

What is a basal cell carcinoma?

Basal cell carcinoma (BCC) is the most common form of skin cancer and is normally a very slow growing form of skin cancer. It rarely spreads to other areas or organs in the body. If left untreated, BCC can develop into a rodent ulcer which can disfigure, so early recognition is important.

What causes BCC?

The most common cause of BCC is long term exposure to ultraviolet (UV) light from the sun or sun beds.

They occur on sun exposed skin, such as the face, scalp, ears, hands, shoulders and back. They can also form where there is damaged skin caused by burns, ulcers or scars.

There are certain groups of people who are at higher risk of developing BCC which include:

Those who have fair skin and blonde or red hair.

People who have had a lot of exposure to the sun such as outdoor workers, those who have outdoor hobbies and those living in sunny climates.

People who have had a previous skin cancer. Those who use sun beds.

They are more common in men than women and are frequently seen in people aged over 50

What are the signs of a BCC?

BCC usually appear as an open sore or ulcer. It may bleed or crust but it does not heal.

BCC can look like a red patch on the skin, which may be itchy or crusty.

Some BCCs will have a pearly rim.

Others can be lumpy and with shiny nodules within it.

If left untreated an ulcer may develop where the BCC destroys the skin.

How is a BCC treated?

The most common treatment for BCC is surgery. Usually, this means cutting away the BCC, along with some of the healthy skin around it, using local anaesthetic injection to numb the skin. The skin can usually be closed with stitches

Are basal cell carcinomas hereditary?

Apart from a rare familial condition called Gorlin's syndrome, BCCs are not hereditary. However, some of the things that increase the risk of getting one (e.g. a fair skin, a tendency to burn rather than tan, and freckling) do run in families.

Histology Test

The Cyst or Lesion (piece of skin), which has been removed will be sent to the Pathology Department to be assessed. The results will be sent by letter to your GP.

Aftercare for Cyst or Lesion removal

You will be able to go home as soon as you feel ready.

Your doctor or nurse will give you some advice about caring for your wound before you go home.

If you have had stitches your nurse will advise on when to have these removed, you will need to arrange to have these removed at your Gp practice with the practice nurse.

If you've had a local anaesthetic to remove your skin lesion, it may take an hour or two before the feeling comes back. Take special care not to bump or knock the affected area, and don't have hot drinks if you've had anaesthetics around your mouth.

Your wound may feel tender and sore after the anaesthetic has worn off.

What should I do if I have a problem?

If you experience severe pain, excessive swelling, inflammation or discharge contact either your GP, diall 111 or visit your nearest Urgent treatment center.

When can I return to work?

If you have an office-type job it may be sooner. If your job requires a lot of walking or is strenuous then you may need 2-3 weeks off work.

Patients can self-certificate for sick leave for 7 days. If you require a sick certificate please ask your surgeon on the day of surgery.

When can I return to driving?

We do not advise that you drive for at least 2 weeks and you should arrange to have someone bring you to your appointment.

If you are unsure, contact your GP for further advice and also check with your insurance company.

How can BCC be prevented?

Regularly and systematically look and feel for any changes in your skin. Using a mirror examine your back, neck, ears or scalp.

Wear protective clothing and wide brimmed hats when outdoors.

Wear sunglasses- look for glasses with the label for the CE Mark and British Standard UV 400 label and 100% UV protection and protection at the side of the eye.

Avoid sun exposure during the hours of 11am to 3 pm and seek shade.

Apply high factor sun cream, at least SPF 30 when out in the sun and re-apply every 2 to 3 hours, or more often if perspiring or swimming.

Advise others, especially family and friends, to protect themselves and carry out annual whole body checks.

UV rays can penetrate water; wear a light t-shirt that does not become transparent in water.

Never use a sun bed.



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Can basal cell carcinomas be completely removed?

Yes, BCCs can be completely removed in almost every case, although treatment can be more complicated if the BCC has been neglected for a long time, or if it occurs in an awkward place, such as close to the eye or on the nose or ear.

BCCs rarely spread to other parts of the body. Therefore, although it is a type of skin cancer, it is very rarely a danger to life.