

# Skin Care Doctors

## Passion and Technology Help Bring Awareness and Prevention to Skin Cancer

By Kelly O'Hara Dyer

According to the American Academy of Dermatology, more than a million cases of skin cancer are diagnosed in the United States every year. In 2006, the AAD estimated that 10,710 people would die of skin cancer.

That's a sad statistic, because if detected early, 95% of skin

cancer can be cured.

The physicians at Skin Care Doctors, a five-location private practice specialty dermatology group, are doing their part to help stem the tide of those numbers.

Dr. April Farrell is one of six board-certified dermatologists at Skin Care Doctors who will be donating their time on the first Monday in May to conduct free skin care cancer screenings. The volunteer effort is part of the national Skin Care Awareness Month.

"We have what is called Melanoma Monday," says Farrell, "which is the first Monday of May. It's a national, annual event sponsored by the American Academy of Dermatology. A lot of providers participate in it, and we do free skin cancer screenings on that Monday. We're going to be doing one of those here at our Orono office from 5 to about 6:30 that evening.

"What happens is that it's a first-come, first-served service. We don't do any procedures that day, but we look at your skin and say, 'yes, this needs to be evaluated further or biopsied,' or 'no, this is harmless; you don't need to worry about it.'"

Farrell says that the free screening is an easy way for people to get in and get screened for skin cancer without the need for an appointment, and also serves as a way for people who don't have insurance to seek professional advice about a worrying mole that they feel might need attention.

"We pick up melanomas every year, but more commonly, you pick up pre-cancerous lesions," Farrell says about the Melanoma Monday screenings. "It goes

**Dr. Heidi Foster is seen excising a dysplastic nevus. Removal of benign and malignant skin lesions is a common procedure performed at Skin Care Doctors in a relaxed and comfortable setting.**



PHOTO BY DAVID GINSBERG



**Dr. Farrell is seen using the Palomar Lux1540 fractional laser to treat fine lines and wrinkles.**

along with the whole month of skin cancer awareness, and we do a lot of skin checks for atypical moles.”

As part of the mole screening process, some dermatologists, including Dr. Farrell, as seen on the cover of this issue, use a diagnostic technique called dermoscopy, or epiluminescence microscopy. Dermoscopy magnifies lesions of the skin, a procedure that allows for evaluation of subsurface colors and structures. There are well studied and documented patterns and features seen which aid greatly in diagnosing both pigmented and nonpigmented skin lesions. With proper training in the technique, it can allow for earlier diagnosis of dysplastic nevi and melanoma, as well as avoidance of unnecessary biopsies of clinically equivocal lesions, which have benign dermoscopic features.

Part of treating the serious — and increasing — reality of skin cancer involves both education about avoiding damaging effects from the sun, and when necessary, proper surgical treatment to excise the cancer before it can spread.

For prevention of sun damage, Farrell says she and her colleagues focus on educating their patients about sunscreen and sun avoidance.

“We do a lot of education about skin cancer prevention,” she says, noting that she’s excited about a new sunscreen called Anthelios — the active ingredient is Mexoryl — that was FDA-approved in October in the United States. (It’s been

used in Europe and Canada for years.)

“We’re going to be selling Anthelios in our office, and right now, it’s very hard to find,” says Farrell. “The beauty of this sunscreen is that it has much better UVA protection than any of the sunscreens that we currently have, and it also is a photostable sunscreen. Most sunscreens on the market right now are degraded by the sun, and they really lose a lot of their effectiveness after about 90 minutes. This new sunscreen has better coverage, and is more stable so that it lasts longer.”

For those patients who require treatment for existing skin cancer, Skin Care Doctors is prepared to treat those problems surgically.

“We offer something called Mohs micrographic surgery here, which is a tissue-sparing surgery for skin cancer,” explains Farrell. (She notes that the Mohs technique was developed by Dr. Frederic Mohs of Madison, WI.) “We’ve been offering that [surgical technique] since we started this group. That’s definitely one thing that we do here that’s very important when treating skin cancer.

“[The Mohs] technique is used most commonly on the face, or the head and neck area,” she says. “The nice thing about this procedure is that you have a much lower recurrence rate of the cancer, and you are able to minimize the amount of normal skin that has to be removed. What we do is process the tissue here, while the patient waits, and look at it under the microscope. Dermatologists are trained in pathology, so we look at the margins and say, ‘Are the margins clear?’ If the margins are not clear, we bring the patient back into the room, take another layer of tissue, process that again, and go back and forth until the cancer is all out. We go down a layer at a time” until all the cancer is gone. The defect is then repaired, or sent to a plastic surgeon for reconstruction, if necessary.

While skin cancer diagnosis and treatment is an important

## Skin Cancer Prevention

Sun exposure is the most preventable risk factor for skin cancer.

The American Academy of Dermatology recommends that everyone follow these tips to prevent skin cancer:

1. **Generously apply sunscreen** with a sun protection factor (SPF) of at least 15 that provides broad-spectrum protection from both ultraviolet A (UVA) and ultraviolet B (UVB) rays. Re-apply every two hours, even on cloudy days, and after swimming or sweating.
2. **Wear protective clothing**, such as a long-sleeved shirts, pants, a wide-brimmed hat and sunglasses, where possible.
3. **Seek shade** when appropriate, remembering that the sun’s rays are strongest between 10 a.m. and 4 p.m.
4. **Use extra caution near water, snow and sand**, as they reflect the damaging rays of the sun, which can increase your chance of sunburn.
5. **Protect children** from sun exposure by applying sunscreen.
6. **Get vitamin D safely** through a healthy diet that includes vitamin supplements. Don’t seek the sun.

Source: [www.aad.org](http://www.aad.org)

part of Skin Care Doctors' full dermatological practice, it's not the only aspect of the group.

"I would guess that our practice is 30 to 40% devoted to skin cancer treatment, 25% cosmetic and the rest to general dermatology," Farrell says.

She explains that Skin Care Doctors was founded about five years ago, and that the practice covers the entire field of dermatology.

"Basically, we do a wide range of things — from general dermatology to a lot of surgical dermatology, including skin cancer surgery, cosmetic surgery and cosmetic dermatology," she says. "Within general dermatology, we see a lot of both pediatric and adult patients. We do pretty much everything pertaining to dermatology."

One exciting development within the practice is a new surgical technique and tool developed to help the practitioners better suture wounds, with less of a chance of the sutures opening up on a large wound. "We offer something here that one of my partners, Dr. Michael Ebertz, helped develop. It's called DermaClose. This is a device that helps us close the skin after surgery, when we've been left with a large defect. Say that you've removed a melanoma out of a leg that has had

very large margins, and you're left with a 3- to 4-centimeter hole on the leg. Those areas can be very hard places in which to pull the skin together because there's not a lot of movement," Farrell explains. "Instead of doing a skin graft or flap, we use the DermaClose, which is basically a tissue-stretching device."

The DermaClose is stapled onto the skin surrounding the defect, and then a wire loop is placed around the staples and the device is gently cranked. That in turn supplies an even tension to the skin and slowly stretches it.

Farrell says that depending on the size of the hole that needs to be sutured, the device is left on the area anywhere from an hour to two days while the skin slowly stretches without tearing or damaging the underlying tissue.

"The device is then taken off, and it becomes very easy to close the defect, and there's no tension on the wound. Tension on a suture makes it want to open back up and not heal. It also eliminates a lot of what is called undermining. When you have a big hole and you want to stitch it up, you sometimes have to loosen up all the tissue underneath to loosen the skin around the wound, and that can be problematic.

"There's nothing like the DermaClose and it's very novel,"

**Dr. Farrell and Dr. Foster consult each other regarding a patient's biopsy report.**



PHOTO BY DAVID GINSBERG



**Dr. Farrell and Dr. Foster are two of six physicians that make up the staff of Skin Care Doctors.**

she adds. The practice has been using the DermaClose for between six to nine months, and Farrell says she's very pleased with the results.

As a full-service dermatology practice, Skin Care Doctors also offers a full range of cosmetic procedures. The practice's website carries the tag line, "We Can Help Erase Years — Quickly, Gently, Affordably."

As part of that, Skin Care Doctors offers state-of-the-art cosmetic procedures, such as Botox, N-Lite (laser collagen replacement), Restylane, Hylaform and light chemical peels to help treat acne, scars, wrinkles and aging skin.

"One of the new exciting things we're doing here is that we're just about to purchase a new laser for what is called nonablative resurfacing," says Farrell. "It uses a special technique called fractional resurfacing.

"It's used to treat fine lines and wrinkles, scars, pigmentation and so on. The laser creates little, tiny micro-holes in the skin; sort of like you'd see when you aerate your lawn. Instead of wiping out the entire top layer of skin [as with other techniques], you're creating tiny holes using a laser as a source of heat. Those small holes encourage collagen production within

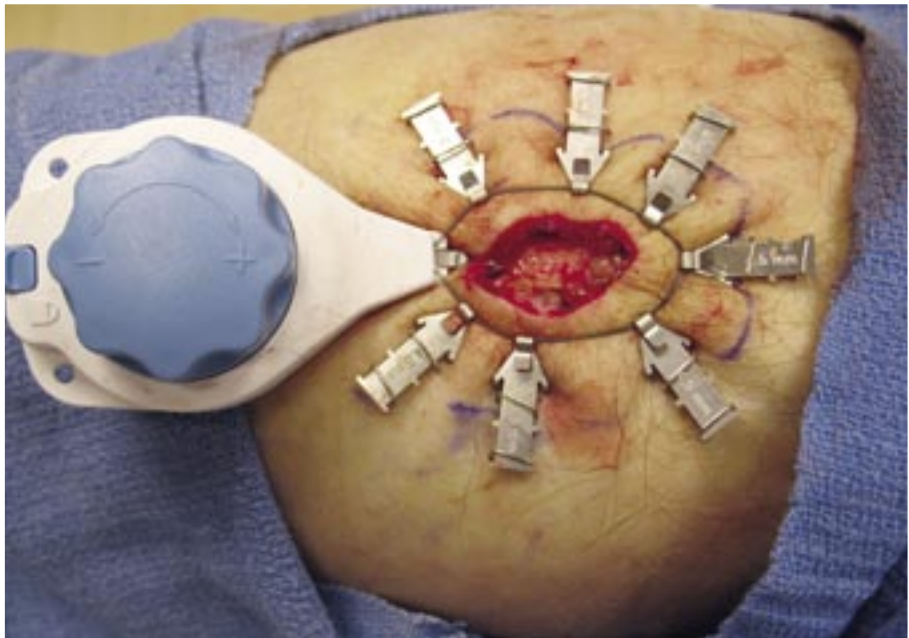
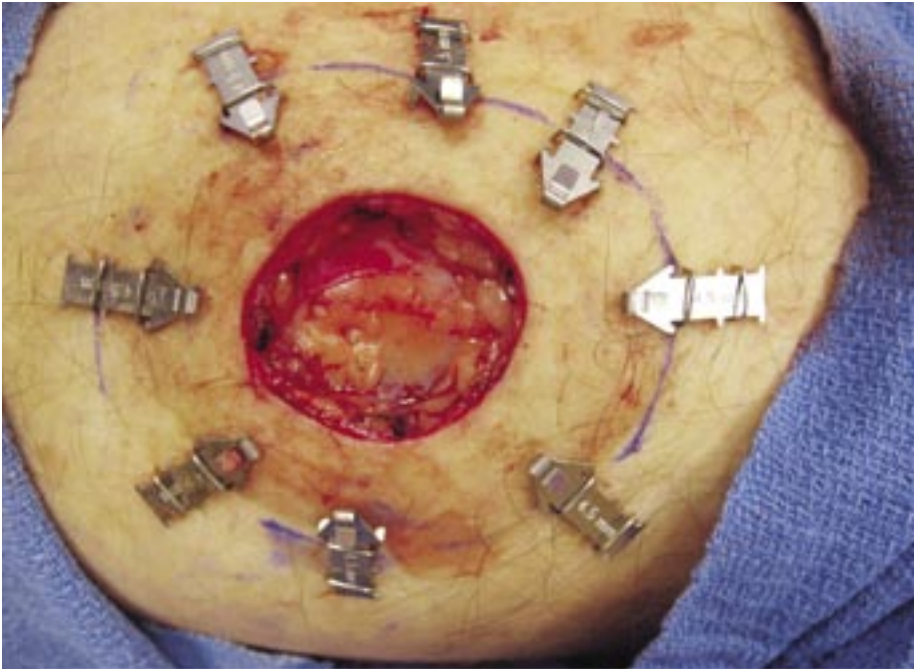
those areas without destroying the epidermis. Patients will see a little bit of redness for 24 hours or so, but there's not a lot of downtime, as there is with the ablative technologies or resurfacing lasers."

That absence of "downtime" may be key to meeting patients' needs.

"People are always looking for treatments for wrinkles that don't have a lot of downtime," agrees Farrell. "The old, deep chemical peels or the ablative lasers could require two weeks of basically not leaving the house, with redness and crusting. [This laser is] sort of the latest technology in treating photo-damage and photoaging."

Other cosmetic services that Skin Care Doctors offers include intense pulsed light treatments, used most commonly for photodamage, although Farrell says the technique can also be used to treat precancerous lesions, in combination with medicine.

"We also use Botox both for wrinkles and for hyperhidrosis, which is excessive sweating," says Farrell. "We do chemical peels, including glycolic acid peels and the VitaPeel, which is a combination of resorcinol, lactic acid, salicylic acid and



PHOTOS COURTESY OF SKIN CARE DOCTORS

## Clinic Locations

**Apple Valley Medical Center**  
 14655 Galaxie Avenue  
 Apple Valley, MN 55124  
 (952) 898-1600

**Burnsville Medical Center**  
 14000 Nicollet Ave. South  
 Suite 304  
 Burnsville, MN 55337  
 (952) 898-1600

**Centennial Medical Center**  
 7373 France Ave. South  
 Suite 506  
 Edina, MN 55435  
 (952) 898-1600

**Orono Professional Building**  
 2765 Kelley Parkway  
 Ste. 100  
 Orono, MN 55356  
 (952) 898-1600

**St. Cloud Office**  
 1350 LeSauk Dr.  
 Sartell, MN 56377  
 (320) 252-SKIN (7546)

retinol. You can use these for acne, lentigines and melasma.

“We also treat a lot of spider veins and [administer] fillers,” says Farrell. “The new filler that’s on the market is called Juvéderm. Right now, the most common filler we use is called Restylane, and it’s a hyaluronic acid, which is a natural part of everybody’s skin that is added into deeper areas of volume loss. Juvéderm is also a hyaluronic acid, but it’s a different preparation of it, where it’s a little bit smoother and you get a little more volume of it. Restylane will usually last about six months; Juvéderm is supposed to last a little bit longer.”

Farrell notes that Skin Care Doctors is committed to providing its patients with the best in skin care — whether that’s providing services that treat existing conditions or past sun damage, or making sure that their patients look and feel their very best. ■

**(Top) Showing a large defect after excision of malignant melanoma.**

**(Middle) DermaClose is anchored in place for external tissue expansion.**

**(Bottom) Skin almost completely approximated one hour after application of DermaClose.**