Here are some questions asked most often of dermatologists.

Q. I heard that there are different types of skin and that I should know what kind I have to best take care of it. What are the different skin types?

A. There are six traditional skin types that dermatologists use to classify people. They are based on the way your skin responds to the sun. Each of the skin

<table>
<thead>
<tr>
<th>Skin Type</th>
<th>Natural Skin Color</th>
<th>Response to Sun Exposure</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>White</td>
<td>Always burns, never tans</td>
</tr>
<tr>
<td>II</td>
<td>White</td>
<td>Always burns, tans minimally</td>
</tr>
<tr>
<td>III</td>
<td>White</td>
<td>Burns minimally, tans gradually and uniformly</td>
</tr>
<tr>
<td>IV</td>
<td>Light Brown</td>
<td>Burns minimally, always tans well</td>
</tr>
<tr>
<td>V</td>
<td>Brown</td>
<td>Rarely burns, tans darkly</td>
</tr>
<tr>
<td>VI</td>
<td>Dark Brown</td>
<td>Never burns, tans darkly</td>
</tr>
</tbody>
</table>

Know your skin type like the back of your hand

Thomas Fitzpatrick, professor emeritus of dermatology at Harvard University and a pioneer in the field of pigment biology, defined six types of skin.
types has a different risk for skin cancer and premature aging from the sun. The table on page 36 shows the six types.

Q. I have a lot of different spots and bumps. How can I tell if I have skin cancer?

A. A common sign of skin cancer is a spot that bleeds. Another red flag is a spot that heals up only to come back in a few weeks (that is a favorite trick of basal cell cancer and squamous cell cancer). Although most of the growths on your skin are not skin cancer, you should learn the warning signs of early melanoma, another form of skin cancer (see chapter 22, “Melanoma”). Ask your dermatologist to teach you what to look for. Most will be glad to oblige. Also see the “Color Atlas of Your Skin,” in the insert.

Q. I’ve been told that I have a skin cancer on my nose. I’m confused about the treatment because my doctor told me there are different ways to remove it. How can I know what is best?

A. The two most common types of skin cancer are basal cell cancer and squamous cell cancer. The majority of these occur on sun-exposed areas such as the face. Treatment options include scraping and burning it off, excision, or excision with the Mohs micrographic surgery technique. In the Mohs method the cancer is removed layer by layer and the tissue checked under the microscope until complete elimination of the cancer cells is confirmed.

Q. My doctor told me I could go to a Mohs surgeon or plastic surgeon for treatment of my skin cancer. What should I do?

A. Treatment of your skin cancer really involves two stages. The first, removal of the skin cancer in its entirety, is often best accomplished with the Mohs micrographic technique, if indicated (see page 262). After the skin cancer is removed, repair of the wound must be addressed. Most Mohs surgeons in the United States are trained in plastic reconstruction of skin cancer wounds. An
advantage of Mohs micrographic surgery is that the reconstruction can be done at the same time as the cancer removal. In the case of very large or complex cases it makes sense to involve reconstructive plastic surgeons who have experience working with Mohs surgeons. In these circumstances, you will benefit the most from the team approach. One main advantage of the Mohs method is the high cure rate and optimal cosmetic result. In fact, sometimes the limited wound that results may heal well naturally, without any plastic surgery.

Q. My doctor says he does a treatment “just like Mohs surgery.” What does he mean?

A. Although the Mohs method is used only for certain skin cancer situations, it is very specific. Individuals are specially trained in this technique in the course of a full fellowship that lasts a year or more. Doctors must be board certified before being eligible for the fellowship. It is best to determine if the person doing the Mohs surgery has done a fellowship in it.

Q. If I have plastic surgery, will that mean there will be no scar?

A. No. All plastic surgery results in a scar. What most patients mean by this question is whether the scar will be disfiguring or noticeable. Many different specialists use the same plastic surgery techniques that are designed to hide the scar and make it as unnoticeable as possible. Remember that after any surgery the healing process continues for up to twelve months, so no conclusions can be made about the final cosmetic results until the surgery site has had a chance to mature.

Q. I am concerned that if the basal cell cancer on my nose is treated it will be disfiguring. Right now I can cover it with makeup and it is growing very slowly if at all. It has been present for two years, I think. Why not leave it alone? I am sixty years old now and if it continues at this pace I should be OK.
A. It is important to remember that basal cell cancer is a cancer, even though it doesn’t spread in the bloodstream. If neglected it will continue to grow. It is already likely larger under the surface than it appears to you. If you delay treatment it will only be more of a problem later.

Q. Can you recommend a good cleanser and moisturizer?

A. The market is now filled with good products—indeed, there may be too many to choose from. To help you select a product that does the job without damaging your skin, follow these simple guidelines:

1. Use a nonsoap cleanser that is hypoallergenic. This should be marked on the label.
2. Use a moisturizer that is unscented and hypoallergenic.
3. Wash your face with cleanser no more than once a day.
4. Apply moisturizer sparingly. If your sheets are stained in the morning, you’re using too much.

Q. What are these brown spots on my skin?

A. Many people are concerned about different brown spots they notice on their skin. This is in part because people are now educated about how to look for melanoma, and because such spots, often signs of aging, are disconcerting. There are many different types of “brown spots”: freckles, moles, liver spots, even skin cancers. So it is important to bring any dark spot of concern to you to your dermatologist’s attention.

Q. Is there anything I can do to prevent wrinkles?

A. There are four basic things you can do to help:

1. Practice good sun protection.
2. Don’t smoke.
3. Get lots of rest.
4. Keep your skin well moisturized; it will lessen the appearance of fine lines.
Q. My skin is so dry—what can I do?

A. 1. Avoid forced-hot-air environments.
2. Keep your shower brief—less than three minutes.
3. Avoid hot water.
4. Pat yourself dry.
5. Use a good moisturizer, applying it right after you shower or bathe. Moisturizing at this stage, when your skin has already been hydrated, helps lock in the moisture. Be careful when you use bath oils, as oily skin combined with a wet tub or bathroom floor is a hazardous situation. Slipping is easy.

Q. How can I make my pores smaller?

A. You can’t, at least not permanently. However, facials, astringents, and Retin-A may help decrease the amount of debris from your follicle that builds up in your pores, making them more noticeable.

Q. Are fruit acid peels helpful?

A. Fruit acid peels are widely used now and the active ingredients, alpha-hydroxy acids, have found their way into many over-the-counter moisturisers. They are effective to some degree as peeling agents. To eliminate many fine facial lines, consult with your dermatologist about laser resurfacing, chemical peel, or newer techniques such as coblation.

Q. What should I do for sun protection, and will it help?

A. Avoiding the sun will help you minimise aging of your skin and decrease your chances of skin cancer. It is not a magic program, however. Since most sun exposure is acquired in childhood, make sure you protect your children from the sun. Even if you are over sixty-five, it still pays to protect yourself from the sun.

Here are some tips:
1. Use a sunscreen with an SPF (sun protection factor) of 15 or higher and make sure that it filters out both ultraviolet A and B radiation.

2. Stay out of the sun when it is strongest—read in the shade. New guidelines suggest avoiding the sun between 10 A.M. and 4 P.M.

3. Wear a broad-brimmed hat.

4. Wear sun-protective clothing if you are outside frequently.

Q. Is there such a thing as a safe tan?

A. No. A tan is a sign that your skin has been damaged by the sun. To avoid premature lines and wrinkles, practice good sun protection.

Q. Are tanning booths OK?

A. No. Tanning booths make use of artificial ultraviolet radiation that can be as damaging to the skin as natural sunlight.

Q. Are self-tanning products helpful and safe?

A. These compounds used to make you look like a walking carrot. They have improved a great deal over the years and are easier to apply. The active chemical, dihydroxyacetone, interacts with proteins in the epidermis to darken the color of the skin.

It’s important to realize that these compounds provide no sun protection. When you go out in the sun, you must wear sunscreen as well. Self-tanning products are helpful if they give you the color you want and help you avoid the sun.
Finding a physician is a bit like figuring out who to call when the IRS comes knocking. Except for one thing—all you’ve got to lose to the IRS is your money and your property. When issues of health knock at your door, you’ve got your life and well-being to think about. Choosing your doctor carefully is especially important in an era of managed care, overburdened schedules, and contradictory health information in the media.

In stressful moments of illness (or worry about illness), our minds focus on only one thing: getting the best help fast. Particularly when under pressure, it is difficult for the average consumer to know how to judge the quality of a dermatologist, let alone whether he or she has the appropriate expertise for the problem at hand. Because we so often leave such choices until the last minute, we may panic. Most people spend more time selecting a vacation destination or buying a car than they do choosing a family physician or specialist.

Meanwhile, a small industry has arisen around the desire to rank, rate, and reveal the “best” doctors. Magazine articles and books attempt to tell you who is the best doctor in America, the best doctor in your city, the best doctor in a given specialty, the best doctor anywhere for anything. Such reports can provide some guidance as long