

Health & Science



Skin cancer facts

Half of all new cancers are skin cancers, according to UCSF clinical instructor of dermatology Jerome R. Potozkin, M.D.

"About one million new cases of skin cancer will be diagnosed in the United States this year," he said. "Most Americans don't know the signs of skin cancer, and only a third examine their skin for signs of skin cancer."

Other skin cancer facts, from the American Cancer Society and the American Academy of Dermatology, include:

- About 80 percent of the new cases will be basal cell carcinoma and squamous cell carcinoma (about 800,000 cases).

- Both basal cell carcinoma and squamous cell carcinoma have a better than 95 percent cure rate if detected and treated early. About 1,200 people will die of basal cell or squamous cell carcinoma in 1996.

- There will be about 38,300 new cases of malignant melanoma in 1996, a 12 percent increase from 1995. Malignant melanoma will kill 7,300 Americans in 1996. Of these deaths, 4,600 will be men, 2,700 will be women. Older Caucasian males have the highest mortality rates.

- Melanoma is more common than any non-skin cancer among people between 25 and 29 years old.

Some common questions about malignant melanoma and their answers follow:

Q. What is malignant melanoma?

A. Malignant melanoma is a very serious skin cancer characterized by the uncontrolled growth of pigment-producing tanning cells. Melanomas

may suddenly appear without warning and are found most frequently on the upper back of men and women and on the legs of women, but can occur anywhere on the body.

Q. Is melanoma a serious disease?

A. Yes. In later stages, malignant melanoma spreads to other organs and may result in death. But if detected in the early stages, melanoma can usually be treated successfully.

Q. What causes melanoma?

A. Excessive exposure to ultraviolet radiation of the sun is the most important preventable cause of melanoma. Other possible causes include genetic factors and immune system deficiencies. Malignant melanoma has also been linked to past sunburns and sun exposure at younger ages.

Q. What does malignant melanoma look like?

A. Melanoma generally begins as a mottled, light brown to black flat blemish with irregular borders. Blemishes are usually at least a quarter-of-an-inch in size and may turn shades of red, blue and white, crust on the surface and bleed. They frequently appear on the upper back, torso, lower legs, head and neck. A changing mole, a new mole or a mole that is different or "ugly" or begins to grow requires prompt medical attention.

Q. Can melanoma be cured?

A. When detected early, surgical removal of thin melanoma can cure the disease in most cases. Early detection is essential. Dermatologists recommend a regular self-examination of the skin to detect changes in its appearance, especially changes in existing moles or blemishes. Addi-

tionally, patients with risk factors should have a complete skin examination annually. Anyone with a changing mole should be examined immediately.

Q. Can melanoma be prevented?

A. Yes. Because overexposure to ultraviolet light is thought to be a primary cause of malignant melanoma, dermatologists recommend the following precautions:

- Avoid "peak" sunlight hours — 10 a.m. to 3 p.m. — when the sun's rays are most intense.

- Apply a sunscreen with a sun protection factor of at least 15, apply 15 to 30 minutes before going outdoors and reapply every two hours, especially when playing, gardening, swimming or doing any other outdoor activities.

- Wear protective clothing, including a hat with a wide brim and long-sleeved shirts and pants during prolonged periods of sun exposure. In an effort to raise public awareness about skin cancer and self-examination, the UCSF Department of Dermatology, along with the American Academy of Dermatology and the San Francisco Dermatology Society, will sponsor a free skin cancer screening from 9 a.m. to 1 p.m., Saturday, Oct. 19, on the third floor of the UCSF Ambulatory Care Center, 400 Parnassus Ave. For more information about the screening, or to make an appointment, the public should call 415/476-9219.

Exercise questions and answers

Weekend Warriors:

I like to play basketball on the weekends. But, after a weekend of basketball it takes me three days to recover. My wife thinks that I should hang up my sneakers and grow old gracefully. Is she right?—Fred

Don't hang up those sneakers yet. If you do some conditioning during the week you should be able to get through those weekend basketball games. I want you to walk or jog three to four times a week to build up your endurance. Start slowly and gradually build on both the time and the distance. You'll need to do some muscle building exercises also. If you can go to a gym, pick two-to-three exercises for each body part. Do at least three sets of 10 to 12 repetitions. If you can do more than 12 reps increase the weight you're using. Make sure

you warm up before you start to see a difference in your recovery after your weekend basketball games in three-to-six weeks. So all you weekend warriors who want to continue warring on the courts, start the war before the weekend.

Sweating after workouts:

Why do I sweat more after I finish my workout than I do when I'm working out?—Tina

Tina, the body has a certain amount of blood to send to various systems. Exercising causes blood to be shunted from the skin to the working muscle which causes a build up of heat. Exercises such as running, walking or biking will allow sweat to evaporate during your workout. When you stop exercising the body sends more blood to the skin causing you to sweat and release excess heat. Cessation of sweating after a workout is

a good way to gauge whether you have spent enough time cooling down.

Eating after a workout:

The length of time you should wait to exercise after eating varies with the type of meal you eat and the activity. For instance, you can eat a light meal such as a salad and whole wheat toast and go walking within a half hour. If you eat a very heavy meal before doing strenuous exercise you may need to wait up to two hours. The digestion process will compete for the energy you need to do exercise. The more calories and fat you eat at one sitting, the longer it will take to digest your foods. If you eat several small meals throughout the day you will keep your energy level constant and can avoid having to wait for long periods of time before working out.

Reduce lead at the tap

Running your water for a few minutes first thing in the morning or after your tap has not been used for several hours is a proven method to reduce the potential for elevated lead and copper levels in drinking water. Local water providers advise that only cold tap water be used for cooking, drinking, and making baby formula. Most important, use only lead-free solder to make plumbing repairs.

Lead cannot be detected in local water supplies, although it may occur

in standing water samples from some taps. Plumbing components may, by law, contain up to 8 percent lead and may still be labeled lead-free. When water stands in plumbing systems for long periods of time, it may leach some lead from the plumbing.

Federal and state drinking water regulations strive to reduce lead at the water tap. Environmental Protection Agency regulations require that water providers inform the public of possible lead hazards. The EPA requires

water systems to send the attached public service announcement to radio and television stations. Local area water providers have also developed brochures tailored to local lead and drinking water issues. These are available to customers on request.

Local water providers share the concerns of state and federal regulatory agencies on the health risks of lead exposure. If customers have a concern about drinking water, they should contact their local water provider.

Knock out the flu

Flu season is on its way, and health officials are encouraging Oregonians to take advantage of special flu clinics or to call their health care provider to get an influenza immunization.

Anyone over the age of 65, persons of any age with health problems including heart and lung conditions, diabetes, and other chronic medical conditions as well as health care workers and others, including household members, who have contact with high-risk individuals should make arrangements to get the immunization, according to Fred Hoesly, influenza surveillance coordinator at the Oregon Health Division and member of the Oregon Adult Immunization Coalition.

Hoesly adds that there are adequate supplies of vaccine, so anyone who wants protection from the miseries of influenza can receive a shot.

"Because the virus changes from year to year and protection is limited, it is important to be vaccinated against influenza every year — ideally from October through mid-November," Hoesly states.

Vaccinations will continue through November.

On average, more than 20,000 Americans die each year from complications of influenza and pneumonia. Influenza and pneumonia together are the fifth leading cause of death for older adults, says Hoesly. Vaccination can prevent up to 70 percent of hospitalizations and 85 percent of deaths from influenza-related complications.

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Health Tips

Start Walking at 40:

We're 40 and 42 years old, healthy and want to start walking to get started?—Ramona and Steve, Balda Cynwd, Pa.

First get a check up. Next, invest in a good pair of walking footwear with flexible soles and good arch and heel support.

You'll want to keep cool by wearing loose-fitting clothes. Protect your ears, head, hands and feet from being exposed to the sun. This will help keep you from suffering sun burn.

Walk leisurely for about five minutes and then do some gentle stretching for about five minutes. Beginners should walk between 100-110 steps per minute. Twenty to 30 minutes is good to start, but only go as long as you can.

If breathing becomes difficult, you could experience muscle pain, fatigue or dizziness.

To cool down go back to your leisurely pace for five to 10 minutes, then stretch.



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