No Pain, No Gain

The Removal of Sun Damaged Skin, a Personal Experience

By JACK MACKENZIE, CGCS North Oaks Golf Club

OVERDONE IN THE SUN

Playing and eventually working upon a golf course through the 1960's, 70's and 80's initiated me to the joys that only the great outdoors could provide. Beautiful sunrises and an occasional rainbow were the backdrops to my perfect days of watching Mother Nature share her wonders. Little did I know that my long hours of enjoyment and employment under the sun were causing havoc to my skin.

As a youngster playing golf in the junior league, looping for members and eventually working on the green staff at the White Bear Yacht Club exposed my body to a daily dose of solar radiation. During my youthful years sun-bleached hair and tanned/burned skin was the norm. Sun protection consisted of Johnson's baby oil and the occasional visor. It wasn't until I had reached the mature age of thirty-five that I became concerned about my annual sun exposure. Perhaps it was the pain of sunburn, but more likely the development of premature wrinkles and the formation of funny bumps upon my face, that made me take notice of my skin. For the last nine years I have been using a high number sun block a minimum of once, but more likely twice, each day.

Unfortunately a decade of remedy didn't reduce my "laugh lines" nor improve my dermal decline. It was time to recognize my skin deterioration and visit a dermatologist.

THESE ARE THE FACTS, JACK

After giving my face a cursory look and hearing my sun history, the doctor

told me straight forward, "You have severe sun damage to your skin, primarily Actinic keratoses on your face, which are pre-cancerous lesion caused by sun exposure, and also a bit of squamous cell damage upon the backs of your hands and top of your ears." Oh oh, here we go!

The doctor gave me a pamphlet produced by DUSA Pharmacuticals to educate me about sun's effect and skin cancer.

Succinctly put, "Actinic keratosis (AKs) are rough, scaly patches on the skin, caused by excessive exposure to the sun, that can sometimes progress into dangerous skin cancers. More than 5 million Americans live with these lesions, and far too many people ignore them, leaving them untreated. This can have serious consequences. Doctors estimate that 40% of all squamous cell carcinomas, the second leading cause of skin cancer deaths

in the United States, begin as Aks. And without performing a skin biopsy, it can be almost impossible for a doctor to distinguish an AK from a squamous cell carcinoma."

Furthermore, "Left untreated, squamous cell carcinomas may become larger, go deeper into the skin and eventually spread to other parts of the body."

This information threw me for a scare and I decided that immediate treatment would be prudent.

YOUR OPTION, PASS OR PLAY

Remedial options available today are varied and depend upon the extent of the skin damage. Small lesions can be removed with cryotherapy (freezing), dermabrasion or laser surgery. Individual cells or small groups of cells are destroyed one at a time under the practiced eye of a dermatologist. However, more extensive damage necessitates a more dramatic approach.

Two methods for the removal of AK's on a grander scale are the application of a cream form of chemotherapy or a process called Photo Dynamic Therapy. Both are intense.

5 fluorouacil, also called Efudex or Flurplex, is a chemotherapy lotion preferentially absorbed by the rapidly dividing and abnormal AK cells. The process, which can take up to ten weeks, kills the damaged cells gradually. The dead skin is then sloughed off in the treated areas.

Severe discoloration, open sores and dramatic skin loss are common occurrences. The process is quite physically painful and mentally distressing, as the patient's skin takes on signs similar to Leprosy. Most signs gradually disappear over time.

During the process the patient must remember that the discomfort of the treatment is directly proportional to the amount of damage upon the skin, the greater the number of precancerous and cancerous cells, the greater the effects from 5 fluorouacil. One other treatment is

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available.

Two years ago a new, quicker and more aggressive method was created for the removal of AK damage. Called Photo Dynamic Therapy, the two-part process uses chemicals and light exposure to kill the sun-damaged cells quickly and very efficiently.

The first step is the application of amino-levulinic acid HCI, a naturally occurring chemical, where it is absorbed only into the AK cells. This chemical becomes photo toxic to the AKs when exposed to blue light. Healthy cells are left unaffected. 12 to 24 hours following the chemical treatment, the conditioned skin is exposed to 16 minutes and 40 seconds of light treatment, which immediately disrupts the integrity of the AK cells. They literally blow apart.

The treatment can be very painful, again depending upon the amount of sun damage present. It does however have some advantages over the topical chemotherapy. Timewise the physical discomfort and skin abnormality lasts about ten days, gradually disappearing. The treatment is much more effective and the process stimulates the formation of collagen, thus decreasing the appearance of wrinkles and imperfections.

After weighing the two general treatments I chose the faster PDT program. I figured that if I was to be in pain and disfigured, I might as well limit my discomfort as much as possible.

The afternoon that I received the chemical application my Doctor asked me, "Would you like some medication to take the edge off during and shortly after the procedure? Some of my patients have reported a slight stinging discomfort during the light phase." Not being big on taking any drugs I soberly declined.

BURN BABY, BURN

To be very honest, never in my life had I truly experienced physical pain until I underwent PDT. This statement isn't meant to scare anyone, nor distort the truth. But rather to emphasize the extent of sun damage I had upon my face. From the moment the 16 minute and 40 second



Jack MacKenzie, CGCS, shortly after a preventative facial treatment.

Blue light treatment began and the next 24 hours, the pain was barely tolerable. And as I rose from the procedure table, the question came again, "would you like some medication to ease the discomfort?".

"GIMME, GIMME, GIMME" WAS MY TEAR-FILLED RESPONSE

During the first day following the PDT, my skin swelled and turned the color of cranberries and I suffered incredible (Continued on Page 25)



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torture. To sooth the discomfort of the dying lesions I took my medication, stood outside in the cold, hourly applied ice packs upon my face and, to my greatest relief, slathered the destroyed

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skin with a topical aloe vera gel I had found in the medicine cabinet. Gradually, over the next three days, the redness and pain went away, only to be replaced by a deep tan and itching and scaling skin. The damaged cells were now dead and sloughing off.

Even though I looked like I suffered from leprosy, the pain was gone and the irritation was minor. But the stares I received from curious onlookers made me appreciate and reflect upon what burn victims must tolerate on a daily basis. At my follow up visit one week after the therapy, my skin was pink and smooth.

IS THE RESULT WORTH THE PRICE?

PDT is a curative and preventative program. Perhaps the greatest result of the therapy was the fast and effective method of removing precancerous and cancerous cells from my face. This procedure should reduce greatly the chance for disfiguring surgery in the future.

My "new" skin will be easier to maintain in a healthy fashion because it has yet to be burned. I will keep it in good health by applying a quality sun block or sunscreen multiple times during the day. And finally, my mug got a chemical face lift. Not that I needed any beautification, but every little bit helps!

