Basal cell carcinoma

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What are basal cell carcinomas (BCCs)?
Basal cell carcinomas, sometimes called ‘BCC’ or ‘rodent ulcer’, are a type of skin cancer.
More than 80,000 cases are diagnosed per year, making them the most common cancer in the UK.
BCCs tend to affect the over 50s. Occasionally they are found in patients in their 20s, 30s and 40s.

Why do BCCs occur?
BCCs arise due to too much sun exposure in people with fair skin. Even casual sun exposure from day-to-day activities is enough for some people to BCCs.
They are more likely to occur on body areas that catch the sun, such as the face, scalp, neck, back and chest.
It is important to understand that there is a lag period of several years (sometimes decades) between sun exposure and developing BCCs.

What is the outlook?
Very good, as treatment is effective and usually provides complete cure.
BCCs are different from many other cancers as it is extremely rare for them to spread elsewhere in the body. They do not usually cause ill-health or shorten life but will continue to grow unless they are treated.
Lesions that have been neglected for many years can be harder to cure as they can grow under the skin into nearby structures such as nerves, muscle and bone.
What do BCCs look like?

Some BCCs appear as flat scaly red patches while others are pink spots or lumps. There may be a small sore or ulcer which scabs or bleeds and will not heal. Some BCCs can be very subtle and resemble a scar or a dent. Most lesions are painless, and are often only noticed if they scab or bleed.

How do BCCs grow?

BCCs grow at the site at which they have arisen. They usually grow slowly over several months or years. They do not go away. BCCs have roots around and below the visible lesion (see diagram below). The roots can only be seen with a microscope. The lesion enlarges as the roots expand, similar to a weed. If the roots are not treated, then the BCC will come back – just like a weed. This is an important concept to understand.

Weeds will regrow if roots are not treated. The same applies to skin cancer.
How are BCCs diagnosed?
BCCs can be diagnosed from their appearance by a trained professional. Sometimes a skin biopsy is required to confirm the diagnosis – this is when a small sample of a lesion is removed for testing.

Do BCCs need to be treated?
Yes. BCC is a cancer and so treatment is nearly always essential. If not treated, BCCs will continue to grow and damage the skin and possibly nearby structures.

How are BCCs treated?
The best treatment for you depends on your age, and health, and the site, size and number of BCCs you have. Treatments are designed to treat the visible growth and surrounding roots as well. Your Dermatologist will discuss the possible treatment options with you, including:

**Surgery**
This is the most common way of treating BCC. This involves cutting away the lesion together with some surrounding skin. A minimum safety margin of 4 to 6 millimetres of skin around a lesion is removed to make sure all the roots are also removed. The area is usually stitched together though sometimes a skin graft is needed.

Most surgery will be carried out using a local anaesthetic (this means you are awake and injections are used to numb the area), and as a day-case procedure. Sometimes a general anaesthetic will be needed and so a short stay in hospital will be necessary.

**Radiotherapy**
Radiotherapy treats cancer by using high-energy X-rays which destroy the cancer cells while doing as little harm as possible to
normal cells. For some people this may be a more appropriate treatment than surgery. In this case you will be referred to a clinical oncologist (a consultant specialising in using radiation to treat cancer) who will discuss the treatment with you in detail.

Radiotherapy is also sometimes used after surgical excision to help ensure that the cancer does not return.

Some superficial BCCs may also be treated by:

- Curettage and cautery – the lesion is scraped away
- Cryotherapy – the lesion is frozen using liquid nitrogen
- Cream – an anti-cancer cream is applied regularly at home

What happens after treatment?

Most patients will not need to be followed up in the clinic after treatment. However you should check the treated area each month, as there is a very small chance that the BCC may return. It would look similar in appearance to the original BCC. It is estimated that 1 in 20 BCCs may return in the 5 year period following treatment.

It is possible that you may develop a new BCC somewhere else. You should therefore check your skin regularly – particularly on the scalp, face and neck. You should see your GP if you are worried about a new lump or skin lesion, if it has been present for more than 6 weeks, is getting bigger, scabs or bleeds.

How can I prevent further BCCs?

You can also take some simple precautions to help prevent further skin cancers developing:

- Do not allow yourself to sunburn
- Do not try to get a suntan – going out in the sun with specific intention of going brown will increase your risk of skin cancer
• Cover up on a bright day. Protect the skin with clothing, including a hat, T-shirt and UV protective sunglasses

• Avoid strong sunlight. Spend time in the shade when it’s sunny particularly between 11:00 and 15:00

• Use a ‘high protection’ sunscreen of at least SPF 30 which also has high UVA protection, and make sure you apply it generously and frequently when in the sun, preferably every 2 to 3 hours

• Sunscreens should not be used as an alternative to clothing or shade – rather they offer additional protection. No sunscreen will provide 100% protection

• Do not use sun beds

• Check your skin for changes once a month. A friend or family member can help you with this particularly with checking your back. If there is a new or changing lump or skin lesion, if it has been present for more than 6 weeks, is getting bigger, scabs or bleeds go to your doctor and have it looked at

Where can I get further information?
National organisations

• Cancer Research UK
  www.cancerresearchuk.org

• Macmillan Cancer Support
  Freephone 0808 800 1234
  www.macmillan.org.uk

• British Association of Dermatologists
  www.bad.org.uk

• Patient UK
  www.patient.co.uk
Contact details

Dermatology Outpatients 0121 371 5469
Skin Cancer Specialist Nurses 0121 371 5111
Skin Surgery Bookings Coordinator 0121 371 5460
Dermatology Secretaries 0121 371 5121 / 5122 / 5123
The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk/health-talks.htm or call 0121 371 4323.

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