Actinic (Solar) Keratoses

Although actinic keratoses are not true skin cancers, it is important to have these lesions treated as they have the potential to change into squamous cell skin cancers.

What do they look like?

Actinic keratoses appear as red, rough, scaling spots. These lesions appear on sun-exposed areas such as the face, ear, balding scalp, back of the hand, forearm and leg. People usually have a few at a time. These spots may sting or itch. Some forms of actinic keratoses develop on the lower lip.

What causes these?

Too much sun over many years leads to a disruption in the normal development of skin cells, affecting the upper layer of the skin, called the epidermis. The sun's rays damage the skin's DNA, leading to this abnormal growth of the cells.

Who is at risk?

Fair-skinned people who freckle and burn easily, and tan poorly are at greatest risk. People over the age of 40 who have had a lot of sun also have a high risk for developing actinic keratoses. Outdoor workers face a greater risk because of their extensive sun exposure.

How are actinic keratoses treated?

There are a variety of treatments. Your dermatologist will advise you of the most suitable treatment based on the number of lesions, their location, your age and your general health. Treatments include cryosurgery (freezing of the lesion with liquid nitrogen), surgical removal, and creams.

How can actinic keratoses be prevented?

Protect your skin from the sun. Several international studies have shown that regular use of sunscreen can reduce the number of actinic keratoses people may develop. Other sun safety precautions are also important, such as wearing a wide-brimmed hat and sun protective clothing, and seeking shade.



