Melanoma Facts

What is melanoma?
- Melanoma is the most serious type of skin cancer.
- Melanoma can spread rapidly and can be life-threatening if left untreated.

How common is melanoma?
- New Zealand has the highest melanoma incidence rate in the world.
- Melanoma is the fourth most common cancer in New Zealand, with more than 2000 new cases each year. In 2008 2256 people were diagnosed with melanoma.¹
- Melanoma rates in New Zealand appear to be increasing. Between 1998 and 2008 rates of registration increased by 12 and 16 percent for males and females, respectively.
- In 2008 there were a total of 317 deaths from melanoma in New Zealand - in 202 men and 115 women.¹
- Melanoma is the most commonly registered cancer in men aged 25 – 44 and the second most commonly registered cancer in women of the same age group.¹
- Although 70% of cases occur in those 50 years and older, melanoma is reasonably common in younger age groups, with significant numbers in men and women between the ages of 25 and 44.
- Melanoma rarely occurs in children.
- Death rates from melanoma are higher among men and appear to be increasing.
- Although Māori and Pacific peoples have a much lower chance of getting melanoma, they often have thicker (more serious) melanomas.²

What causes melanoma?
- Most melanomas are caused by exposure to UV radiation in sunlight.
- Sunburn in childhood increases risk of melanoma in later life.
- There is a greater risk of melanoma with high doses of sun exposure occasionally (eg, during holiday and recreational activities) than with more continuous sun exposure (eg, daily work outdoors).
- The use of tanning booths or sunbeds, increases risk of melanoma. Use of sunbeds before the age of 35 is associated with a 75% increase in the risk of melanoma.³

Can melanoma be prevented?

- The risk of melanoma is reduced by avoiding sunburn and protecting the skin against UV radiation using physical methods (shade, broad-brimmed hats, sunglasses, clothing), with the addition of sunscreens.
- Protection is especially important during the time of the day when UV radiation is highest. This is between 10am and 4pm during daylight saving months.

Who is at risk of melanoma?

- Some people are at increased risk or high risk for developing melanoma due to factors such as their skin type or family history.
- People with fair skin burn more quickly than people with darker skin and are more likely to develop melanomas.
- People from ethnic groups with darker skin (for example, Māori, Pacific and Asian peoples) have more protection against UV rays and so are less likely to get skin cancers, including melanoma.
- One type of melanoma tends to occur on the soles of the feet, palms of the hand and under the nails in those with darker skins.

Who is at high risk of melanoma?

Factors that make you at high risk for melanoma are:

- a personal history of melanoma
- a family history of melanoma in a first-degree relative (parent, brother or sister, child). This risk is higher if more than one relative had a melanoma, if they were young at the time or if one relative had more than one melanoma
- large number of moles on your skin (more than 50 moles)
- atypical (dysplastic) ‘funny looking’ moles on your skin
- a personal history of a previous non-melanoma skin cancer.

What does melanoma look like?

Melanomas often appear as a new spot or an existing spot, freckle or mole that has changed in colour, shape or size. They often have an unusual shape or colour or a variety of colours. However, in some cases they may not be coloured.

Sometimes melanomas may be itchy or may bleed. Some may become raised quickly and catch on clothing.

Some types of melanoma develop over a period of weeks or months, while others tend to develop more slowly.

Nodular melanomas are a type that grow rapidly and need to be removed urgently. They are most often found on the head and neck and in older people, particularly men. They are raised, firm and often uniform in colour. Among those who develop melanoma, nodular melanomas occur more often in Māori and Pacific peoples compared with Asian peoples and New Zealand Europeans.

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How is melanoma treated?

- Treatments for melanoma include surgery, radiation therapy and chemotherapy (drug treatment). The best treatment for a particular melanoma depends on the type and stage of melanoma (how far it has spread) and the person’s general health.
- Most people will only need surgery. The melanoma is cut out, as well as a small area of normal-looking skin around it.