Rates of non-melanoma skin cancers (NMSCs) are on the rise among Hispanics and Asians in the US. Interestingly, while most cases of NMSCs in whites occurred in men, among Hispanic and Asian subjects, women had higher rates of skin cancers. Hispanics had significantly more skin cancers occurring in the “central face.”

A review of population-based cancer incidence data from the National Program of Cancer Registries and the Surveillance, Epidemiology and End Results (SEER) Program shows that melanoma incidence rates have decreased slightly among Hispanic men and women, but the data nonetheless offer cause for concern:

• Although Hispanic males overall had higher rates of melanoma than females, women younger than 55 had higher rates of melanoma than males.
• Melanomas with poorer outcomes, such as nodular (NM) and acral lentiginous melanoma (ALM), were more common among males.
• Incidence rates for later-stage diagnosis and thicker tumors were significantly higher among Hispanic men than among women.

Other analyses have found that nonwhites are more likely to have advanced and thicker melanomas at diagnosis and lower melanoma-specific survival compared with whites. The incidence rate of acral lentiginous melanoma was significantly higher among Hispanics than among whites, and higher than this diagnosis for any other ethnic group.

A delay in diagnosis among non-white patients is leading to increased mortality for these individuals. In one study, approximately 7.3 percent of Hispanic patients with melanoma died as a result of their skin tumors, versus 4.8 percent of non-Hispanic patients. Researchers cited later stage at diagnosis as the primary explanation for the difference in death from melanoma between Hispanic and non-Hispanic Whites.

Multiple factors, including potential disparities in access to healthcare, may account for delayed diagnosis of skin cancers among Hispanic patients. However, research shows that, among Hispanic individuals, attitudes toward sun protection and self-examination are potentially putting patients at risk —thus an area where community education and interven-

Skin Cancers Among Hispanic Patients: Sounding the Alarm

People of all skin types, including Asians and Hispanics, benefit from education on sun-protection & skin cancer.

BY JOEL L. COHEN, MD
tion by the dermatology community may be able to make a big impact.

A survey of outdoor workers found that sixty-nine percent never or rarely wore sunscreen while working outdoors. Those more likely to wear sunscreen were females, had a higher level of education, and resided at a higher latitude. In one study, fewer than 10 percent of Hispanics in the US reported ever having a physician skin exam (PSE). Individuals born outside of the US and those who did not speak mostly or only English had lower rates of PSEs. Interestingly, individuals of Mexican or Dominican descent were less likely to have undergone PSEs, while those of Cuban or Puerto Rican descent were more likely to have undergone PSEs.

Just roughly 10 to 30 percent of Hispanics report wearing sunscreen either most of the time or always. Non-Hispanic whites report sunscreen rates of 16.5-35.9 percent. Roughly 25 percent of Hispanics reported wearing hats (a rate slightly higher than for whites).

CONFRONTING MYTHS

There appears to be a belief among many Hispanic individuals that a darker skin tone protects from melanoma and NMSC. While darker pigmentation provides protection relative to more lightly pigmented skin, that protection is nominal. Non-white patients can and do develop skin cancers, and dermatologists must educate them about this reality.

It is imperative that we as skin care physicians take the opportunity to instruct all patients on sun protection strategies and appropriate use of sunscreens. Encourage patients to undergo annual skin self-exams and instruct them how to conduct skin self exams.

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