Research

Sun Safety Practices in US Schools

Exposure to UV radiation is a leading cause of skin cancer. Intermittent recreational exposure more often leads to sunburn, which increases melanoma risk. School sun safety practices such as avoiding peak sun hours, allowing time for students’ sunscreen application, and making sunscreen available to students may mitigate this risk. In this nationally representative, cross-sectional survey, Everett Jones and Guy demonstrate that sun safety practices are uncommon among schools, especially high schools. Public health and medical community interventions could be instrumental in increasing adoption of sun safety practices with an aim to reducing skin cancer morbidity and mortality.

Global Burden of Skin Disease

Global disability and mortality due to skin disease has been investigated by the Global Burden of Disease (GBD) 2013 Study. In this observational study, Karimkhani et al demonstrate that skin disease contributed 1.79% to the global burden of disease measured in disability-adjusted life years (DALYs). Skin diseases arranged in order of decreasing global DALYs include dermatitis, acne vulgaris, psoriasis, urticaria, viral skin disease, fungal skin diseases, scabies, melanoma, pyoderma, cellulitis, keratinocyte carcinoma, decubitus ulcer, and alopecia areata. Using an objective measure of burden, such as the DALY, allows for comparison of diverse diseases across geography and time.

O6-Benzylguanine and Topical Carmustine for MF

The efficacy and safety of combination O6-benzylguanine and carmustine therapy for patients with stage I through stage IIa mycosis fungoides (MF) was first demonstrated in a phase 1 trial. However, the maximum tolerated dose was not achieved. In this phase 1-2 clinical trial, Tacastacas et al demonstrate that carmustine in combination with dual-dose O6-benzylguanine is an effective, well-tolerated, skin-directed therapy for early-stage MF. Compared with single-dose treatment, dual-dose therapy resulted in higher overall response rates and reduced total carmustine doses but was associated with more cutaneous adverse events.

Information Framing and Patient Decisions to Treat AK

Actinic keratosis (AK) is a skin growth induced by UV light exposure that requires long-term management because a small proportion of cases can progress to squamous cell carcinoma. The influence of how clinicians frame information to patients may affect decision making about AK. In this survey study, Berry et al demonstrate significant differences in the proportions of patients who would decide to receive treatment for AK based on alterations in the presentation of risk of malignant transformation. Physicians should offer a more thorough explanation of the risk associated with AK and be cognizant of the influence of statements on patient’s decision making.

Mohs vs Wide Local Excision for Melanoma

Melanoma in situ (MIS) is increasing in incidence, and expert consensus opinion recommends surgical excision for therapeutic management. Currently, wide local excision (WLE) is the standard of care. In this retrospective cohort review of a prospective database, Nosrati et al demonstrate no significant difference in recurrence at 5 years, overall survival, or melanoma-specific survival in MIS treated with WLE vs Mohs micrographic surgery (MMS). Further study to assess functional or perceived cosmetic differences or adverse outcomes for patients treated with MMS vs WLE would be illuminating.

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