

DERMATOLOGY

From page 1

so often found in those under 30, but it's not restricted to the younger set. "Anyone can get it," says Kagen. "They don't have to be older." This dangerous cancer is found in people of all ages, however.



KAGEN

Surprisingly, sun exposure is not a necessary factor for the affliction. "That's the scary part," says Dr. Kimberly Davidson, also of Riverchase, "because the deadliest form of melanoma can be on the bottom of your foot. You can get it in your eye, your mouth, anywhere," she explains. "That's why it's so frightening. Most people think you can only get melanoma where you've gotten sun, but that's a huge misconception."

Genetic pre-disposition plays a big part in who gets melanoma. What makes it deadly is its ability to metastasize, meaning it can spread to other organs. "It's very serious," says Dr. Davidson. "We might refer to a surgeon to remove it. It may require checking lymph nodes."

Warning and awareness

Melanoma warning signs should be heeded. "Look for any dark, irregular spot," says Davidson. "Anything that

has irregular borders, dark brown to black, and usually bigger than a pencil eraser size." And remember, it can be anywhere on the body. Dr. Stanley Schwartz, of Associates in Dermatology, points out another misconception. "Flat moles can be a problem. With melanoma, it can start as a flat mole that's irregular in shape or color. So we want to keep track of the size and shape. More than two colors in a mole is a warning sign. Or if it's changing in size, or any way."



SCHWARTZ

Dr. Davidson says a typical scenario involves misdirected concern. "The lesions that most people are concerned about, we aren't concerned about at all. I see this time and time again. Someone comes in for a spot that they're concerned about," she explains, "and they don't want me to look for anything else, but we'll find something suspicious. That's very common."

Two good preventative measures are regular full-body exams, and establishing your own baseline. "People should get to know the location, size, shape, and color of their moles," says Dr. Schwartz.

Skin cancer 101

The most basic forms of skin cancer are basal cell and squamous cell carcinoma. Basal cell "can present as a red pimple-like lesion," explains Dr. Davidson, "or as kind of a pink, scaly patch that looks like psoriasis. Anything new on the skin that's itchy, bleeding, getting scaly or crusty and won't heal is suspicious, especially in sun-exposed areas," she says, "but it can happen

"The earlier we catch a melanoma, the better a chance we have of curing it," he says. "We have up to a 99 percent cure rate in the early stages. The ways we're going to catch them in early stages is by having regular check-ups by a dermatologist, and regular skin exams at home."

—Dr. Stanley Schwartz

anywhere. Those are very easily treated," she says. Squamous cell, also easily treated, "can start like a wart-like growth," explains Dr. Schwartz, "usually on sun-exposed areas."

MOHS micrographic surgery is a beneficial way to rid a body of basal and squamous cell carcinoma. "It's done right in the office," says Dr. Keith Harris, of Harris Dermatology. "MOHS is a specialized surgical technique where we remove the skin cancer in small layers and go right to a



HARRIS

microscope. What it basically does is allow you to target where you're cutting, so you take out as little normal skin as possible, and patients have the smallest scars. It has the highest cure rate of any treatment that we have right now. My brother Brian is the one that does that in the office," Harris says.

Physicians must be certified in MOHS micrographic surgical training, so they can interpret what the microscope is telling them during each procedure. Dr. Andrew Jaffe, Medical Director at Riverchase, is also certified in MOHS.

"A lot of times, melanomas can stay in a non-aggressive stage for a long time," says Dr. Schwartz, but sadly, that's not always the case. "The earlier we catch a melanoma, the better a chance we have of curing it," he says. "We have up to a 99 percent cure rate in the early stages. The ways we're going to catch them in early stages is by having regular check-ups by a dermatologist, and regular skin exams at home."

Non-Invasive cure and control

Dermatologists are taking advantage of a new medicine on the market, Aldara cream, which is used for treating basal cell carcinoma. "It works by getting the body's immune system to recognize and fight off the skin cancer cells," says Dr. Schwartz, "but it's not always the best choice for everyone. The deeper ones respond better to surgery. But it does give us a non-surgical option that's relatively new. It takes six weeks and can cause a lot of inflammation," he explains, "but if the skin cancer was on your nose and you didn't want to have a scar. . . it depends on where it is. But it's nice to have these new things available."

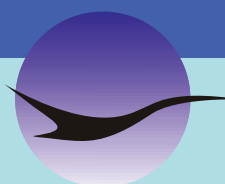
Dr. Davidson and her colleagues at Riverchase are now using a light treatment that treats pre-cancers. "It's called photodynamic therapy," she says. "Patients come into the office, and we put medicine on their face, and then illuminate the medicine with a blue light which activates it, and it destroys the pre-cancers. We sometimes actually do hands, arms, and chest also. But

GOT A DERMATOLOGIST?



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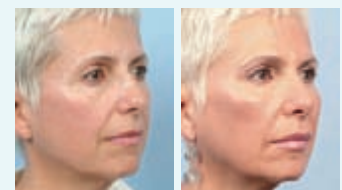
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