

## Skin cancer

This issue's special feature, on which these questions are based, was commissioned from independent authors. The information in the box below should help readers to identify knowledge gaps and undertake continuing professional development. Readers are also invited to complete the questions overleaf to test their knowledge of the articles, and send their answers, together with a stamped and addressed C5 envelope, to:

Life-long Learning— Skin cancer  
*Hospital Pharmacist*  
 1 Lambeth High Street  
 London SE1 7JN



Entries must be received by 25 March 2008. Results will be returned with a certificate of completion.

Name: \_\_\_\_\_

RPSGB registration number: \_\_\_\_\_

Address: \_\_\_\_\_

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Post code: \_\_\_\_\_

### Life-long Learning competition

Details of the next Life-long Learning competition are still being finalised.

In the meantime, readers are invited to continue to answer the Life-long Learning questions overleaf for continuous professional development purposes. Answers will be marked as usual and a certificate of completion will be sent in return. Accreditation by the College of Pharmacy Practice remains unchanged.

### How to undertake continuing professional development

#### Identify knowledge gaps

- ◆ The main types of skin cancer and the risk factors for developing them
- ◆ How to treat skin cancer and what strategies can prevent its occurrence

#### Act

- ◆ Read the articles in this issue
- ◆ Test your knowledge by answering the multiple-choice questions overleaf

#### Evaluate

- ◆ What have you learnt?
- ◆ How has it added value to your practice?

- ◆ What will you do now and how will this be achieved?

The feature on skin cancer has been accredited by the College of Pharmacy Practice against the Royal Pharmaceutical Society's general and hospital practice areas of competence, which can be accessed via *Hospital Pharmacist* online ([www.pjonline.com/hplinks](http://www.pjonline.com/hplinks))

Reading the feature and completing the questions will help readers to fulfil aspects of the following competency areas, depending on their area of practice and

application of learning: G1, G5, G8, G9, HP1, HP2, HP4, HP5, HP10.

Completion of the questions entitles undergraduates to one point towards the Professional Development Certificate, a joint initiative between the British Pharmaceutical Students' Association and the College.

The assistance of the College of Pharmacy Practice is acknowledged in producing the CPD elements of this month's **Special feature.**



To answer the questions, tick either the True or False column

	True	False
<b>1. Regarding the detection and diagnosis of skin cancer:</b>		
a) The characteristics of a malignant melanoma can be identified using the ABCDEFG rule		
b) A staging system must be used to classify the severity of all basal cell carcinomas (BCCs)		
c) Melanomas always present with the same characteristics		
d) Non-melanoma skin cancers are often more difficult to detect than malignant melanomas		
e) A hair growing from a lesion is a fundamental characteristic of a squamous cell carcinoma (SCC)		
<b>2. BCCs:</b>		
a) Are derived from Merkel cells		
b) Are the most common form of malignancy among the Caucasian population		
c) Are less likely to metastasise than malignant melanomas		
d) Are more likely to develop in individuals who use sunbeds regularly		
e) Are most commonly treated by surgery		
<b>3. Regarding the types of skin cell:</b>		
a) Keratinocytes are more common in the epidermis than melanocytes		
b) Merkel cells are part of the human immune system		
c) Keratinocytes develop into keratin plates that are shed from the outer layer of skin		
d) Merkel cells are mainly present at the outer edge of the epidermis		
e) Langerhans' cells function as a sensory receptor for touch		
<b>4. Malignant melanomas:</b>		
a) Are cancerous tumours that are derived from melanocytes		
b) Are associated with higher mortality rate than BCCs		
c) More commonly occur in men		
d) Are always greater than 6mm in diameter		
e) Are a precursor to Bowen's disease		
<b>5. According to the National Collaborating Centre for Cancer, patients who should be treated in a specialist hospital include:</b>		
a) Those who are eligible to enrol in clinical trials		
b) All those who require Mohs surgery to treat their condition		
c) All those who are diagnosed with a SCC		
d) All those who develop multiple, malignant melanoma		
e) Those who are diagnosed with a metastatic BCC		
<b>6. SCCs:</b>		
a) Are more likely to metastasise than BCCs		
b) Tend to occur on parts of the body that are chronically exposed to sunlight		
c) Always result from the progression of solar keratoses		
d) Can be subclassified as nodular and morphoeic		
e) Can sometimes be removed using cryotherapy		
<b>7. Regarding the surgical excision of skin cancer:</b>		
a) It is the most common treatment for BCC		
b) It is a risk-free treatment option		
c) A margin of healthy tissue needs to be removed with the tumour to ensure the treatment is successful		
d) It should never be undertaken until the type of skin cancer has been histologically confirmed		
e) It should always be performed by a plastic surgeon		
<b>8. Radiotherapy:</b>		
a) Can treat most skin cancers with a single treatment session		
b) Does not have a role in the treatment of malignant melanoma		
c) Can lead to a cosmetic result that deteriorates over time		
d) Can cause long-term side effects (eg, alopecia) that might not develop until several months after the treatment is carried out		
e) Can sometimes result in the formation of a radionecrotic ulcer		
<b>9. Regarding topical drug therapy for skin cancer:</b>		
a) Imiquimod is an antimetabolite that inhibits DNA synthesis		
b) Treatment with 5-fluorouracil cream can leave a smooth, pink spot after healing is complete		
c) Patients who are using imiquimod cream should be advised to avoid exposing the affected area to sunlight		
d) Treatment with imiquimod cream does not cause any systemic side effects		
e) 5-fluorouracil is indicated for the treatment of solar keratoses		
<b>10. Regarding skin cancer prevention:</b>		
a) Prevention campaigns should focus on limiting sun exposure rather than simply using sunscreen		
b) Light-coloured clothing absorbs more sunlight than dark-coloured clothing		
c) The protection offered by a pair of sunglasses is not always increased by darkening the colour of the lens		
d) Sunscreens should never be used on babies		
e) Individuals are advised to wear a wide-brimmed hat when exposed to sunlight		

Answers will appear in the April issue

