**Know the ABCDEs of melanoma**

Summer is here, and that means people will be soaking up the sun. While some vitamin D from sun rays is good in moderation, experts warn that if you overdo it, you’re at risk for [melanoma](https://healthlibrary.osfhealthcare.org/Search/SearchResults.pg?SearchPhrase=melanoma&SearchType=text&SearchOperator=And), a less common skin cancer but one that accounts for most deaths.

To emphasize how important it is to be aware of skin cancer, look no further than Kristi Fetter of Granite City, Illinois. She’s a survivor of four types of cancer, including a melanoma diagnosis in 2018, and she regularly attends a cancer support group at [OSF HealthCare in nearby Alton, Illinois](https://www.osfhealthcare.org/practices/43/1560/osf-moeller-cancer-center/).

“I went to my doctor, and she noticed a little black dot on my chest. And she thought it was cancer, and it was,” Fetter says.

“They cut it out, and it’s a pretty long scar,” Fetter adds as she gestures to the inches-long mark by her neck.

“So wear your sunscreen,” Fetter advises.

Heather Chambers agrees. She’s a patient navigator at OSF HealthCare in Alton. For melanoma, she has a number for you to commit to memory: 30. As in 30 SPF sunscreen is recommended to keep you as safe as possible. If you’re light-skinned, go higher than 30 SPF. And reapply sunscreen every few hours.

Chambers admits tanning – either in the sun or a tanning bed – is popular with some. She says if you can’t help but tan, do it in moderation. Otherwise, you risk skin cancer getting worse.

“It kind of grows down into the skin tissue,” Chambers says of possible cancer spread. “Then it has the chance to get vascular. It gets in your blood supply. And what happens then? It travels throughout your body, and it can relocate somewhere else.”

[Alejandro Sanz, MD](https://providers.osfhealthcare.org/provider/Alejandro%2BF.%2BSanz/1465394), sees different types of cancers in his role as a surgeon at OSF HealthCare in Alton. Sanz also says skip the tanning bed if you can, but also watch your watch when you’re in the sun.

“We recommend from 11 a.m. to 3 or 4 p.m. to avoid sun exposure.” Sanz says. That’s when sunlight is most direct.

Another thing Dr. Sanz recommends jotting down: the [ABCDEs of melanoma](https://www.aad.org/public/diseases/skin-cancer/find/at-risk/abcdes), as published by the American Academy of Dermatology Association. It’s a guide of what to look for when inspecting your moles.

A is for asymmetry. One half of the spot is not like the other half.
B is for border. The mole has an irregular, scalloped or poorly defined border.
C is for color. The spot has varying colors. Those colors could include tan, brown, black, white, red or blue.
D is for diameter. Dermatologists says melanomas are usually greater than six millimeters, or about the width of a pencil eraser. But they can be smaller, so don’t consider diameter alone.
E is for evolving. The mole looks different from the rest or is changing in size, shape or color.

Chambers sums it up by going back to that m-word: moderation. She says you wouldn’t drink or smoke yourself to death, so why would you put your skin through the same treatment?

“You want to protect your body at all costs. You want to live a long life,” Chambers says. “If you want to live a long life, you’ll put the sunscreen on. You’ll protect your skin.”

“I’d hate for you to die because you were out in the sun too much,” Chambers says.

Learn more about skin cancer on the [OSF HealthCare website](https://www.osfhealthcare.org/cancer/services/skin/). And if you see a mole that doesn’t look right, call your primary care provider or dermatologist. You might also ask your doctor if they recommend a yearly screening based on your individual risk, such as family history of skin cancer.