

[00:00:00.750] - Ashleigh Kehrt

Skincare is not one size fits all. At IMAGE, we rely on skin care professionals and clinically proven ingredients to create solutions that adapt to your lifestyle. But don't take it from us. Just ask the 30,000 plus professionals in over 60 countries across the globe who trust IMAGE Skincare to deliver when it comes to results.

[00:00:19.590] - Narrator

And while we got our start with skincare pros, we think it's about time you got to know us better, too. Tune in to Skinfluenced to hear straight from industry professionals on how to keep your skin healthy, radiant, and resilient through every stage of your vibrant life.

[00:00:36.580] - Ashleigh Kehrt

Hello, and welcome back, skincare aficionados to Skinfluenced, where we talk all things skin. I'm Ashleigh Kehrt, and with me today is my guest co-host, Jessica Lanham. Hi, Jessica.

[00:00:49.420] - Jessica Lanham

Hi, Ashleigh. I'm so excited to be here. Thanks for having me.

[00:00:53.590] - Ashleigh Kehrt

Of course. So why don't you tell the listeners a little bit about yourself?

[00:00:57.130] - Jessica Lanham

I'd be happy to. I am a licensed esthetician for over 20 years now. And I started my journey just when I was a teenager. I've been with IMAGE Skincare for over several years and I have worked in the medical esthetics industry for quite some time, even approaching holistic esthetics.

[00:01:18.010] - Ashleigh Kehrt

Oh, wow. That's amazing. Well, we're happy to have you here today. And today's topic, in my opinion, is a super important one. May is Skin Cancer Awareness Month, and we are hitting this topic hard with an amazing guest.

[00:01:31.060] - Ashleigh Kehrt

But before I introduce our guest, I thought we could start with some facts about skin and skin cancer. Some of our listeners may know these already, but some of you may not. Number one is that skin is our largest organ.

[00:01:44.620] - Ashleigh Kehrt

An estimated 90 percent of skin aging is caused by the sun. More people are diagnosed with skin cancer each year in the US than all other cancers combined. And this one gets me, having five or more sunburns doubles your chances for melanoma. That's pretty scary.

[00:02:03.520] - Ashleigh Kehrt

I don't know about you, but I think we've all been affected by skin cancer in some capacity. Would you agree, Jessica?

[00:02:08.860] - Jessica Lanham

Absolutely. I agree. You have someone we know has had a personal experience with it or it's affected us personally.

[00:02:17.620] - Ashleigh Kehrt

Yeah, I agree. So without further ado, I'd like to jump in to having our guest here. Our guest is Dr. Bertha Baum. She is a Florida Board-certified Dermatologist and Cosmetic Surgeon. She's originally from Cali, Colombia, and is a proud alumna of the University of Miami.

[00:02:35.590] - Ashleigh Kehrt

She attended advanced courses at Harvard University before receiving her medical degree from Nova Southeastern University. Post graduation, she served as the Chief Resident at Larkin Community

Hospital. She is married with three beautiful children and enjoy spending time with her family and traveling.

[00:02:52.150] - Ashleigh Kehrt  
Welcome, Dr. Baum.

[00:02:53.740] - Dr. Bertha Baum  
Thank you very much for having me here, Ashleigh and Jessica. I'm very excited to talk about skin cancer and get to know a little bit more or get to educate our listeners with a little more information that maybe can help them in the future.

[00:03:10.570] - Ashleigh Kehrt  
I love that. I think this is something that a lot of people don't know enough about. So we are pumped to have you here today. So let's get into a little bit about you. How did you decide to be a dermatologist? Was there a life event that took place or do you have dermatologists in your family? Can you give us a little bit of information on your background?

[00:03:29.740] - Dr. Bertha Baum  
Absolutely. So I always knew I wanted to do medicine and I actually was interested in pediatrics. And then I had kids, and I said, okay, that's not my field. And that's when I knew that I wanted to do a combination of procedures as well as spending enough time with patients and really getting to know them.

[00:03:49.780] - Dr. Bertha Baum  
So I love surgery, but if you're just a surgeon, which is not just, they're great, you don't have that much interaction with your patients. And once the surgeries over, you sometimes never see them again.

[00:04:02.650] - Dr. Bertha Baum  
So I wanted to find a field where you had the combination of procedures and patient care. And dermatology was perfect for that. I had a mentor, which is now my colleague and partner, Dr. Weiss, and he showed me what the field of dermatology was and I fell in love with it.

[00:04:20.320] - Ashleigh Kehrt  
That's awesome.

[00:04:21.340] - Jessica Lanham  
Amazing.

[00:04:22.090] - Ashleigh Kehrt  
So that takes me to the next part of the question. As a cosmetic dermatologist, what makes you different than a regular dermatologist or is there a difference?

[00:04:29.920] - Dr. Bertha Baum  
Well, basically, as a dermatologist, you can go different routes. And my specialty became cosmetics, but I still do clinical dermatology, which is basically skin cancer and all of the skin rashes and all of that dermatological conditions.

[00:04:46.930] - Dr. Bertha Baum  
So it does give you an advantage in terms of cosmetic outcomes when it comes to surgical excisions and just a simple biopsy while you really take into consideration the cosmetic outcome of it without obviously not considering the importance of getting a true biopsy and getting a good amount of tissue for the pathologist to evaluate.

[00:05:14.320] - Dr. Bertha Baum  
So it's a nice balance to have.

[00:05:16.390] - Ashleigh Kehrt

That's amazing. So our topic today is skin cancer. And I wanted to start by asking you, what would you say is the biggest misconception of skin cancer?

[00:05:26.080] - Dr. Bertha Baum

I truly believe that to this day patients that I've seen for years still think that their skin cancer is not related to their sun exposure. They really deny it. They say that was 20, 30 years ago, that they were exposed to the sun and they don't understand that that accumulates in our body and it shows up later in life.

[00:05:46.020] - Dr. Bertha Baum

So I think the biggest still to this day misconception is that the sun is not the number one cause, which it truly is. So that's definitely something that we want to change. We want people to understand that sunscreen is the best way to go in sun protection. The least amount that you can be outdoors and be exposed, the less chances of you getting skin cancer.

[00:06:10.500] - Ashleigh Kehrt

Right. And I think we see that a lot as aestheticians. I think you might agree, Jessica, with aging as well.

[00:06:16.490] - Jessica Lanham

Yeah.

[00:06:16.800] - Ashleigh Kehrt

They don't understand that what they did 30 years ago is now being shown on the skin or internally as well. And that's a battle that we fight. So we feel you.

[00:06:26.100] - Jessica Lanham

Yeah, every day, every day. I have that conversation. Absolutely.

[00:06:31.170] - Dr. Bertha Baum

Yeah, absolutely.

[00:06:32.940] - Jessica Lanham

I think that there are common myths and misconceptions when talking about skin care. I know I personally have ran into a few of them throughout my experiences. And something that keeps coming up is do dark skinned people get skin cancer? Does it affect them any differently? And what does that look like on different complexions?

[00:06:58.770] - Dr. Bertha Baum

Yeah, actually, I wrote a while back a chapter on skin cancer in Hispanics in a book. And there is a misconception there. And people truly believe that if they have darker skin tones, which tends to happen a lot in the Hispanic population, that they're not going to get skin skin cancer. And that is totally incorrect.

[00:07:21.280] - Dr. Bertha Baum

There's definitely protection on the skin because you have that melanin. So it's giving you a little bit of a layer of protection in comparison to maybe someone that has very white skin, what we call a Fitzpatrick 1 or 2.

[00:07:35.880] - Dr. Bertha Baum

They obviously are going to burn right away. Ten minutes into being exposed to the sun, they're already red and burning. The people that have a little more skin tone to their skin and they have a little more melanin like a skin type 4 or 5, they're not going to burn in the sun. They'r just going to look darker, but they're still accumulating sun exposure.

[00:07:58.890] - Dr. Bertha Baum

And that still can be a cause of skin cancer. And we see skin cancer in Hispanics. We see skin cancer

in African-Americans. And actually, when we find that type of skin cancer, it's more advanced. And it has to do with them not being aware that they can get it.

[00:08:15.390] - Dr. Bertha Baum

And so sometimes they don't wear sunscreen. They don't use sun protection. And sometimes they don't even seek medical help because they don't believe that they could be someone that could get skin cancer.

[00:08:27.150] - Ashleigh Kehrt  
Right.

[00:08:27.570] - Jessica Lanham

That's extremely insightful. Thank you for bringing up those points. So when taking that into context, what is a sign of skin cancer that may surprise people or people might not know about or recognize?

[00:08:43.830] - Dr. Bertha Baum

That's a great question. So there's three different types of skin cancers or the most common skin cancers, because there's many more. The three most common types are basal cell carcinoma, which is the most common type. Then we have squamous cell carcinoma and then we have melanoma.

[00:09:02.340] - Dr. Bertha Baum

And with the basal cell carcinoma, sometimes it can look like a pimple or it could look like a scar. So it's very important that some patients or people out there and the listeners can really understand that it's not only a pigment of lesion that can become a skin cancer. That would be more like the melanoma type.

[00:09:23.010] - Dr. Bertha Baum

But there is other lesions that are skin color that can look like pearly and have a little bit of [inaudible 00:09:31] or those little blood vessels on top, and they can be basal cells.

[00:09:35.700] - Dr. Bertha Baum

And then we have the second most common skin cancer type, which is the squamous cell, and they can look like rough pieces of skin. Sometimes you can even think it's like a little rough patch, like an eczema patch, but it's not going away.

[00:09:49.800] - Dr. Bertha Baum

So any lesion that is not going away and it's lasted more than a month on your face or any part of your body should be checked by a board-certified dermatologist or someone that has very good knowledge of the skin or physician that is going to give you the right care for it.

[00:10:07.290] - Dr. Bertha Baum

And obviously, the most important things we can think of for pigment of lesions, which would be more of like a sign of a melanoma are what we call the A, B, C, D, E's.

[00:10:19.380] - Dr. Bertha Baum

So the A is going to be for asymmetry. And we want to think about it. If we part that lesion in half and we look at the two halves, they should look similar, if it's a regular mole. But if it's not a regular mole, it doesn't mean that it's melanoma.

[00:10:34.740] - Dr. Bertha Baum

I don't want people running, if they don't meet the criteria, thinking that they have a melanoma, but those are little signs for you to go and visit a board-certified dermatologist and really get those moles checked.

[00:10:48.530] - Dr. Bertha Baum

So A, for asymmetry, B for borders. Irregular borders tend to be a sign that needs to be checked. C for color. Anything that has more than two or three colors should be checked, any lesion. D four diameter.

Anything bigger than a pencil eraser or five millimeters should be checked.

[00:11:10.760] - Dr. Bertha Baum

And the last one, and I think the most important one for the patients to be checking is E, which is evolving, anything that's bleeding, changing, itching that wasn't there before needs to be checked.

[00:11:26.360] - Ashleigh Kehrt

Wow, yeah.

[00:11:27.020] - Jessica Lanham

I think that's a great way to break it down to make it relatable to someone that hasn't had the background or training in aesthetics.

[00:11:34.340] - Ashleigh Kehrt

I agree.

[00:11:35.030] - Jessica Lanham

So with that being said, how often should someone seek checkups from a dermatologist?

[00:11:41.480] - Dr. Bertha Baum

That's another great question. Most insurances will cover up to five visits a year, but the recommendation is to go once a year and visit your board-certified dermatologist and get your full body exam, which means you're going to be checked everywhere.

[00:11:57.860] - Dr. Bertha Baum

And some people don't know that they can get skin cancer inside their ears, around the mouth, inside their eyes. So there's plenty of areas that maybe don't get checked except by your dermatologist. The scalp is another area that we check.

[00:12:12.230] - Dr. Bertha Baum

And so once a year, if you don't have a history of skin cancer. If you have a history of skin cancer, every six months or every three months, depending on the type.

[00:12:21.950] - Jessica Lanham

Thank you so much for that. Moving into our next myth or misconception. I commonly get this question a lot. I love the sun and we know that vitamin D is great to get during sun exposure. So is this a myth or a fact? I need to get sun exposure to get vitamin D. How much truth is there to that?

[00:12:45.230] - Dr. Bertha Baum

Oh, my God. I think I listen to that at least once a day, every day. And that is incorrect, especially nowadays that we have supplementation, that you can take supplements with vitamin D, there is no need of sun exposure for you to get your vitamin D.

[00:13:02.510] - Dr. Bertha Baum

And we definitely want to have good levels of vitamin D, but they can be acquired through supplements. So the answer is there is absolutely no need for sun exposure in general.

[00:13:14.450] - Jessica Lanham

So wearing sunscreen is not going to make me vitamin D deficient, is it?

[00:13:20.090] - Dr. Bertha Baum

Absolutely not. Wearing sunscreen is a must. I tell patients it's like brushing your teeth. It should be done on a daily basis. If there's one thing you can do on a daily basis in terms of your skin care routine, it's sunscreen.

[00:13:34.730] - Dr. Bertha Baum

Obviously, I would love for you to do more than that. But if that's the one thing that you can do, that

would be very helpful and your skin will definitely thank you in the future for that.

[00:13:44.810] - Jessica Lanham  
Absolutely.

[00:13:45.470] - Ashleigh Kehrt  
I agree.

[00:13:47.420] - Jessica Lanham  
So besides supplements, what are other great suggestions to get your vitamin D? Any food suggestions?

[00:13:54.410] - Dr. Bertha Baum  
Yeah, definitely. I mean, I think you can definitely get vitamin D from a lot of high calcium intake, vegetables, fruits, vitamin D is in certain, I want to say in salmon, but maybe not as high. But definitely well-balanced diet will give you the vitamin D you need.

[00:14:19.220] - Dr. Bertha Baum  
And some of us, I, for example, take a supplement because I do not expose myself to the sun at all and don't want to. So I take a 1000 microgram daily or intraunit, I'm sorry, daily and that works great. And my vitamin D levels are excellent.

[00:14:36.410] - Dr. Bertha Baum  
You definitely want to have that vitamin D level checked because it's a sign of your immune system as well. And there's a lot of skin conditions that are related to vitamin D, so have it at the right level will be very helpful.

[00:14:50.660] - Ashleigh Kehrt  
That's amazing and great tips because I think immunity is something that we're all searching for, especially right now in the state that we're in. So that leads me to our next question, and that is that only sun exposure causes skin cancer. Is that true and are there other causes of skin cancer?

[00:15:10.460] - Dr. Bertha Baum  
Yeah, so that is not a hundred percent true because sun exposure is one of the highest reasons or the biggest reasons we have skin cancer, but there is a genetic predisposition to skin cancer. There are syndromes that patients present since they're born that predispose them to skin cancer and they're covered of skin cancer without being exposed more than the regular person.

[00:15:41.410] - Dr. Bertha Baum  
So there's other factors, such as genetics as well as exposures. There's been arsenic exposures that can cause precancers and skin cancers, especially squamous cell carcinoma. There can be a development of squamous cell carcinoma in scars as well as in inflammatory conditions.

[00:16:05.100] - Dr. Bertha Baum  
So it's not the only reason or the only way you can get skin cancer, but it's definitely the biggest, most common type of way for patients to get skin cancer.

[00:16:16.440] - Ashleigh Kehrt  
Especially here in Florida.

[00:16:17.790] - Dr. Bertha Baum  
Oh, my gosh, absolutely.

[00:16:19.200] - Ashleigh Kehrt  
You can't go anywhere without getting sun exposure. It's just not possible. So that's why we, as an aesthetician, we're always telling people, think of it as part of your regimen to put on that SPF because you really can't escape it here.

[00:16:33.360] - Ashleigh Kehrt

So I know some of these things we covered earlier about doing self-checks. Should we be doing self-checks? I know we should be seeing a dermatologist, but is it okay to do a self-check or do you recommend, no way, they need to see a dermatologist. What's your recommendation there?

[00:16:48.360] - Dr. Bertha Baum

Actually, self-checks are very important, not only when it comes to breast cancer on woman, but we've tried to make a point through the Academy of Dermatology, and in general, when we do this type of sessions to really make people understand that self-checks are the best way to check yourself.

[00:17:07.140] - Dr. Bertha Baum

Obviously, with that said, that doesn't mean that you're not going to visit a dermatologist once a year. But about 65 percent of melanomas are caught by the patient first.

[00:17:17.700] - Ashleigh Kehrt

Oh, wow.

[00:17:18.300] - Dr. Bertha Baum

So the patient notices a change in their body and they seek help. So that's a really good way of understanding how important those monthly self-checks are. And the way we recommend them is once a month. You can put it on your calendar because we're all very busy. Select the date.

[00:17:36.690] - Dr. Bertha Baum

And then that day before or after the shower, when you're completely naked, look at yourself from different angles with a mirror in front of you to make sure that you are evaluating your back, the back of the legs, all the different areas that could have spots.

[00:17:53.130] - Dr. Bertha Baum

Or if you have a lot of moles, check those moles and check for anything unusual. And that way bring it up to the dermatologist earlier than a year.

[00:18:01.510] - Ashleigh Kehrt

Right. Right.

[00:18:02.840] - Jessica Lanham

That's great, the ABCDs [crosstalk 00:18:05].

[00:18:05.290] - Ashleigh Kehrt

I love this. So with that being said, and you touched on this earlier, but what are areas that people may not realize that they can get this? I know a lot of people will say Bob Marley, he had it between his toes and he has darker skin complexion. Then you're Fitzpatrick 1 or 2, you're lighter skinned.

[00:18:25.260] - Ashleigh Kehrt

So is there something that you see a lot, an area which the normal person wouldn't think to check for?

[00:18:32.610] - Dr. Bertha Baum

Yeah, I mean, you bring up an excellent point, which is the most common area where we find skin cancer in African-Americans is in the feet.

[00:18:41.150] - Ashleigh Kehrt

Oh, wow.

[00:18:41.850] - Dr. Bertha Baum

In between their toes or on the bottom of the feet, on the on that surface, on the plantar surface. So why do I repeat it? Because a lot of people, if they are not getting pedicures or something like that, especially males, sometimes they don't get those pedicures on like we do. So no one's really checking

down there. So that's an important area to check.

[00:19:05.670] - Dr. Bertha Baum

As well as some people don't know that you can get it in your genital area. So the vulva is an area where we see a lot of melanoma, especially on older patients. And then the most common areas is the lower legs for the females, because we, not me, but I remember when I was 15, I love putting those legs out there in the sun.

[00:19:29.280] - Dr. Bertha Baum

So that's one very common area for females to get melanoma as well as the back, so just little areas. Another thing that I think it's important is if you're a hairdresser. It's very important that you bring it up to your customer if you notice something unusual on the scalp. You're the only person that is looking at their scalp except for a dermatologist.

[00:19:53.250] - Dr. Bertha Baum

And a lot of times I've had hairdressers send me first time patients and sure enough, they do have a skin cancer in their scalp. So please take your job seriously of looking at the scalp and letting your customer know, hey, you know what, it would be a good idea if you get this checked by a dermatologist and save someone's life.

[00:20:15.870] - Ashleigh Kehrt

Right. And I don't know about you, I'm pretty sure, Jessica, but that's something that was always brought to my attention when I was in school for esthetics, was to make sure that if you notice something that's a little weird, or a lot of times the client or the patient will bring it up to us wanting us to be their dermatologist because we're like their BFFs as an aesthetician.

[00:20:38.510] - Ashleigh Kehrt

If you're not sure, just recommend a dermatologist, I guess would be the best way to go about that.

[00:20:43.400] - Dr. Bertha Baum

Absolutely.

[00:20:43.790] - Jessica Lanham

Air on the side of caution, absolutely.

[00:20:46.760] - Ashleigh Kehrt

So what's the best way to tell the difference between if it's actually a skin cancer or a mole? I've heard people say, oh, I've had that mole forever or that's a mole, that's not skin cancer. What's the best way for them to differentiate between the two?

[00:21:02.720] - Dr. Bertha Baum

So I get that a lot. Also, when I'm about to do a biopsy on a lesion that I don't like or that has patterns that could be a skin cancer and it's been there for a long time, they're like, oh, but I've had that forever.

[00:21:17.090] - Dr. Bertha Baum

Well, it's important to understand that a mole can change at any point. And once it starts showing these changes, we can see them through what we do, which is dermoscopy. So we use a special device, and most board-certified dermatologist use that these days, to evaluate the lesion a little closer before we make the choice.

[00:21:38.390] - Dr. Bertha Baum

Okay, clinically, it doesn't look good. Let me look at what the dermatoscope. And if under dermoscopy it doesn't look good, then that's the time we tell the patient, okay, you know what, it's better to take that lesion off and send it to pathology.

[00:21:53.480] - Dr. Bertha Baum

So it's important to know that even if a mole has been there a long time, it still can suddenly change.



And that's a good time to remove it before it's changing too much. And then it's becoming a more aggressive cancerous lesion.

[00:22:09.680] - Dr. Bertha Baum

And then some of those lesions just appeared de novo what we call, they just suddenly appear. Important also to understand that if you're younger than 35, you can still get new moles. So we get moles from the moment we're born all the way to 35 years of age.

[00:22:29.660] - Dr. Bertha Baum

After 35 is not normal to get a new mole. Either that's a sunspot or that's something that needs to be checked. And there's other things that are not in that category, like seborrheic keratosis, which are benign spots that we get. And I call them through experience as we get older.

[00:22:48.110] - Dr. Bertha Baum

But definitely you want to understand that if it's been there all your life, it doesn't mean that it cannot change. And that's why the evolving aspect of the ABCDE is so important, because if you notice it's bleeding, it may be a sign that is changing. If you notice that it's itching, it may be a sign that is changing. So it should be checked.

[00:23:13.610] - Ashleigh Kehrt

That's great. That's something that I definitely just learned from as well, especially being that age range of up until 35. So changing gears a little bit, when it comes to sunscreen, the higher the SPF, the better. I hear this every single day of my life, so I'd love for you to chime in. I know you'll know this better than we do.

[00:23:34.250] - Dr. Bertha Baum

And then what is the difference in the SPF numbers? Does that make a difference?

[00:23:37.730] - Dr. Bertha Baum

So SPF stands for sun protection factor. And basically the way they measure this is the following. For example, if you're like me, I'm a skin type 3, when I go to the sun, it takes me about 30 minutes to start burning. So they just extend your burning time so that you don't start burning in 30 minutes, instead that you hopefully don't burn at all, but that they measure you when do you start burning.

[00:24:07.250] - Dr. Bertha Baum

And so depending on that, they give that number. But the number doesn't mean the minutes. So it's important to understand that part. So what's important to understand as a consumer is that when you change from SPF 50 to SPF 100, the amount of percentage coverage in between those two is literally less than one percent, meaning it's about 97.5 percent for SPF 50, and then it's about 98 point something for SPF 100.

[00:24:42.290] - Dr. Bertha Baum

What that means is that you need to find any sunscreen that works for you, either chemical or physical sunscreen that works for your skin and reapply every hour. Because around 60 minutes, no matter what, that sunscreen has been sweat or washed, if you've been in and out of the water. It doesn't matter how much waterproof they claim they are.

[00:25:07.250] - Dr. Bertha Baum

And they've definitely changed the FDA regulations on this because people used to believe, okay, I apply sunscreen. Yeah, but did you reapply? No, it said waterproof. Well, that doesn't matter anymore. So it's important to understand that you want to select anything over 35. And it's not so important the number as it is reapplying every hour.

[00:25:30.470] - Dr. Bertha Baum

And also, very important to understand the amounts that you need to put in because that's how they measure it. So they say you need about a shot glass for your body. That means that's about one to two ounces. Most of sunscreens have one to two ounces. So if you're not applying that amount all

over your body, you're not even getting that protection that they're claiming to have.

[00:25:56.190] - Ashleigh Kehrt  
Wow.

[00:25:56.670] - Jessica Lanham  
Sounds like application is the key and consistency.

[00:26:00.240] - Dr. Bertha Baum  
Not the number. So application and consistency, like you said, that's going to make you not burn if you're going to be three to four hours in the sun, which is a lot. So what you want to do is you want to seek shade, especially during the peak hours, which are from 10:00 AM to 4:00 PM.

[00:26:18.750] - Dr. Bertha Baum  
And that's mainly the times that people end up going to the beach or the pool. So you definitely want to keep that in mind more than the actual number.

[00:26:29.940] - Ashleigh Kehrt  
So jumping into the next one, and I'm sure you hear this a lot, well, sunscreen contains harmful chemicals. What do you have to say to that?

[00:26:39.960] - Dr. Bertha Baum  
That's a common complaint. And there's a couple of things that we want to say to that. First, there's different types, like we mentioned, there's the physical sunscreens, which are also called mineral, and then there's the chemical sunscreens.

[00:26:53.370] - Dr. Bertha Baum  
And chemicals are everywhere. So don't think of chemicals as something bad or harmful because we are surrounded by chemicals.

[00:27:01.550] - Ashleigh Kehrt  
Water. Water is a chemical, right?

[00:27:04.590] - Dr. Bertha Baum  
Yes, so with that said, what you want to take into account is if you have very sensitive skin or you're very acne prone, maybe you want to go with that mineral sunscreen just because there's less chances of you getting an allergic reaction or getting red or anything.

[00:27:22.800] - Dr. Bertha Baum  
Now, it used to be that those physical and mineral sunscreens were more for sensitive skin, but not very cosmetically elegant. They left a white hue to the skin. It wasn't great.

[00:27:35.610] - Dr. Bertha Baum  
Well, we've gone a long way, and now mineral sunscreens are excellent. And they really don't leave a cast or anything like that. So they're a great choice. Now, chemical sunscreens are also great. And unfortunately, they've gotten in a little bit of a bad reputation in the past years because of the oxybenzones.

[00:27:53.940] - Dr. Bertha Baum  
Well, first of all, most of the oxybenzones have been removed from chemical sunscreens at this point. And a lot of it had to do with the corals and the coral reefs. And we definitely don't want to ruin those.

[00:28:06.180] - Dr. Bertha Baum  
And then there was a study that showed that there was a little bit of absorption on the blood stream from those oxybenzones. They still don't know of that absorption can cause anything harmful to your body. But if you want to be a hundred percent safe in terms of your absorption of any type or maybe if you're pregnant and you want to be very safe for your baby, then go with the mineral sunscreens.

[00:28:30.810] - Dr. Bertha Baum

You're not going to absorb any zinc oxide or titanium dioxide. And they're very safe products that we actually use in babies for their diaper rash. So chemical sunscreens are great. I use them all the time. I love them for body protection. I do use a mineral sunscreen on my face because I have sensitive skin, but they're both excellent choices and you will definitely be better off using a little bit of a chemical instead of having to deal with someone cutting your face every couple of months.

[00:29:00.780] - Ashleigh Kehrt

I agree.

[00:29:01.680] - Jessica Lanham

Me, too. Absolutely great insights on that.

[00:29:04.860] - Ashleigh Kehrt

So on the heels of that, are there other ways to prevent skin cancer besides using a sunscreen? Are there any recommendations, maybe a hat, et cetera?

[00:29:13.260] - Dr. Bertha Baum

Absolutely. There's many some protection behaviours that will make a difference. Nowadays, we have a lot of clothing that have UV protection. So that's another way of extra protection. For example, on kids, it's hard to reapply.

[00:29:27.240] - Dr. Bertha Baum

I have three children. I know it's hard to convince your child after you apply sunscreen all over the body that we're going to do that again when they're having a lot of fun on the pool.

[00:29:38.490] - Dr. Bertha Baum

So with that said, you want to use maybe protective clothing and then you have that extra shield of protection there that may give you a little more time in terms of that, as well as umbrellas, hats, and just right behaviour.

[00:29:54.690] - Dr. Bertha Baum

So maybe go to the beach between 8:00 and 10:00 or after 5:00 PM instead of those peak hours where you're getting direct sunlight. Other things that we can do is I always recommend my patients that have a lot of skin cancer or just a propensity to be outdoors, some people walk outside, to also take a vitamin supplement.

[00:30:21.450] - Dr. Bertha Baum

The one that I recommend is Heliocare . I have no relationship with the company. It's just a great supplement that has a lot of medical studies to back it up that gives you protection. So it's like an oral sunscreen, I tell them. It doesn't replace your application of sunscreen, but it's just extra protection.

[00:30:41.910] - Dr. Bertha Baum

So all these little changes can make a difference on the day to the absorption of chronic sun exposure.

[00:30:49.440] - Jessica Lanham

Thank you so much. That's very insightful. I wanted to touch base about something we were talking about earlier in our conversation. I commonly have conversations about the older generation and that they're more susceptible to getting skin cancer. But I feel like that's a myth.

[00:31:10.050] - Dr. Bertha Baum

And could you give us some insights on who is most likely to acquire skin cancer? And again, at what age it is that we really should start paying attention more to this?

[00:31:21.150] - Dr. Bertha Baum

So I love that you threw in that fact at the beginning about the doubling up your melanoma risk every time you get a sunburn or after five sunburns. And that just shows you that your behavior as a child and as a mother, you really want to make the kids learn early on that the sun exposure is just going to increase your risk of getting a melanoma.

[00:31:52.110] - Dr. Bertha Baum

And out of the three most common skin cancers that we just mentioned, which are a basal cell, squamous cell, and melanoma, the most lethal one is melanoma. And unfortunately, that's the one that happens more in younger population. So usually the range for that is between the ages of 15 to 35, which is very young, and it can be deadly, unfortunately, if not caught early.

[00:32:23.130] - Dr. Bertha Baum

So we want to keep an eye on it. It's definitely a myth. But with that said, obviously the more chronic sun exposure that we get, the more possibility of getting a basal cell in a squamous cell, which are more common.

[00:32:40.470] - Dr. Bertha Baum

But melanomas can happen out of the blue. They can happen because of genetic issues as well as obviously those sunburns when we're very young. So we definitely want to take care of our children and let them know that each time they get those severe sunburns, what they're just literally increasing their chances of getting skin cancer.

[00:33:00.660] - Jessica Lanham

I think that's really helpful to know because there was a time where our opinions on how the sun affected our skin were much different. So my mother's opinion differed much from my own in my generation.

[00:33:14.430] - Jessica Lanham

And that's, I also think contributes to that myth of only older generations and sun exposure.

[00:33:21.750] - Dr. Bertha Baum

Absolutely.

[00:33:22.500] - Jessica Lanham

So now that we know this, how would you treat skin cancer and is there a cure?

[00:33:29.190] - Dr. Bertha Baum

Yeah, so we definitely treat skin cancer every day in our offices. And there's different treatments for it. So there's precancerous lesions that are still considered benign. And those are the actinic keratosis. Those lesions we want to treat sometimes with liquid nitrogen or creams. There are chemotherapeutic creams that we use localized, and they treat that precancerous lesions.

[00:33:55.560] - Dr. Bertha Baum

Sometimes when the basal cell carcinoma or the squamous cell carcinoma are superficial, and the pathology will let us know of that, we can treat them with just the cream or the liquid nitrogen. It's not the typical way we do, but depending on the case, there is that option.

[00:34:14.000] - Dr. Bertha Baum

And then we have the ED&C, which is just scraping and burning that we do in the area. We do it mainly through surgical excisions. That's how we treat most of our skin cancers. We surgically excised them. And then we have got the possibility here in the United States of having Mohs surgery, which was created to spare a tissue.

[00:34:35.670] - Dr. Bertha Baum

So in important areas like the areas of the face, or ears, neck, we do want to spare as much tissue as possible. Obviously, we don't want these big cuts all over our phase where it's going to disfigure us.

[00:34:51.140] - Dr. Bertha Baum

So Mohs surgery is a great way of taking a small sample once we know it's a skin cancer. Looking at it right there and then in the lab takes about 45 minutes for the histologist to prepare the slide and being able to see if all the skin cancer cells are gone.

[00:35:09.770] - Dr. Bertha Baum

If there's still a positive skin cancer cell, they go specifically to that area and take a little bit more instead of cutting more of the whole lesion. So it's great to spare. And then most surgeons have been trained to do very nice flaps and changes in the skin so that it looks very nice at the end in terms of the scar that is left, but most importantly, that the skin cancer is totally gone when they go home. And that's it.

[00:35:38.480] - Dr. Bertha Baum

And obviously, in severe cases of melanoma, we send those cases out for lymph node biopsy and oncology treatments.

[00:35:49.280] - Jessica Lanham

Great. Last question about this myth, have you seen cases where skin cancer can spread? And how does it spread if so?

[00:35:58.050] - Dr. Bertha Baum

Oh, yeah, absolutely. Over the years, you see so many cases and it's definitely a shame when it comes to basal cell carcinomas and squamous cell carcinomas because they tend to grow slower. So it really is basically that the patient did not seek help in the right timing most of the time.

[00:36:17.930] - Dr. Bertha Baum

And it has to do with a lot of things. Some people financially at that moment can't see a dermatologist. Others it's because they're scared of what the dermatologist is going to tell them. So by the time they show up, it has spread either to the lymphatics or other organs.

[00:36:35.750] - Dr. Bertha Baum

And like I said, there is better treatments nowadays for that. So there's pills and medications that we can give the patient. But with melanoma, sometimes they can just happen very fast. And unfortunately, even if they seek help right away, sometimes it has spread to other areas.

[00:36:54.230] - Dr. Bertha Baum

But the faster you go to the dermatologist, the better off most of the times you are in terms of the outcome and not spreading to other organs.

[00:37:03.740] - Ashleigh Kehrt

So you're saying get your skin care checks, folks?

[00:37:06.860] - Dr. Bertha Baum

Yes, absolutely.

[00:37:08.810] - Ashleigh Kehrt

So coming off of just talking about sun exposure and some of the other ways that we can get it, what about blue light exposure?

[00:37:16.310] - Dr. Bertha Baum

So, yeah, definitely, the blue light has gotten a lot of... People are very interested in it in the past five to 10 years. And we've done a lot of studies on it. And we've noticed that it may not specifically cause skin cancer because of the rays that we're getting, but it definitely causes aging because it's mainly UVA.

[00:37:40.340] - Dr. Bertha Baum

So definitely you want to put your sunscreen even if you're indoors, because we have a lot of those

LED lights, as well as just regular phone lights and computer lights. And you're going to get that exposure. So you can get those sunspots that are coming from that light as well as just aging spots.

[00:38:01.620] - Ashleigh Kehrt

That's a perfect segue for my next question. What is your best skin tip for not only skin cancer, but anti-aging?

[00:38:09.410] - Dr. Bertha Baum

I mean, I love retinol. So if you can do a retinol at night, it's great. It's going to shed off that skin faster and it's just going to give you a nice glow as well as help with the superficial lines and brown spots.

[00:38:24.620] - Dr. Bertha Baum

So it's the best thing you could do if your skin can tolerate it. There's definitely a lot of different options of retinols out there, and some of them are very tolerable, even if you have rosacea or very sensitive skin, and then a vitamin C in the morning because it gives you extra protection. It's an antioxidant and it's really getting rid of those free radicals. So it's a perfect pair with a nice sunscreen and off you go.

[00:38:52.250] - Jessica Lanham

We love both those ingredients, don't we, Ashley?

[00:38:53.510] - Ashleigh Kehrt

We do. We do. They are faves. So here's a little scenario for you. If a client comes in and they're there to see their aesthetician, and they have a pigmented lesion that either needs to be removed or maybe it has just been removed. How can we let the aesthetician know it's safe to treat?

[00:39:13.910] - Ashleigh Kehrt

So maybe they just had something removed and now they're coming in to see their aesthetician for a facial, and let's say it was on the face. When does that aesthetician know that they can go ahead and treat the skin with a facial, or peel, or et cetera?

[00:39:27.820] - Dr. Bertha Baum

Okay, everyone's skin can heal a little different. But I'd say in terms of biopsies on the face after a week, that biopsy site is going to look like normal skin. Maybe it's a little red, but they can definitely treat that area.

[00:39:43.960] - Dr. Bertha Baum

The biopsy may still be pending, so we don't know if there's a skin cancer there or not. But I don't think anything that an aesthetician will do on that spot can harm in any way, unless you're exfoliating or something very strong.

[00:40:00.130] - Dr. Bertha Baum

But even then, I don't think that could cause much of an issue. And then obviously, if you want to wait for the biopsy, that can be a little safer, especially if you don't have a dermatologist right there and then in the office.

[00:40:13.960] - Dr. Bertha Baum

You can just wait for the results and go from there. If it was just nothing to worry about, you can treat that area, and do your peels or whatever that patient is in for that day.

[00:40:27.430] - Dr. Bertha Baum

Now, if it was an actual surgical excision or a Mohs surgery, I would want to wait first for the sutures to be totally dissolved. Some people put sutures that can be removed after a week and some surgeons like the dissolvable stitches. And they can stay there up to six weeks.

[00:40:48.800] - Ashleigh Kehrt

Oh, wow.

[00:40:49.210] - Dr. Bertha Baum

So if the stitches are still there and you have a dermatologist there, maybe they can remove them because after a week or two, your body doesn't need them anymore on the face so they can be removed. And once they're removed and the areas healed, they can be treated again by the aesthetician.

[00:41:06.660] - Ashleigh Kehrt

Awesome. Well, that's great. So our final question for you today is, what is something you wish more patients knew about skin cancer?

[00:41:14.560] - Dr. Bertha Baum

I mean, I think we've definitely covered all the areas that I would want our our customers and people out there to learn about skin cancer. But I think it's important to understand the concept of chronic sun exposure and accumulation that we can get.

[00:41:34.360] - Dr. Bertha Baum

And some patients will tell me, oh, well, you know what, I'm never in the sun. And I say, really? You don't go out from your home at all. Well, I go grocery shopping. I pick up my kids. Well, that's enough exposure right there.

[00:41:46.750] - Dr. Bertha Baum

Even we have seen patient pictures of I don't know if this is a very common picture out there of an older female that has been exposed to the sun without any some protection, and you can see how much her left side is more affected just because of the drive in.

[00:42:08.350] - Dr. Bertha Baum

So in general, we see more left side of the face sunspots and issues just because we are getting that sun exposure on a day to day basis. And here in South Florida, even if you go to the supermarket takes you to get there 10 minutes because of traffic.

[00:42:26.170] - Dr. Bertha Baum

So we're always exposed to the sun. And even in areas that are not sunny, you're still getting sun. So you definitely want to understand the concept that you're accumulating sun over the years and also that skin cancer can affect the younger population.

[00:42:43.030] - Dr. Bertha Baum

Because they think as you're young, you really don't think anything bad can ever happen to you and you feel like you can conquer the world, which is great, but understand that it can happen to anyone. And by making those changes in your routine, you can prevent a lot of that.

[00:43:01.640] - Ashleigh Kehrt

I think that the one thing I tell people, if they're not moved by the fact that they could get skin cancer, I say, well, you can get wrinkles. So let's just take care of both of them by using our SPF.

[00:43:14.260] - Dr. Bertha Baum

That'll do.

[00:43:15.580] - Ashleigh Kehrt

Well, I can't thank you enough for being here with us today. I have learned so much. I thought I knew a lot, but I learned a plethora of new information. So I hope that our listeners are going to get their skin checks.

[00:43:27.760] - Dr. Bertha Baum

And let our listeners know how they can get in touch with you. Are you on social media? What's your website? What's the best way to reach you

[00:43:35.200] - Dr. Bertha Baum

Thank you very much. It's been an honor being here with both of you and you have a lot of knowledge as well. My Instagram handle is Dr. Bertha Baum, so you can find me there. I work in the Hallandale and Boca locations with Hollywood Dermatology and Rendon Center.

[00:43:54.250] - Dr. Bertha Baum

And in my Instagram, you can find all the information as well as drbaum.com or Hollywooddermatology.com. You'll find all the phone numbers and everything there.

[00:44:04.770] - Ashleigh Kehrt

That's amazing. Well, again, thank you so much for being here. And thank you, listeners, for joining us today. I also want to make sure that you tune in for next month, where we are setting the record straight and getting down to the bottom of skin myths.

[00:44:19.950] - Ashleigh Kehrt

Make sure you follow us as well on social media at @imageskincare.com And I hope everyone has a wonderful rest of their day.

[00:44:27.450] - Jessica Lanham

Have a great day, everybody.

[00:44:29.760] - Dr. Bertha Baum

Thank you. Bye.

[00:44:33.630] - Ashleigh Kehrt

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