

Dermatology

How to be sun savvy

With summer approaching many of us will be heading for the beach and enjoying the sun.

We asked our Consultant Dermatologists Dr Bruce Gee and Dr Alison Bedlow for advice on sun protection, what to look for when you are checking your moles, and what to do if you are worried.

How can you protect yourself in the sun?

The aim of good sun protection is to ensure that ultra violet (UV) light exposure to your skin is not excessive. Although we need some UV light to produce vitamin D in the skin, many people especially during the summer, have too much exposure, leading to sunburn and an increased risk of developing skin cancer. It is also well known that skin ages through sun damage and this is why many beauty products contain sunscreen.

Simple steps to protect your skin (recommended by The British Association of Dermatologists)

- **Slip on a shirt**
 - Protect your skin with clothing and remember to wear a wide brim hat that protects your face, neck and ears and a pair of UV protective sunglasses
- **Seek out shade**
 - Step out of the sun before your skin has a chance to redden or burn. Keep babies and very young children out of direct sunlight. Stay out of the sun between 11am – 4pm when the sun is at its strongest.
- **Slap on sunscreen**
 - Sunscreens contain a Sun Protection Factor (SPF), which protects the skin and prevents sunburn as well as reducing your skin cancer risk.

When choosing a sunscreen look out for:

- High protection SPF (minimum SPF 30) to protect against UVB rays from the sun which cause sunburn
- The UVA circle logo and/or 4 or 5 UVA stars to protect against UVA rays, which cause skin ageing and sun damage

Apply plenty 15 to 30 minutes before going out in the sun and reapply every two hours and straight after swimming and towel-drying.

To book a consultation with Dr Bedlow or Dr Gee

T: 01789 412 994

E: enquiry@thestratfordclinic.co.uk

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When a sunscreen advertises that it permits “gradual tanning” this is likely to be because the UVA cover is poor. A single application of a sunscreen will not be as effective as repeated applications and we would recommend re-applying every 2 hours if in direct sunlight. The fairer your skin, the more care you will need to take in the sun.

How can you spot a cancerous mole?

Moles are made up of cells called melanocytes. When malignant change occurs, melanocytes grow uncontrollably and a cancerous mole (melanoma) can develop. Melanomas can develop in existing moles, but also ‘de novo’ i.e. appear where there was no pre-existing mole. When this happens the appearance of the mole changes. We use the ABCDE rule to help identify melanomas:

- A – Asymmetry (one half of the mole is different from the other)
- B – Border (the border is irregular)
- C – Colour variability (varying shades of pigment – more than one colour)
- D – Diameter greater than 6mm (but melanomas can be smaller than this)
- E – Evolution (a changing mole)



It is important that you are familiar with your skin and moles, and that you check every couple of months to make sure there are no changing moles, or new moles that are growing.

How are suspicious moles treated?

In a dermatology clinic a thorough skin and medical history will be taken and you will have a full skin examination. To help the dermatologist assess the mole a dermatoscope is used. A dermatoscope is a hand held device which uses polarised light and magnification to detect abnormalities whilst the mole is in the skin. Clinical photographs may be taken to help monitor changes in your moles.

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The Stratford Clinic, Alcester Road,
Stratford-upon-Avon, CV37 6PP

TEL: 01789 412 994

EMAIL: enquiry@thestratfordclinic.co.uk

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If the mole looks abnormal then it will be removed under local anaesthetic and sent for histological analysis (a biopsy). If the histology report confirms a melanoma then a second wider excision is usually required. If the mole is active or abnormal but not cancerous (known as dysplastic) then the initial excision is usually enough. Sun protection advice tailored to your skin type is also given.

What should you do if you are worried about a mole?

Seek medical advice. The earlier the diagnosis, the better the prognosis and the less likely it is that the cancer will have spread elsewhere in the body.

If your GP is suspicious that the mole could be a melanoma then it is likely you will be referred to a dermatologist. Alternatively, you can make a direct booking with Dr Bedlow or Dr Gee for a mole check at The Stratford Clinic (charges will apply). If you are using Private Medical Insurance you will require a GP referral.

Dr Bruce Gee and Dr Alison Bedlow are Consultant Dermatologists in The Stratford Clinic, Stratford-upon-Avon. Their NHS base is South Warwickshire NHS Foundation Trust.

For more information visit:

www.thestratfordclinic.co.uk

or call: 01789 412994

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