



A Brief Description on Squamous Cell Carcinoma

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INTRODUCTION

The most frequent kinds of skin cancer are basal cell carcinoma (BCC) and cutaneous squamous cell carcinoma (cSCC), respectively. Actinic keratosis and melanoma are two more common skin lesions. Actinic keratosis and basal cell carcinoma are both easily removed and have a favourable prognosis, whereas cSCC has a terrible prognosis, particularly if it invades the lymph nodes and other important structures. Early treatment of actinic keratosis, which is a premalignant precursor of cSCC, will save the patient's morbidity. Extrinsic factors like sun exposure have been related to cSCC, whereas intrinsic factors like antioxidants, aspirin, and non-steroidal anti-inflammatory medicines (NSAIDs) have been shown to lessen the likelihood of developing the condition.

Any lesion suspected of being a cutaneous neoplasm should be subjected to a biopsy. Surgical excision and Mohs micrographic surgery are the primary therapeutic options for invasive cSCC.

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Squamous cell carcinoma of the skin signs and symptoms

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Diagnosis of cutaneous squamous cell carcinoma

CT scanning will be used to check for soft tissue or bone invasion, as well as lymph node metastases, in patients with suspected cSCC. To rule out invasion of neurological or essential structures, magnetic resonance imaging (MRI) can be employed. For a conclusive diagnosis, an incisional or excisional biopsy is required. The size and location of the lesion will determine which biopsy is used.

Management of cutaneous squamous cell carcinoma

Treatment options include the following:

- Surgical excision with clear margins, as verified by frozen sections.
- Mohs micrographic surgery for invasive cSCC in the facial region.
- Radiation therapy as an adjuvant to surgery, to provide improved locoregional control, or as primary therapy in patients who are unable to undergo surgical excision.
- Chemotherapy, such as treatment with oral 5-fluorouracil (5-FU) and epidermal growth factor receptor (EGFR) inhibitors, as adjuvant therapy for select highest-risk cases.
- Systemic chemotherapy for metastatic cSCC.

CONCLUSION

The best way to prevent the development of further skin cancer is to protect the skin from further sun damage. Use at least SPF15 sunscreen and wear a wide-brimmed hat. Eat a healthy low-fat diet. Early treatment of SCC makes it easier to treat, so learn about the signs of skin cancer and check your skin once a month. Seek medical attention immediately if you have suspicious growth.

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