

Skin Sense

facts from the experts

Invisible Sun Damage—Do You Know What Lies Beneath the Surface?

(NAPSA)—Science has long recognized the role of ultraviolet (UV) rays in causing serious skin diseases. UV rays can suppress the skin's immune function and damage DNA, which may cause your skin to burn and age prematurely, and could also lead to skin cancer. Even worse, too much sun over time can diminish your skin's ability to defend or repair itself as it should. A wide variety of problems can result, ranging from wrinkles, freckles, and sun spots to precancerous and cancerous skin conditions. Unfortunately, unlike these visible problems there are additional problems that are not always detected by the naked eye. If you have noticeable damage on the surface of your skin, keep in mind there may be additional, unseen damage nearby. Therefore, it is crucial to recognize that the problems you can see may just be the tip of the iceberg.

One common example of sun-diseased skin is actinic keratosis or AK. This is considered a precancerous skin condition affecting over 10 million Americans each year. According to the American Academy of Dermatology, if left untreated, AK lesions can progress to squamous cell carcinoma (SCC), the second-leading cause of skin cancer deaths in the United States. Therefore, it is important to treat AK as soon as it is diagnosed so you have a greater chance of preventing further damage.



It's important that you protect your skin all year, not just in the summer.

Actinic keratosis can take a long time to develop, most often appears after age 40, and becomes more prevalent as you age. Actinic keratosis lesions typically appear as rough, red, scaly patches, or crusts on the skin. They usually measure less than one-quarter inch across and are found primarily on areas of the body exposed to the sun. Fair-skinned people who live in sunny climates and those who have a history of chronic sun exposure are the most likely to develop AK.

There are several approaches to treating AK. These include freezing, surgical excision, scraping, lasers, chemical peels, dermabrasion, photodynamic therapy, and topical prescription medications such as 5FU, diclofenac and imiquimod. One option is Aldara™ (imiquimod)

Cream, 5%, a treatment prescribed for certain types of AK on the face or scalp. The first immune response modifier approved for AK, Aldara Cream assists the skin's immune system to destroy sun-damaged cells and clear AKs that are visible as well as the ones developing nearby.

In clinical studies of AK using Aldara Cream, the most common side effects involved skin reactions in the application area. These included redness, swelling, erosions, weeping, scabbing, itching and burning. Most skin reactions were rated mild to moderate. Exposure to sunlight (including sunlamps) should be avoided or minimized during use of Aldara Cream because of concern for heightened sunburn susceptibility. Patients should be warned to use protective clothing when using Aldara Cream.

In order to reduce the risk of AK and skin cancer, the American Academy of Dermatology recommends adopting a comprehensive sun protection program that includes wearing a broad-spectrum sunscreen with a sun protection factor (SPF) of 15 or higher; wearing protective clothing; avoiding the sun between 10 a.m. and 4 p.m., when UV rays are strongest; and seeing your dermatologist annually.

For more information about Aldara Cream, AK or for full prescribing information, visit www.Aldara.com.