Actinic Keratosis

Actinic keratosis is a growth on the skin that is considered to be precancerous. That means it could develop into skin cancer if it is not treated. About 1% of such growths will turn into skin cancer, therefore, it is important that the skin growth is removed.

An actinic keratosis might be as small as a pinhead or as big as a quarter. They appear most often on areas of skin that get a lot of sun exposure throughout your life. These include the bald scalp, face, ears, lips, upper back and the backs of hands and forearms. An actinic keratosis usually looks like a scaly, rough spot of skin. Sometimes there might be a little tag of pink or gray skin growing off them.

CAUSES

Sun damage causes abnormal growth of skin cells. Actinic keratoses (more than one growth) are the result of sun damage. You are more likely to develop them if you:

- Have light-colored skin.
- Are older (actinic keratoses increases with age).
- Sunburn easily.
- Have spent a lot of time in the sun.
- Have had a job that involves a lot of outdoor work, such as a lifeguard or farmer.

SYMPTOMS

- Blotchy, red and white patches of skin.
- A skin patch that feels rough (like sandpaper), scaly or crusty.
- Patches of dry, white skin on the lips.
- A patch of skin that is thinner than normal.
- Skin that is tender to the touch.
- Although a rare symptom; an area of skin that bleeds.

DIAGNOSIS

To decide if you have actinic keratosis, your caregiver will probably:

- Ask about symptoms you have noticed.
- Ask about your history of exposure to the sun.
- Ask about your overall health history.
- Examine the skin that concerns you. The caregiver may want to look at skin on other parts of your body that have had a lot of sun exposure.
- Order a biopsy. A biopsy is the removal of a small sample of tissue from the patch of skin. It is then examined for signs of cancer.

TREATMENT

Actinic keratosis can be treated several ways. Most of the time, treatments can be done in a clinic or in your caregiver's office. Be sure to discuss the different options with your caregiver. They include:

- Surgical removal (*curettage*). A special surgical instrument (*a curette*) is used to scrape the growth.
- *Cryosurgery*. Liquid nitrogen is used to freeze the patch of skin. Often it is sprayed on the area. The growth will eventually fall off.
- 5-FU (*5-fluorouracil*) cream. The cream is applied several times a day for up to 4 weeks. The skin often becomes red and irritated, but the growths will go away. This method is often used if actinic keratoses or the skin is badly damaged.
- Chemical peel. Chemicals are applied to the skin on a small spot. The outer layers of skin at that spot are then peeled off.
- Photodynamic therapy. A drug (*photosensitizing agent*) is put on the skin before exposing the skin to a

strong light. Together, the drug and strong light destroys the actinic keratoses.
- *Imiquimod cream*. A medicine usually applied to growths on the face or scalp.

PROGNOSIS

Early treatment of actinic keratoses usually gets rid of the growths without further worries.

POSSIBLE COMPLICATIONS

- Skin irritation or redness from the treatment.
- Scarring where the patch of skin was removed.
- Development of skin cancer. This rarely happens if the growths are removed early on.

HOME CARE INSTRUCTIONS

- An adhesive bandage, and possibly gauze, will cover the treated area.
  - Change and remove the bandage as directed by your caregiver.
  - Keep the treated area dry as directed by your caregiver.
- Apply any creams that your caregiver prescribed. Follow the directions carefully.
- To prevent future skin damage:
  - Wear sunscreen year-round, not just in the summer. The winter sun can damage skin, too.
  - Wear long-sleeved clothing and wide-brimmed hats.
  - When possible, avoid midday exposure to the sun.
- If you want to look tan, try sunless tanning products (lotions and sprays). Avoid tanning beds.
- Commit to regularly checking your skin for new changes.
- Visit a skin doctor (*dermatologist*) every year for a skin exam.

SEEK MEDICAL CARE IF:

- The treated area of skin does not heal and becomes more irritated, red or bloody.
- You notice other patches of skin that are similar to the actinic keratoses that were treated.

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