Practice Press Release Template – New Zealand

On the following page is a template for a media article designed to encourage awareness of skin cancer prevention and early detection in your local community and also to promote your practice.

Insert your name and practice details as indicated in red to personalise the article. Submit the completed article to your local media, making sure you include your name and contact details. You may also like to indicate whether you are available for an additional interview, and if you/your practice are available for photographs.

You can use the entire template, or select relevant sections as indicated by the colour blocks. You can create a single press release or a series of releases all related to the same topic. Do not include this instruction page in your final press release.

If you have any questions, or to obtain a copy of the press release template in MS Word, please contact: info@skincancercollege.org

NOTE: this template is provided as a service to members of the Skin Cancer College Australasia. The College does not guarantee that using this template will result in media coverage for the member or their practice. Responsibility for the accuracy of information included in any media release based on this template rests with the persons/practice making the release.
Beating the Skin Cancer epidemic

The risk of cancer increases with age, and the number of adults seeking treatment is increasing dramatically, in line with our aging population. Of all cancers, skin cancer is by far the most common in New Zealanders.

The total number of new skin cancers diagnosed — both melanoma and non-melanoma — amounts to about 80 per cent of all new cancers diagnosed each year overall. New Zealand has one of the highest melanoma rates in the world. It is our fourth most common cancer and our sixth most common cause of death from cancer.

Among 25 to 44 year olds, it is the most common cancer in males and second most common cancer for females. In addition, there are about 67,000 new non-melanoma skin cancer cases identified each year.

In times past, we were not as aware of the dangers of exposure to ultraviolet (UV) light — both natural and artificial — as we are today. Now we know there is no such thing as a ‘healthy tan’ and more than 95 per cent of skin cancers are caused by exposure to the sun*.

Not surprisingly, outdoor workers such as farmers, forestry workers and builders, who have spent their working life in the sun, often without adequate protection, are well represented among those needing treatment.

Dr [insert name], of [insert practice name] calls the prevalence of skin cancer an epidemic — and with the arrival in retirement years of the baby-boomers, who enjoyed their halcyon days soaking up the sun, it’s only really starting.

“Certainly, if we are not careful when we are young, it will come back to haunt us when we are older. The good news is if skin cancers are identified early, they can usually be cured. But if ignored, the consequences can include disfigurement or, in some cases, death,” says Dr [insert name].

Dr [insert name] hopes that by engaging with the local community and prompting a greater awareness of the causes and early signs, the increasing incidence of skin cancer can one day be reversed. He/She explains that sometimes people see him/her to have a single mole checked, only to find that another lesion, lump or mole that they haven’t considered is of much greater concern.

You, your partner and your family will know better than anyone else if something on your skin is new or changing — these are two important early warning signs. Become familiar with your spots and moles, and check your skin regularly.

The Skin Cancer College Australasia promotes a simple, but very effective mantra: **SCAN Your Skin**. **SCAN** means look for a spot or mole that is...

- **Sore**, scaly, itchy, bleeding, tender and doesn’t heal within six weeks.
- **Changing** in appearance, size, shape or colour.
- **Abnormal**: Looks different, feels different, or stands out when compared to others.
New: Most melanomas – and all other skin cancers – arise this way.

For more information go to: www.scanyourskin.org

The more SCAN features a spot or mole exhibits, the more concerning it may be. If this sounds like you, see your GP or a doctor with advanced qualifications in skin cancer medicine, and ask for a spot check, or better still – a full skin check.

How long does a skin check take?
A thorough skin check can take up to 45 minutes. This includes some time for the doctor to discuss your medical history – which can have an impact on your risk of developing skin cancer.

What equipment does the doctor use?
A doctor who has been trained to use a dermatoscope will take a close up look at any spots of concern to assist in a diagnosis. A dermatoscope is a bit like a torch with a magnifying glass attached to the end. Using a dermatoscope is painless, and greatly assists the doctor in deciding if a spot or mole is, or is not of concern. If uncertain, the doctor may take a dermoscopic photograph of a spot or mole, so it can be monitored over time for any changes.

What happens if the doctor finds anything which could be skin cancer?
Your doctor will tell you straight away if you have any moles or spots which require testing. To test the mole or spot the doctor will either take a small biopsy (sample) of it, or completely excise (cut out) the spot of concern – under local anaesthetic of course. In most cases another appointment will be made to remove the abnormal mole or spot. This type of minor surgery can be carried out at your doctor’s surgery or office. There is usually no need for this to be done in a hospital.

After it is removed, the mole or spot is sent to a pathology laboratory for testing. Receiving the test results can take from one to several days, depending on the pathology provider.

What happens if skin cancer is found?
In most cases, when found early, skin cancer can be easily and successfully treated with surgery. Most skin cancers are cured once they are removed. Other non-surgical treatments such as creams, radiotherapy, or light therapy may be used but this will depend on the type of skin cancer found.

What happens after the skin check?
Depending on your level of risk for developing skin cancer, your doctor may recommend regular follow up skin checks. The frequency for follow up skin checks can vary from every few months, to once every year or two. Most doctors will have a system in place to send you a skin check reminder, but it is also a good idea to keep your own record of when a follow up skin check is due.

If you want to see a doctor about your skin, the New Zealand Cancer Society advises you to ask:

- **What services are offered?** In particular, is a total body skin examination available, or only an investigation of particular spots or areas of concern?
- **Who provides the service?** What type and level of training has that provider undertaken? What skin cancer medical qualifications do they have?
- **Do they audit the results?** The quality of any examination depends on the skill and expertise of the person doing the procedure, and most importantly, reading the images.
• **How much will it cost?** Will there be charges beyond the initial consultation, such as for follow-up visits? Will you be billed for having images stored?

• **What happens next?** For instance, will a letter and any images be sent to your GP, along with any results?

The {insert practice name here} is dedicated to the prevention, diagnosis and treatment of skin cancers. It offers local, cost-effective access to advanced knowledge, diagnostic techniques, and treatment. You, however, are going to be the person most familiar with any changes in your skin, so SCAN thoroughly and repeat often. It’s a simple habit to get into, and one that might save your life.

*Cancer Council Australia – *Skin cancer facts and figures, updated March 2014*

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*For more information please contact:*

{Insert Doctor and/or Practice Manager Name here}

{Insert Practice address, phone number and email address here}

{Include best contact times if relevant}