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Double prevention of skin cancer: Primary and secondary forces united against actinic keratosis

Zainab Al-Nasser

National University of Ireland, Galway, Ireland

Fortunately, skin is the only organ where even precancerous lesions can be visualized and treated to prevent the full growth of cancer. Actinic keratosis (AK) is a scaly papule or plaque that results from sun exposure when the skin is not protected from the sun; it is pre-cancerous and can transform into cancer if not treated. Topical Diclofenac is a NSAID that targets the same pathway involved in AK; it is a category based treatment of AK supported by many published researches and articles. Theoretically; it sounds like an easy treatment option to patients who come in complaining of a rash and leave the clinic diagnosed with precancerous lesions noticed by their dermatologist, however; the motivation can be weaned off as soon as they leave the room. Patient compliance is an integral part of the process. Slathering on a gel about 2 to 3 times a day can be difficult to many patients and recurrence is possible with AK, therefore primary and secondary preventions combined are needed and that makes it even more of a challenge, as a result when a geriatric patient has to take his or her other medications plus slathering Diclofenac and sunscreen in the morning will most likely end up with them walking out of their door with bare skin that is unprotected and at an increased risk of developing cancer and that has been concluded in clinic by many patients. Pharmaceutical companies are invited to work on the idea of combining Diclofenac and UVA/UVB blocking ingredients in one product, making it a lot easier for patients with multiple AK lesions to adhere to the treatment and increasing patient compliance. For the demanding ones; a different formula can be used such as spray to make it even easier and more fun to apply.

Biography

Zainab Al-Nasser is currently pursuing her Medical Studies from the National University of Ireland, Galway.

zainab_alnaser@yahoo.ca

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