

ACTINIC KERATOSIS

Actinic Keratoses (AKs) result from prolonged exposure to the sun and present on the face, neck, ears, and forearms. AKs are precancerous lesions that appear when exposure to sunlight alters cells (keratinocytes) within the outermost layer of skin, the epidermis.



- AKs appear as patches of skin that can become discolored, scaly or rough. They can be flat or slightly raised and can vary in color from pink to brown, or may appear as rough patches. Other symptoms may include burning sensations or itching.
- People with fair skin and light-colored eyes and hair are susceptible to AK development.
- Those with weakened immune systems due to chemotherapy, transplants or immunodeficiency disorders also have an elevated risk for developing AKs.
- AKs are not malignant but have the potential to develop into Squamous Cell Carcinoma, (a form of skin cancer). If diagnosed and treated early, AKs are not life-threatening, though it is important to have any suspicious lesions checked by a dermatologist.
- AKs may disappear and reappear, so it is necessary to consult your dermatologist even if a suspicious lesion disappears.



Reducing the risk of AK



Avoid overexposure to sunlight.

Following sun protection guidelines can help reduce the risks associated with atypical nevus, especially between the hours of 10 am and 4 pm when the sun is directly overhead. It is important to remember that, even on overcast days, damaging ultraviolet rays can pass through clouds. Use caution when around water, sand, and snow because all can reflect



Take protective measures.

Wear broad-brimmed hats, tightly-woven clothing, and sunglasses.



Use sunscreen.

Choose a sunscreen with minimum SPF (Sun Protection Factor) of 30 with protection from both UVA and UVB rays. Reapply often on all exposed skin, including the lips.



Always avoid tanning and never use UV tanning beds.



Check your skin regularly.

Examine your entire body, and report any suspicious lesions to your dermatologist.