

## What is Squamous Cell Carcinoma?

You have been diagnosed with squamous cell carcinoma (SCC) of the skin. This is the second most common form of skin cancer. It is slow growing and usually remains in the outer layer of the skin. If left untreated SCCs can spread to other organs of the body, although this is rare. SCCs can disfigure the skin, especially on the face. Early recognition and treatment is important

## What causes SCC?

Prolonged exposure to sunlight is the cause of almost all SCCs. They occur most frequently on the exposed parts of the body such as the face, ears, neck, scalp, shoulders and back. Rarely SCCs can develop on non-exposed areas of the body. Anyone with a history of frequent sun exposure and repeated sunburn are high risk and also people who have fair skin, light hair, and blue, green or grey eyes. Less common causes of SCC include exposure to arsenic, radiation and chronic scars/wounds.

## Treatment for SCC

Squamous cell carcinoma can be treated with minor surgery under local or general anaesthetic. Treatment depends on the size and position of the lesion and can involve:

### Photodynamic therapy (PDT)

This involves covering the lesion with a special cream then after three hours exposing it to red light. A topical chemotherapy cream can also be used.

### Cryotherapy

The lesion is sprayed with liquid nitrogen which causes an inflammatory reaction. This may blister but will usually resolve within a few weeks.

### Curettage

For very small SCCs this is a very effective treatment. Under a local anaesthetic your doctor can simply scrape the lesion away from your skin. This may leave a small scar.

### Surgery

Most SCCs can be cut out and this is often the best treatment. This allows the tissue to be tested by a pathologist to confirm the diagnosis and check that it has been completely removed (it can take up to four weeks for the results to be ready). If the SCC has not been completely removed further treatment may be necessary. Cutting the SCC out may leave a hole that requires a skin graft.

SCCs that are large, (greater than 2cm in diameter) or “thick”, have a higher risk of spreading to other parts of the body. If the SCC spreads to the local lymph glands (there may be a lump in

the groin, armpit or neck) then surgical removal of all the glands in that area will be required. Your doctor or nurse will explain how to check your lymph nodes.

### Radiotherapy

Treating SCCs with a very short and localised course of radiotherapy has been shown to be as effective in curing SCCs. In some patients this may be the best option.

### Follow up

Patients with small, low risk SCCs may be discharged back to their GP after removal.

Patients with large or thick tumours are followed up regularly every 3-6 months in out patients for up to five years. Your doctor will decide how often your follow up will be.

**It is important that you examine your skin regularly, looking for early warning signs.**

Check for new lumps or any moles that are enlarged, change colour, itch, bleed, or fail to heal.

Examine the original scar site and surrounding skin, and be aware of any new changes and seek advice.

## Taking Care in the Sun

- ☀ Stay in the shade between the hours of 11am and 3pm.
- ☀ Make sure you never burn.
- ☀ Avoid the use of sun beds.
- ☀ Always cover up. Wear light cool clothing of a tight weave, wide-brimmed hats and U.V. protective sunglasses, look for the CE or BS EN 1836:1997 mark these offer the highest protection. .
- ☀ Take extra care of children as their skin is delicate. Very young babies should be kept out of strong direct sunshine.
- ☀ Use a sunscreen of factor 30 and above, according to your skin type, ensure the sunscreen has UVB and UVA protection. Look for the star rating \*\*\*\* or \*\*\*\*\* on the label. The price is not important. Apply it 15-30 minutes before you go out and re-apply regularly every 2-3 hours.

### Remember:

**Pass on the message to family and friends about protecting themselves from the sun and being aware of changes to moles on their skin.**

## Telephone numbers for follow up appointments:

Dermatology 01752 439936  
Plastic Surgery 01752 439936  
Oncology 01752 431096

## Other sources of information:

The Mustard Tree Macmillan Centre,  
Level 03, Derriford Hospital,  
Plymouth Tel 01752 763672  
Monday – Friday 9-5 (Drop in)

The Living With and Beyond Cancer  
Team at The Mustard Tree Macmillan  
Centre, Derriford Hospital  
Tel 01752 431468  
Monday – Friday 9-5

Macmillan Cancer Support  
Freephone: 0808 808 0000

[www.macmillan.org.uk](http://www.macmillan.org.uk)  
[www.mycancertreatment.nhs.uk](http://www.mycancertreatment.nhs.uk)  
[www.wessexcancer.org](http://www.wessexcancer.org)  
[www.nhschoices.uk](http://www.nhschoices.uk)  
[www.sunsmart.org.uk](http://www.sunsmart.org.uk)  
[www.metoffice.gov.uk](http://www.metoffice.gov.uk)  
[www.bad.org.uk](http://www.bad.org.uk)

[ruth.devlin@nhs.net](mailto:ruth.devlin@nhs.net)  
[jill.daniels4@nhs.net](mailto:jill.daniels4@nhs.net)

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Plymouth Hospitals   
NHS Trust

## Patient information

# Squamous Cell Carcinoma of the skin

To obtain further advice and  
information please contact:

Ruth Devlin Tel: 01752 439800  
Jill Daniels Tel: 01752 431631  
Skin Cancer Nurse Specialists  
Derriford Hospital



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