SKIN CANCER PREVENTION AND EARLY DETECTION KEY MESSAGES

New Zealand Skin Cancer Primary Prevention and Early Detection Strategy

2024 – 2027

DRAFT FOR CONSULTATION
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MelNet

About this document

This document has been prepared by the Melanoma Network of New Zealand (MelNet) on behalf of the New Zealand Skin Cancer Primary Prevention and Early Detection Strategy Working Group, with support from Te Whatu Ora, Health New Zealand.

It contains key messages on:

The purpose of these key messages is to facilitate consistency in the communication of skin cancer messaging to the general public and help organisations involved in skin cancer prevention and early detection shape their messaging to their target audience.

The information contained in this resource has been developed in partnership with a range of sector experts and key stakeholders.

It is to be read in conjunction with:

1. The New Zealand Skin Cancer Primary Prevention and Early Detection Strategy
2. Supplementary information to the New Zealand Skin Cancer Primary Prevention Strategy.

1. Skin cancer facts

- Skin cancer is by far the most common cancer in New Zealand, with eight out of every ten cancers being diagnosed as skin cancer.
- There are more non-melanoma skin cancers diagnosed in New Zealand each year than all other cancers combined. While they are rarely fatal, they contribute a considerable health and cost burden to New Zealanders and the health system.
- The vast majority of skin cancers are preventable (around 90%).
- Most skin cancers are caused by too much UV radiation (UVR), either from the sun or artificial sources such as sunbeds.
- UV radiation can't be seen or felt and can be harmful even on cool and cloudy days.
- Exposure to the sun that causes harm at any age increases the risk of skin cancer.
- The chances of developing skin cancer, including melanoma, increase with age.
- Skin cancers are very common among people aged 50 years or older.
- Melanoma is the 4th most common cancer among people aged 25 to 39 years in New Zealand.
- UVR exposure during a person's first 18 years of life is the most critical for cancer-causing skin damage.
- Melanoma is less common than non-melanoma skin cancers but is responsible for the most deaths from skin cancer.
- New Zealand and Australia have the highest rates of melanoma in the world.
- New Zealand has the highest mortality rate from melanoma in the world.

2. Skin cancer protection

Protect your skin [*or*, Be SunSmart]:

- when the ultraviolet index (UVI) is 3 or above
- near water as reflections from water and sand can increase UVR
- at high altitudes, especially near snow, which strongly reflects UVR.

There are three ways to know when UVI levels are 3 or above:

- Sun Protection Alert (www.sunsmart.org.nz)
- UVNZ free smartphone app (https://www.sunsmart.org.nz/resources/uvnz-app/)
- NIWA website UVI forecast for specific sites (http://www.niwa.co.nz/UV-forecasts).

How to protect your skin [*or*, How to be SunSmart]:

- Slip on clothing that covers as much of your skin as possible
- Slip into the shade
- Slop on sunscreen that is ideally SPF 50, broad-spectrum and water resistant
- Slap on a broad-brimmed hat that shades your face, head, neck and ears
- Wrap on close fitting sunglasses
- Use all five forms of sun protection: clothing, shade, sunscreen, hat and sunglasses
- Don't use sunbeds.

Clothing

- If you can see skin, UV radiation can get in and do damage.
- Clothing should cover as much skin as possible, such as a top with long sleeves and a collar, and long pants, skirt or lavalava. The more skin you cover, the more protected you are from the sun.
- Fabrics with a tighter weave and darker colours give better protection from the sun – if the fabric doesn't let much light through, it won't let much UVR through either.
- Some clothing uses UV protective fabrics known as Ultraviolet Protection Factor or UPF. A UPF of at least 30 offers good protection and UPF50+ offers excellent protection.

Shade

- Leafy trees, buildings, shade sails, large umbrellas and portable sunshades all provide shade from the sun.
- Plan outdoor activities for early or later in the day when UVR levels are lower. Avoid scheduling outdoor activities in the middle part of the day.
- It's important to still use a hat, sunglasses, clothing and sunscreen.

Sunscreen

- When applied correctly and used regularly, sunscreen is effective in reducing the incidence of skin cancer.
- Sunscreens sold in New Zealand must meet standards that ensure their safety and efficacy.
- When the ultraviolet index (UVI) is forecast to reach 3 or above, sunscreen that is ideally SPF 50+, broad-spectrum and water-resistant should be applied to the face, ears, scalp if uncovered, neck and all parts of the body not covered by clothing. Ideally, this would form part of the morning routine. This protects the skin from the harmful effects of everyday sun exposure.
- Sunscreen should be applied 20 minutes before going outside and re-applied every 2 hours or more frequently if swimming, sweating or towel drying.
- An average-sized adult needs one teaspoon of sunscreen for their head and neck, each limb and for the front and the back of the body.
- Sunscreen should be used along with the four other sun protection measures (clothing, hats, sunglasses, shade and scheduling outdoor activities to avoid the middle of the day).
- Sunscreens should not be used to promote tanning, but rather as one of five strategies (along with shade, hats, clothing, sunglasses) to reduce exposure to harmful UVR.
- Sunscreen is not recommended for babies under six months of age. Babies should be kept out of direct sun when UVI is 3 or higher and covered with clothing.

Hat

- Hats should have a wide brim or flaps covering the ears and neck.
- Caps and visors leave large parts of the face, neck and ears exposed to UVR.

Sunglasses

- Close-fitting wrap-around style sunglasses are best for protecting eyes from harmful UVR.
- Not all sunglasses protect from UV radiation - always check the label for sun protection rating.

3. Skin risk factors

Anyone in New Zealand can develop skin cancer though it is most common in people with the fairest skin types.

The main risk factor for skin cancer is regular unprotected sun exposure.

Other factors that may contribute to skin cancer, including melanoma, include:

- family or personal history of skin cancer
- fair skin
- red, blonde or fair hair
- skin type that burns easily
- skin damage due to sunburn
- sunbed use
- many moles and larger moles.

Māori and Pacific people have a much lower chance of developing melanoma, but often have more serious melanomas. It is skin type, not ethnicity that predicts risk.

Primary care practitioners can help determine a person's skin cancer risk using clinical risk predictor tools.

4. Sun protection and vitamin D

- It is important to balance the risks of skin cancer from sun exposure with maintaining adequate vitamin D levels. This is not the same for all New Zealanders.

- The amount of sun exposure an individual needs to make vitamin D depends on UVR level, skin type, amount of skin exposed, and lifestyle.

- Vitamin D levels are increased by regular small sun exposures - greater exposures result in only small additional increases.

- Adults who are unable to maintain adequate vitamin D levels, should speak with their doctor about supplementation.

For adults who have pale skin that burns easily and never tans are at high risk of skin cancer:

- Sun protection should always be used when UVI levels are forecast to reach 3 or above and time outdoors should be avoided when UVI levels are high.
- When UVI levels are between 1 and 2, sun protection should be used when time spent outdoors exceeds two hours across the day.
- Anyone with a history of skin cancer is automatically considered high risk.

For adults who have light brown or olive skin that tans and minimally burns are at intermediate risk of skin cancer:

- Sun protection remains important and should be used when UVI levels are forecast to reach 3 or above.
- A small amount of time spent outdoors most days will maintain adequate levels of vitamin D.
- When UV levels are between 1 and 2, sun protection should be used when time spent outdoors exceeds two hours across the day.

For adults who have darker skin that rarely or never burns are at low risk of skin cancer and greater risk of developing vitamin D deficiency:

- Spend time outdoors on most days of the week with some skin uncovered.
- Sun protection should be used for extended periods outdoors when the UVI is 3 or above.

5. Skin cancer early detection

- Early detection of skin cancer can lead to earlier and more effective treatment.
- If left untreated, melanoma can spread rapidly to other parts of the body.
- Check your skin regularly so you will be aware of any changes.
- Check your entire body, including skin not normally exposed to the sun, along with the soles of your feet and under your toenails.
- Ask someone else to check difficult-to-see areas like the back, neck and scalp.
- Look for a spot, freckle or mole that is new or existing and:
  - has changed in colour, shape, or size
  - differs from others (an 'ugly duckling')
  - is sore, itchy or bleeds
  - is firm, growing or becomes raised quickly.
- If you have such a spot, freckle or mole, you should consult a health care practitioner trained in the early detection and diagnosis of melanoma, including the use of a dermatoscope (a skin surface microscope). This could be a GP, a nurse, or a specialist such as a dermatologist, surgeon, or plastic surgeon.