

once a month for irregularities is key to helping your doctor catch skin cancer in the early, most treatable stages. Here's how to give yourself a thorough once-over.

YOUR SELF-EXAM

• STEP 1 With a hand mirror, stand in front of a full-length mirror.

STEP 2

Inspect your entire front, back, and sides, raising your arms to get the best view.

STEP 3

Bend your elbows and look at all parts of your arms, hands (palms, fingernails), and underarms.

STEP 4

Sit in a chair and examine your legs and feet; don't forget your soles and between toes.

STEP 5

Parting your hair in sections, use the hand mirror to examine your scalp and neck.

STEP 6

Use the hand mirror to look at your buttocks and genitals.



Pay attention to these characteristics (called the ABCDEs) when you're doing a skin check. If anything looks suspicious, see a dermatologist sooner rather than later.

ASYMMETRY Most harmless moles are symmetrical: Draw an imaginary line through the middle, and the sides match.

BORDERS Smooth, even borders are normal. Ragged or notched ones may not be. **COLOR** Benign spots tend to be one color

throughout. Flag anything with multiple colors.

DIAMETER Cancerous moles tend to be larger than the eraser on a pencil (½ inch).

EVOLVING If a spot you've always had changes shape, color, or size, or starts to bleed, see a derm ASAP.

ANYTHING NEW "It's normal to get new moles up to age 40, but if you see a new one after that, it could be melanoma, the most dangerous type of skin cancer," says Albert M. Lefkovits, M.D., associate clinical professor of dermatology at the Mount Sinai School of Medicine.



WHAT YOU MIGHT FIND Your face is likely to have various spots: moles, freckles, pimples (even in your 30s and 40s), and sunspots, which are especially common after 50. These aren't cause for worry unless

they're irregular (see the ABCDEs) or have changed. "If a sunspot becomes larger, darker, or more irregular, it can be a sign of melanoma," says Lauren Ploch, M.D., a fellow of the American Academy of Dermatology. If you have a pimple that sticks around a few weeks or bleeds then heals and reappears, show it to your derm. **TAKE NOTE** Pink dry spots called actinic keratoses (AKs) should also be examined by a dermatologist because they can be precancerous, Ploch says. (They can be on other parts of the body, too.)





Your arms and neck are common areas for skin tags: soft, skin-tone benign spots. Also look for actinic keratoses. **TAKE NOTE** Check

your nails: A brown, often vertical band on a finger or toenail can be a sign of melanoma, says Steven Wang, M.D., dermatologist and cofounder of Dr. Wang Herbal Skincare.





The challenge is to make sure you see your back clearly. And don't forget to check under your breasts. In addition to moles, you might

find cysts or lipomas, which are bumps under the skin. Lipomas tend to feel spongy; a cyst feels more like a pea. They're not cancerous, but a bump is suspicious if it gets bigger, is painful, or feels hard.

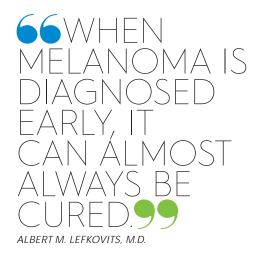
SCALP



You might notice small bright red spots, called cherry angiomas, which are nothing to worry about, says Maritza I. Perez, M.D., senior vice president for the Skin Cancer Foundation.

You might also notice brown or flesh-color moles or brown, waxy, scaly patches known as seborrheic keratoses.

TAKE NOTE If you've had those scaly patches a long time and they haven't grown, they are OK. If they're new or bleeding, get them checked, Perez says. Same goes for any spots if they're new, different, or causing any symptoms like bleeding or itching.







of the legs are common spots for skin cancer to develop, likely because we often forget to

apply sunscreen there. Aside from moles, freckles, and sunspots, you might also see pink or brown bumps called dermatofibromas.

TAKE NOTE Be sure to give special attention to the soles of your feet and between your toes. Melanoma is often diagnosed in these areas because the spots go unnoticed until they've progressed.

MY DERM WANTS TO CHECK A SUSPICIOUS SPOT. NOW WHAT?

She'll remove a small piece (biopsy) and send it to a lab. If the spot is classified as precancerous or one of the types of skin cancer—basal cell carcinoma, squamous cell carcinoma, melanoma—the doctor will surgically remove it (one method is scraping and burning) or have you apply a topical cream that destroys cancer cells. A type of surgery called Mohs is done on non-melanoma cancers. It involves sending layers of the spot to the lab during the removal process. The doctor stops once she gets to a cancer-free layer.

SIGNS OF A GOOD EXAM

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A yearly skin check from a board-certified dermatologist is a must. Make sure:

THE EXAM TAKES TIME. It shouldn't be a quick glance.

THE DOCTOR IS DETAIL-ORIENTED.

You should be wearing a gown so the derm doesn't miss anything. She should methodically examine your scalp, between your toes, your nails (don't wear nail polish), and also check your genital area.

THE OFFICE HAS GOOD LIGHTING.

Offen there's a spotlight above the exam table in addition to bright overhead lighting. ■

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