

ACTINIC KERATOSES

Actinic keratoses or “AK’s” are precancerous skin lesions with the potential to develop into squamous cell carcinoma. This type of skin problem typically develops on the sun exposed skin of individuals with a history of extensive unprotected sun exposure. They appear as persistent pinkish, dry looking spots that can be scraped off but usually reappear in the same place. Many individuals feel this problem is merely “dry skin.” It is not dry skin, it is sun-damaged skin and AK’s are precancerous skin lesions. They are very common along the sloping area of the upper forehead, balding area of the scalp, cheeks, nose, lips and tops of the ears. Sunbathers get them on the upper chest and calves. They are also quite common on the forearms and back of the hands. They typically present in varying degrees of severity ranging from immature thin, dry patches to mature raised, thickened and itchy or tender lesions. A small percentage evolve into squamous cell carcinoma. You should definitely be concerned if one of these areas becomes especially thickened, denser or deeper feeling, more bump-like or tender. Please let Dr. Cohen know if this happens.

Continued unprotected sun exposure only makes matters worse. It is especially important to protect the top of the head, ears and nose as well as the back of the neck where the sun’s rays are very direct. Lesions that develop on the top of the head are particularly stubborn and are more painful to treat. Treatment depends on the severity of the problem, any prior treatments, prior skin cancer and personal medical history. For those who have a few isolated lesions, liquid nitrogen freezing is the most expedient treatment. For individuals who have extensive involvement and a history of skin cancer, topical chemotherapy (Efudex, Carac, 5-fluorouracil) may be indicated. This is a challenging treatment because topical chemotherapy is extremely irritating, takes approximately 1 to 3 weeks, and, in some individuals, may result in a severe sensitivity reaction. For more fragile individuals or those with very mild involvement, no treatment (except cautious periodic observation) may be the best option. In all cases, it is important to watch for any signs to suggest the development of skin cancer. In any instance where there is a question, please let Dr. Cohen know.

Finally, not everything that looks like an actinic keratosis is one. You should be concerned about any lesion that has been treated and has failed to respond to treatment. Any other symptoms such as scabbing, seeping, bleeding or any of the signs mentioned above would suggest the possibility that skin cancer has developed. In these situations, biopsy may be indicated.

Written August 7, 2016
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