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## WINTHE HEALTHY SKINFIGHT

## RECOGNIZE TROUBLE SPOTS

You're already on the lookout for weird moles (if not, you should be—see page 82), but there's more to pick up on: A persistent rough, scaly patch or a shiny bump that won't go away could be a red flag for squamous cell carcinoma or basal cell carcinoma. These skin cancers pop up in all skin types and colors and are more common than melanoma, though less life-threatening.

### IS IT SCC (SQUAMOUS CELL CARCINOMA)?

That dry, flaky patch of skin that seems to stick around? It might be a precancer to SCC. Precancers are clusters of abnormal cells that have started to divide abnormally and could turn into skin cancer, says David J. Leffell, M.D., chief of dermatologic surgery and cutaneous oncology at Yale School of Medicine. If you have one, it doesn't necessarily mean you'll get skin cancer (up to 5% may become SCC). But if you don't have it taken off by your doc and that area gets more time in the sun, it can turn cancerous and become tricky to remove,

with more potential for scarring, says Leffell. (Extra motivation to slather on SPF!) Actinic keratosis (AK)—the most common type of precancer—can also be practically invisible but still feels rough to the touch. "A lot of patients just put moisturizer on these spots and don't think much about them," says Anne Marie McNeill, M.D., a dermatologist in Newport Beach, CA, and spokesperson for the Skin Cancer Foundation. "However, any patch of dry skin that won't go away or that keeps returning after you slough it off is worth showing to your derm." And don't wait for your

annual skin check.

When it comes to skin cancer, you should feel empowered, not paranoid. Because unlike many other scary things in life, this is one you can do a lot to prevent. "Ninety percent of nonmelanoma skin cancers are associated with sun exposure, which means there's so much we can do to stay safe," says Elizabeth Hale, M.D., a clinical associate professor of dermatology at NYU Langone Medical Center. Arm yourself with the info you need, and rest assured: A gorgeous summer day is nothing to be afraid of.

BY MEGHAN RABBITT PHOTOGRAPHED BY HANNAH WHITAKER

### IS IT BCC (BASAL CELL CARCINOMA)?

Basal cell carcinoma, the most common form of skin cancer, often shows up as a reddish patch or a smooth bump that you may think is a pimple at first but just doesn't go away. And here's where things get a little gross: "If the spot bleeds, oozes, gets crusty, doesn't heal, or sticks around longer than a month, then make an appointment with your doctor," says Hale. Even if the diagnosis is BCC, there's good news. It's 95% to 100% curable when detected and treated early and has the lowest risk of spreading to other areas of the body.

## HOW TO DO A BODY CHECK

Here's a stat that might motivate you to regularly give your skin a good once-over: Up to 57% of melanomas are detected by patients themselves, according to a recent study. And a thorough job usually takes around eight to 10 minutes, says Jerry Brewer, M.D., a Mayo Clinic dermatologic surgeon. When you look at your moles, think of the ABCDEs below, and keep an eye out for something that's weird compared with any other moles, brown patches, and freckles on your body. If all your spots are light brown, for example, and you notice a black one, have it checked by a dermatologist, says Hale. The same goes for spots that seem to have popped up out of nowhere.

### → ASYMMETRY

Circles—even slightly imperfect ones—are OK; lopsided, splotchy shapes are not.

#### → BORDERS

Even is good; uneven is bad.

### COLOR

You want it to be uniform, not multiple shades of blue, gray, black, or red.

### → DIAMETER

A red flag = bigger than 6 mm, about the size of a pencil eraser.

### **→ EVOLUTION**

Look for moles that have grown, are inflamed, itch, or bleed.

To make sure you get checked out all over, enlist some help in viewing hard-to-see places, starting with your back. "Pair up with your partner, your sister, or a friend, and tell them what to look for," suggests Brewer. "That can go a long way toward early detection."



### **GET YOUR HAIRSTYLIST INVOLVED**

Your scalp and the area behind your ears can be especially tough to see yourself, so the next time you're getting your hair cut, ask your stylist if she notices any strange-looking spots while she's parting and combing your hair this way and that.

# **66** We Fight Skin Cancer on the Front Lines"

These two top doctors have dealt with thousands of skin cancer cases between them. Their stories, and a little tough love, will change how you handle the sun.

#### SHE SAID WHAT?!

"I will often talk to a patient whose skin is obviously sun damaged but who acts blasé when I start explaining the risk of skin cancer. I hear, 'Well, you'll just treat it,' and I think, It's like showing up to see a lung doctor with a cigarette in your mouth. But there are also many people who take my words to heart, which helps me feel like the message really is getting through." —ELIZABETH HALE, M.D.

A DOCTOR'S DIFFICULT DAY "When we catch melanoma early, survival rates are great. But today a mom with the disease who has young kids asked me what her odds of beating this are, and I had to break the news that she has about a 30% chance of living for the next 10 years. In moments like this, I wish more people could sit here with me and look at this woman's face as I give her a life-changing diagnosis that might have been prevented. Most of us don't realize these consequences and don't think it's going to happen to us. If I can change that way of thinking even in one person, I'll feel like I've succeeded." - JERRY BREWER, M.D.

### TAKE A QUICK MELANOMA QUIZ

Melanoma is on the rise in the U.S., especially for women under 30, according to the American Academy of Dermatology. (We were shocked too.) "That sounds scary—and it is," says Hale. "However, the more information you have about melanoma, the more you can do to prevent it or catch it early, when it's most treatable." If you answer yes to any of the questions below, stay on top of your skin checks, both self-exams and visits to your derm. "Also, wear sunscreen daily—and make sure you apply enough and reapply. That goes a long way toward reducing your risk of developing the disease," adds Hale.

## HAVE YOU USED A TANNING BED?

Hopping into one just once, even way back in your teens, gives you a 20% increased chance of melanoma. The odds are even greater if indoor tanning was ever a regular thing for you. (A single indoor tanning session increases your risk of SCC and BCC, too.)

# 2 HAVE YOU HAD FIVE OR MORE SUNBURNS?

This can double your risk of melanoma. However, it's no reason to throw up your hands and not use SPF now, says Hale. "Keep it up even if you have a history of bad burns."

# 3 HAVE YOU HAD AN ABNORMAL MOLE REMOVED?

If you've had one taken off and biopsied and it was an "atypical mole," you could be more likely to develop melanoma later on in life, according to the Skin Cancer Foundation.

## DO YOU GET INTENSE BOUTS OF SUN EXPOSURE?

Are you a weekend beach warrior come summer? This kind of
brief, potent UV exposure without adequate protection is a lot
worse than if you're in the sun
steadily year-round, says Hale.
"We know that cumulative,
chronic sun exposure is more
likely to lead to BCC or SCC, but
short blasts of it are more likely
to lead to melanoma—even if
your skin doesn't tend to burn."

# DOES MELANOMA RUN IN YOUR FAMILY?

Just like with most cancers, there's sometimes a genetic component to melanoma, says Hale. If a first-degree relative (a parent, sibling, or child) has had the disease, schedule skin exams with your derm every six months.



## YOUR BEST ANTI-AGING WEAPON? MOISTURIZER WITH SPF—EVERY SINGLE DAY

Let us appeal to your vanity: Sun protection is a crucial shield against skin cancer, but it's also your strongest defense against the sun damage that creates brown spots and wrinkles. OK, not life-threatening, but no fun! A broad-spectrum sunscreen is for everyday use—not just when you're at the beach, hiking, or eating lunch in the full sun. One of these daily moisturizers will cover your bases.

### FACE

1 Paula's Choice Calm Redness
Relief SPF 30 Mineral Moisturizer
(\$28, paulaschoice.com) 2 Hawaiian
Tropic Silk Hydration Weightless
Lotion Sunscreen SPF 30 (\$10, drugstores) 3 Olay Regenerist MicroSculpting Cream with Sunscreen
Broad Spectrum SPF 30 (\$26, drugstores) 4 L'Oréal Paris Age Perfect
Hydra-Nutrition Facial Oil SPF 30
(\$20, drugstores) 5 Tatcha Silken
Pore Perfecting Sunscreen Broad
Spectrum SPF 35 (\$68, tatcha.com)







### BODY

1 Alba Botanica Very Emollient
Fragrance Free Mineral Sunscreen
Spray (\$16, Whole Foods Market)
2 Garnier SkinActive Clearly Brighter
Anti-Sun Damage Daily Moisturizer
SPF 30 (\$15, drugstores) 3 Neutrogena CoolDry Sport Sunscreen Stick
Broad Spectrum SPF 50+ (\$10, drugstores) 4 Coppertone Clearly
Sheer Sunscreen Lotion SPF 30
(\$10, drugstores)



This mineral SPF spray won't look pasty white.





Portable sun protection to stash in your bag.



### ETERNAL SUNSHINE OF THE SAFEST KIND

Get pretty color standing in your nice, shady bathroom.

### BRONZERS



Benefit Cosmetics Dew the Hoola (\$28, benefitcosmetics .com), Physicians Formula Super BB #InstaReady Filter BB Bronzer SPF 30 (\$15, drugstores)

### ONE-SWIPE



Sun Bum Sunless Self Tanning Towelette (\$16, ulta.com), Dr. Dennis Gross Skincare Alpha Beta Glow Pad for Face (\$35 for 20 packets, sephora.com)

#### **FAUX TANNERS**



St. Tropez In Shower Gradual Tan Lotion (\$25, ulta.com), First Aid Beauty Slow Glow Gradual Self-Tanning Moisturizer (for face and body, \$28, sephora.com)