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Skin Cancer Underreported in Massachusetts

The number of cases of cutaneous malignant melanoma—a potentially deadly form of skin cancer—is significantly underreported in Massachusetts and perhaps in the rest of the country as well, according to a study in the *Journal of the American Academy of Dermatology.*

Researchers at Boston University School of Medicine (BUSM) compared figures on the incidence of cutaneous malignant melanoma from independent sources with those provided by the Massachusetts Cancer Registry.

Most data included in the registry are obtained through hospitals and are based on patients admitted to hospitals and biopsies interpreted in hospital-based pathology laboratories. However, more cases of cutaneous malignant melanoma are being diagnosed in the outpatient setting and are not reported to the registry. Data from private physicians and nonhospital laboratories often are not forwarded to the registry.

The researchers estimate underreporting to range from 12 to 19 percent. Underreporting was confined to melanoma and did not apply to other cancers.

"Accurate recording of statistical information regarding this cancer is important to study its causes and to evaluate its growing impact on our society," says **Howard Koh, M.D.**, an associate professor of dermatology, medicine and public health at BUSM and Boston University School of Public Health, and the lead author of the study.

"Underreporting of malignant melanoma means that the incidence of this cancer, which is already rising faster than any other cancer, may be even higher than previously appreciated. We must redouble our efforts to cure and prevent this cancer," he adds.

Skin Cancer Screenings Effective

The statistics on skin cancer are grim. In 1991, an estimated 500,000 Americans will be diagnosed with skin cancer; of that number, 32,000 will have malignant melanoma, and 6,500 of them will die. One in 90 Americans will develop malignant melanoma in their lifetime.

In an effort to detect skin cancers early when they are most treatable, The University Hospital (UH) is participating in a nationwide public-awareness and screening campaign by holding free skin-cancer screenings on **Saturday, May 18, from 9 a.m. to 1 p.m.** This year, the American Cancer Society (ACS) is mounting a major campaign against melanoma and skin cancer, in general. In addition, the American Academy of Dermatology (AAD) will again sponsor free skin-cancer screenings in May and June.

Howard Koh, M.D., the codirector of the UH Skin Oncology Program, the national chairman of the AAD's Committee for Melanoma/Skin Cancer Screening Programs and the Massachusetts director for the ACS melanoma/skin-cancer task force, says awareness, education and screenings could impact the incidence and mortality of melanoma/skin cancer in the same way that similar efforts have reduced cervical cancer.

"I tell people that skin-cancer screening in the 1990s is where pap smear was in the 50s and mammography was in the 60s. I really believe the skin-cancer screenings have that kind of potential to help people, but there are still decades of work ahead to prove their effectiveness," says Koh.

While screenings can be effective for early detection, the best way to defeat skin cancer is to prevent it by limiting sun exposure and wearing sun screens when sun exposure is unavoidable.

(more)

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Cigarette Smoking and Impotence

Smoking just one pack of cigarettes per day for as few as five years can cause the arteries in a man's penis to narrow by 50 percent and may result in impotence, according to a study published in the *Journal of Urology*. The study, conducted by researchers at The University Hospital (UH) and Boston University School of Medicine (BUSM), is the first to document that men who smoke have characteristic narrowing of their penile arteries that may result in impotence.

Impotence—or the inability to achieve or sustain an erection—affects an estimated 10 million American men. In the past, it was thought that impotence was a psychological condition. Today, most cases of impotence are attributed to physical damage to the penile arteries thought to be caused by the same risk factors as those related to heart disease: high blood pressure, diabetes, high cholesterol and smoking. In addition, trauma to the groin may damage the penile arteries and can result in immediate impotence or may contribute to the future development of impotence.

The researchers studied the medical histories and penile x-rays of 195 impotent men. They found that the risk of developing a blockage (a narrowing of 50 percent or more) in the major penile artery was 15 percent higher for men who smoked 5-pack-years (1 pack per day for 5 years) than for non-smokers. The percentage doubled to 31 percent for 10-pack-years and quadrupled for 20-pack-years. The researchers also found smoking may accelerate the development of impotence in patients who sustain injury to the groin.

"This study indicates that cigarette smoking is an independent risk factor for developing significant narrowing of the penile arteries," says **Max Rosen, M.D.**, the lead author of the study and a resident in UH's Radiology Department. "The study's findings are particulary important for young men whose only potential risk factor for impotence is smoking."

New Therapy for Chronic Diarrhea in Children

Children suffering from chronic diarrhea caused by a common bacterium have lower than normal amounts of a needed antibody in their bodies and may be cured with injections of gammaglobulin, according to a study by researchers at Boston's University Hospital (UH) and Children's Hospital and published in *The Journal of Pediatrics.*

Many people develop Clostridium difficile-induced diarrhea after they have been treated with antibiotics. It is the most common hospital-contracted diarrhea in adults. Although more rare in children, it can be serious, cause extreme discomfort and last for months or years. Traditional treatment with an antibiotic directed at the bacteria is effective for some patients, but not for many others.

Researchers found that children with recurrent C. difficile diarrhea had lower levels of an antibody needed to fight the bacteria than healthy control groups. They treated five children who had diarrhea for an average of seven months with injections of gammaglobulin, a purified form of human antibodies. All five showed no signs of the bacteria or diarrhea at the end of treatment. One patient had a recurrence, which again responded to gammaglobulin treatment.

Says UH's **Ciaran Kelly, M.D.**, who performed the laboratory analyses: "We are excited about these results. They indicate that patients with low levels of the antibody may be unable to clear the bacterium and as a result they suffer from recurrent diarrhea. Replacing the deficient antibodies allows them to recover from the disease."

Donald Leung, M.D., Ph.D., now at the National Jewish Center for Immunology and Respiratory Medicine in Denver, who conducted the clinical trials at Children's says: "These results are significant because they suggest that we may finally have an effective way of treating cases of this disease that did not respond to conventional therapy."

New Book Helps Patients Cope With Parkinson's Disease

"Life was beautiful in 1978," begins University Hospital (UH) patient Glenna Wotton Atwood in her new book, *Living Well With Parkinson's Disease*. But, 1978 was also the year she first noticed the symptoms of the disease that would change the course of her life and ultimately lead her to write a book to help other Parkinson's patients live productive and meaningful lives.

"This is the book I wish were available when I was diagnosed," says Atwood. After learning that she had Parkinson's in 1981, Atwood searched for information to help her cope. The book contains the fruits of that 10-year exploration of herself, her disease and available resources.

Parkinson's disease—which affects 1.5 million Americans—is a chronic, neurological disease caused by a deficiency of dopamine, a neurochemical needed for proper control of all body movements. Parkinsonians experience stiffness and tremors; they tend to move slowly, have difficulty walking and have problems with balance. Synthetic dopamine is the primary treatment.

In the book, Atwood details her feelings and actions as she learned of her disease; faced her fears and frustrations; found UH Parkinson's specialist **Robert Feldman, M.D.**, and his team of experts; decided to retire; worked on her relationships with family and friends; and found new ways to continue to live a productive life.

It is also a book of practical advice on such topics as choosing the best physician and how best to perform daily activities. Atwood also gives her readers up-to-date information on treatments and research.

Attitude is the most important aspect of living well with Parkinson's disease, according to Atwood. "You did not choose to have Parkinson's, but you can choose how to live with it," she concludes.