zealand
Te Kāhui Matepukupuku o Aotearoa**

National Office
Level 2, Red Cross House
69 Molesworth Street, Thorndon
PO Box 12700
Wellington

Telephone: 64 4 494-7270
Facsimile: 64 4 494-7271

Websites: www.cancernz.org.nz
www.daffodilday.org.nz

Email: admin@cancer.org.nz

November 2008

SunSmart Schools

Now that the warmer weather has arrived and Ultraviolet (UV) radiation levels have increased, schools need to ensure their students will not be sunburnt.

The Cancer Society's SunSmart Schools Advisor, Mary Duignan, notes that "New Zealand has one of the highest rates of skin cancer in the world and excessive exposure to UV radiation in childhood and adolescence increases the risk of skin cancer, including the most serious form – melanoma. **Schools need to promote sun protection because children are at school five days a week, during much of the period of peak UV radiation, that is, from September to March (inclusive) between 11am to 4pm.**"

To assist schools the Cancer Society provides the **SunSmart Schools Accreditation Programme**. This has lots of SunSmart information and includes a sample policy covering: sun protection, role modelling, student education and shade. Regional Cancer Society health promoters are also available to help schools. Schools can call their local Cancer Society to start the process.

Demonstrating its commitment to the programme, the Cancer Society also provides a discount rate for sunscreen for schools that have joined the programme.

Mary Duignan stresses that part of the appeal of the programme for many schools is that all the necessary material and information is already provided. She notes "Over 370 schools have joined the accreditation programme and recent research with schools shows that involvement in our programme has had a positive impact on sun safety."

While parents put a lot of energy into sun protection for children at home, when they are at school parents no longer have control over this. If the school has gained SunSmart accreditation parents can have confidence in their sun protection policy. The Cancer Society urges parents to ask their school about sun protection and encourage the school to join the SunSmart Schools Accreditation programme. According to Duignan parents can have an important influence on sun protection in schools "Committed parents have actively worked alongside the local Cancer Society to help their child's school achieve SunSmart Accreditation and we encourage more parents to become involved."

The SunSmart schools website www.sunsmartschools.co.nz provides a full range of information about how schools and parents can help protect children from the sun, as well as all the necessary supporting materials and curriculum resources covering years one to eight.

Feel free to pick up the phone and call your local branch of the Cancer Society for assistance (see Yellow pages).

For further information contact:

Mary Duignan

Health Promotion Advisor (SunSmart Schools and Pre-Schools)

DDI: (04) 494-7197

Email: mary.duignan@cancer.org.nz



**Cancer Society New Zealand
Te Kāhui Matepukupuku o Aotearoa**

National Office
Level 2, Red Cross House
69 Molesworth Street, Thorndon
PO Box 12700
Wellington

Telephone: 64 4 494-7270
Facsimile: 64 4 494-7271

Websites: www.cancernz.org.nz
www.daffodilday.org.nz
Email: admin@cancer.org.nz

November 2008

Skin Cancer Fact Sheet

New Zealand has among the highest rate of skin cancer in the world. This is largely due to our climate, the fact that many of us have fair skin that isn't suited to such harsh conditions, our closeness to the sun in the summer months and our love of the great outdoors.

Anyone can be at risk of developing skin cancer. The risk increases as you get older - older people have generally had more exposure to the sun than younger people.

Although the most serious form of skin cancer - melanoma - is most strongly related to intermittent sun exposure, the total amount of sun exposure is also important. There is often a long lag time between exposure and presentation of the disease. Melanoma can occur at a young age and is the most diagnosed cancer in 15 to 44 year olds.¹ There are also cases of skin cancer being diagnosed in children, however this is rare.

The good news is that most cases of skin cancer can be prevented simply by adopting appropriate sun protection behaviour when the UV Index levels are at 3 or above and the disease can usually be cured if detected early.

Causes

¹ New Zealand Health Information Service. *Cancer, New Registrations and Deaths*. Wellington: New Zealand Health Information Service, 2007.

Excessive UVR exposure can be damaging to health. Exposure to UVR is the cause of over 90% of all skin cancer cases.^{2 3}

Skin cancers form when skin cells are damaged by UV radiation penetrating the skin. Each cell carries DNA or genetic material that 'tells' each cell what it is, when to develop and when to die. UV damages the skin cells' DNA and this can cause them to mutate and grow abnormally. If these mutant cells are not destroyed by the body's natural defence systems, they will continue to develop and can turn into skin cancers.

Sunburn is not the only cause of skin cancer. Tanning or just too much sun year after year, can also lead to people developing the disease.

A very small number of cases of skin cancer are due to a genetic predisposition.

Types

There are three main types of skin cancer - basal cell carcinoma, squamous cell carcinoma and melanoma. Melanoma is the least common, but most serious of the three.

Basal cell carcinoma (BCC)

- most common and least dangerous form of skin cancer
- appears as a lump or scaling area
- red, pale or pearly in colour
- as it grows it may become ulcerated like a sore that won't heal
- grows slowly, usually on the head, neck and upper torso

Squamous cell carcinoma (SCC)

- not as dangerous as melanoma, but may spread to other parts of the body if not treated
- a thickened, red, scaly spot which may later bleed easily or ulcerate
- appears on sites most often exposed to the sun
- grows over some months

² International Agency for Research on Cancer. *IARC Monographs on the evaluation of carcinogenic risks to humans. Solar ultraviolet radiation*. Lyon: International Agency for Research on Cancer, 1992.

³ Armstrong BK. How sun exposure causes skin cancer. In: Hill D, Elwood JM, English DR, Eds. *Prevention of Skin Cancer*. Dordrecht: Kluwer Academic Publishers, 2004.

Melanoma

- the deadliest form of skin cancer
- if untreated, cancer cells can spread to other parts of the body
- appears as a new spot, or an existing spot, freckle or mole that changes colour, size or shape
- usually has an irregular or smudgy outline and is more than one colour
- grows over weeks to months, anywhere on the body (not just in places that get a lot of sun)

Statistics

- Skin cancer is the most common cancer in New Zealand, with New Zealanders at high risk of developing a skin cancer during their lifetime.
- Our skin cancer rates are also among the highest in the world. You'll often hear that breast cancer is the most common cancer in women and prostate cancer is the most common in men. That's because the New Zealand Cancer registry doesn't routinely collect data for the more common forms of skin cancer - only the most serious, melanoma. Non-melanoma skin cancers are often self-detected and are usually removed in doctors' surgeries. Skin cancers are certainly the most common cancers managed by GPs.
- Skin cancer is by far the most common cancer affecting New Zealanders. There are over 1,800 new melanoma cases and about 45,000 new non-melanoma cases every year. These are cases for which the diagnosis is confirmed by laboratory tests. There are possibly another 20,000 cases of non-melanoma skin cancers each year, which are immediately treated, but are not confirmed by a laboratory.⁴
- Melanoma is the most serious type of skin cancer. It is one of the leading cancers in New Zealand, the most common cancer in adolescence, and one of the most common cancers diagnosed in those under the age of 65 years.⁵ It is also potentially one of the more readily preventable cancers, given that in high UVR environments, such as NZ during daylight saving months, most cases are attributed to harmful UVR exposure.⁶
- In 2004, there were 1,896 registrations for malignant melanoma (949 in males and 947 in females). When standardised by age, melanoma was the fourth most common cancer in NZ for both women and men together. It also accounted for 249 deaths (152 males and 97 females).

⁴ O'Dea, D. (2000). *The costs of skin cancer to New Zealand*. Wellington: Wellington School of Medicine, University of Otago.

⁵ Sneyd, M.J. and B. Cox, *The control of melanoma in New Zealand*. New Zealand Medical Journal, 2006. 119(1242): p. 1-11.

⁶ Armstrong, B., *How sun exposure causes skin cancer: an epidemiological perspective*, in *Prevention of skin cancer*, D. Hill, E. D.R., and J.M. Elwood, Editors. 2004, Kluwer Academic Publishers: Dordrecht.

- Among males, melanoma was the fourth most common cancer after prostate, colorectal and lung cancers. Among males, 25 to 44 years, melanoma was the leading cancer site (122 registrations), and the cause of 17 deaths (equal with cancer of the brain). In the 45 to 64 year age group, melanoma (373 registrations) was the second leading cancer site for males after cancer of the prostate.
- In females, melanoma was the third most common cancer (947 cases) after breast and colorectal cancer. For females aged 15 to 24 years, melanoma was the most common cancer (12 cases). For those aged from 45 to 64 years, melanoma was the second most common cancer (358 registrations), while in the 65 to 74 year age group, melanoma was the fourth most common cancer for both women and men.
- However, despite a significant decline (14%) in melanoma registration rates among both women and men when compared with 1995 rates, these have remained relatively stable since 1996. Mortality rates (age standardised) have been stable since 1995.
- For Maori, there were 17 melanoma cases registered (5 males and 12 females) and 6 deaths recorded (4 males and 2 females) in 2004. Melanoma rates may be increasing among Maori, although rates based on small numbers are unreliable.

NOTE: The melanoma incidence rates in Australia and New Zealand are around four times as high as those found in Canada, the US and the UK.⁷

Costs of skin cancer

Skin cancer has also been estimated to cost the NZ health system in excess of NZ\$33M per annum. The personal costs are often significant, including the often necessary surgical interventions.⁸

Detection

Unlike many other forms of cancer, skin cancer is often visible – making it easier to detect in the early stages. Early detection is the key to successful treatment and reducing the impact of scars from surgery.

⁷ Australian Institute of Health and Welfare and Australasian Association of Cancer Registries. *Cancer in Australia 2001*. 2004.

⁸ O'Dea, D. (2000). *The costs of skin cancer to New Zealand*. Wellington School of Medicine, University of Otago: Wellington.

For the most serious type of skin cancer, melanoma, thickness is the most important factor. In general, the thinner the melanoma, the better the outcome. Some types of melanoma develop over a period of weeks or months (they become thick fast), while others tend to develop more slowly (months, sometimes years).

Although melanomas can occur anywhere on the body, the most common sites are the lower legs for women and the upper back for men. Some types can also occur underneath fingernails and toenails, on the palms of hands and on the soles of feet.

Melanomas usually appear as a changed or new freckle or mole. Often they have an unusual shape or colour or a variety of colours. However, in some cases they may not be coloured. Some types may itch, bleed or weep. Also, some may become raised quickly and could catch on clothing.

Non-melanoma skin cancers, including squamous cell carcinoma (SCC) and basal cell carcinoma (BCC), are far more common and tend to be less serious than melanomas.

SCCs are common in people over the age of 40. They often appear as a raised, crusty, non-healing sore, often found on hands, forearms, ears, face or neck of people who have spent many years outdoors.

BCCs are the most common and the least serious (if treated). A BCC is a pale, red or pearly, smooth lump, usually on the face or neck. Although more common in the elderly, BCCs frequently develop in sun-loving New Zealanders in their early 40s and sometimes younger.

All adults – particularly those aged 50 and over – should regularly check their skin (including skin not normally exposed to the sun) so they will be aware of any changes. They should use a hand-held mirror or ask for help from someone else to check difficult to see areas, such as their back and neck. It's important to check areas underneath the armpits, inner legs, ears, eyelids, hands and feet. Use a comb to move sections of hair aside and inspect your scalp.

People concerned about skin changes should seek advice from a doctor.