SOUTHWESTERN NEWS

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TOPICAL CREAM TO BE TESTED ON SKIN CANCER PATIENTS

DALLAS – March 9, 1999 – Carmen Clausse remembers spending much of her youth trying to achieve the perfect tan. Years later a spot on her chest was diagnosed as basal cell carcinoma.

UT Southwestern Medical Center at Dallas is one of 10 U.S. medical centers selected to study a topical cream to treat basal cell carcinoma. Until now the only option was excision.

Basal cell carcinoma – one of the most frequently diagnosed types of skin cancer – is caused by overexposure to sunlight, especially when the exposure results in sunburn and blistering. The carcinoma appears as a small, fleshy bump on the head, neck or hands. The tumors spread slowly, but, if left untreated, can extend below the skin and damage underlying tissues.

Researchers have found the topical cream imiquimod, currently used to treat genital warts, apparently has an effect on skin cancers.

"Imiquimod is classified as a biologic response modifier because it changes the response of the immune system in the areas of the body where it is applied," said Dr. Amit Pandya, associate professor of dermatology.

Current treatments for skin lesions can cause a toxic reaction and destroy tissue. Instead of affecting the lesion directly, imiquimod causes the body's immune system to produce and recruit cells involved in the production of immunity. Those cells in turn produce interferon and other agents to eradicate the cancerous growth.

(MORE)

SKIN CANCER CREAM # 2

Main side effects include burning, itching and ulceration at the application site.

Clausse, who said she volunteered for the study because it was an opportunity to do something positive, added, "This study provides a patient with an option in the type of treatment they receive."

To qualify for the study, participants must be 18 or older with a nonrecurring superficial or nodular carcinoma visible to the patient. It cannot be within 1 centimeter of the hairline, eyes, nose, lips or ears. People taking oral steroids or immunosuppressive agents will not be considered. Six weeks after the 12-week treatment the lesion will be excised. Upon completion of the study, patients will receive $300 compensation.

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