

Skin Cancer

What is basal cell carcinoma?

Basal cell carcinoma (BCC) is the most common but least dangerous type of skin cancer. BCCs usually appear on the head, neck or upper body.

BCCs start in the basal cells of the skin's top layer (the epidermis). They grow slowly over months to years and rarely spread to other parts of the body.

BCCs make up around 3 in every 4 of non-melanoma skin cancers.

See your doctor if you think you have a BCC, because it is easier to treat if diagnosed early on.

What are the symptoms of basal cell carcinoma?

BCCs usually develop on parts of the body that are often exposed to the sun, like the head, face, shoulders, arms and lower legs.

They often start with a subtle change in the skin, like a small bump or a flat red patch.

Signs of a BCC to look for include:

- a pearly spot or lump
- a scaly, dry area that is shiny and pale or bright pink in colour (although some BCCs are darker)
- a sore that doesn't heal
- a sore that bleeds

See your doctor if you notice any new spots or an existing spot that changes size, shape or colour. Visit the Cancer Council's website for [tips on how to check your skin](#).

What causes basal cell carcinoma?

The main cause of BCCs is overexposure to the sun's ultraviolet (UV) rays. People at greatest risk of developing a BCC include people with fair skin, people with a strong family history of BCC.

What are the types of basal cell carcinoma?

There are 3 types of BCC:

- superficial: confined to the top layers of the skin
- nodular: usually look like a rounded lump
- infiltrating: the most difficult to see, are often not detected until well advanced

Examples of basal cell carcinoma (BCC)



BCC on a 92-year-old male's scalp



BCC on a 74-year-old male's forearm
(it can resemble a sore that doesn't heal)

When should I see my doctor?

If you have had one BCC, you have a 50% chance of developing another one, so it is important to check your skin regularly.

Most people find BCCs by checking their own skin and looking for changes. See a doctor if you find:

- a spot that is different from other spots on your skin
- a spot that has changed size, shape, colour or texture
- a sore that doesn't heal
- a sore that is itchy or bleeds

How is basal cell carcinoma diagnosed?

If you notice any changes to your skin, your GP will examine your skin and may take a small sample from the spot to test in the lab (a biopsy). Your GP may refer you to a dermatologist (a doctor who specialises in skin) who will examine you and may order tests.

How is basal cell carcinoma treated?

BCCs can almost always be successfully treated. Treatment will depend on the type, size and location of the BCC, and on your age and health.

If the BCC was removed during the biopsy, you may not need any further treatment. Surgery is the most common treatment for a BCC. It involves cutting out the skin spot and nearby normal-looking tissue. A pathologist will check the tissue around the skin spot to make sure the cancer has been removed. If cancer cells remain, you may need more surgery.

Dr Naveen Agarwal

GENERAL AND LAPAROSCOPIC SURGEON

Other treatment options include:

- freezing the spot with liquid nitrogen (cryotherapy) to kill the cancer cells
- immunotherapy creams, liquids and lotions, to treat superficial BCCs
- photodynamic therapy, which uses a light source and cream to treat superficial BCCs

How is basal cell carcinoma prevented?

The best way to prevent BCCs is to protect your skin from the sun's UV rays. Avoid going out in the sun when the UV Index is higher than 3. Seek shade, and wear a hat, sunglasses and clothing that protect you from the sun. Always use an SPF30+ (or higher) sunscreen.