The Importance of Recognition of the Skin Cancer Risk of Native Americans: A Call to Action

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ABSTRACT

Melanoma is a deadly skin cancer affecting a significant part of the U.S. population. People of color are more likely to face lower survival rates from melanoma and are likely to be diagnosed at a later stage. Efforts to combat this have largely focused on Asian, Hispanic, and African American patients. Native Americans have been unfortunately excluded from such studies. This article is a call to action and is an effort to raise awareness for Native American inclusion in future skin cancer studies so their skin cancer knowledge and risk can be appropriately ascertained.

REVIEW

The term “skin of color” was created to be an all-encompassing term for those of ethnic origin who share similar characteristics and diseases related to skin pigmentation and scarring. However, most skin of color articles related to skin cancer focus solely on African-Americans, Hispanics, and Asian populations1-3. Native Americans are consistently excluded from these studies3. As a result, details such as skin cancer knowledge, perceived risk, sunscreen use, and behavioral practices that are well known for other ethnicities are relatively unknown for this group2,4. Without such data, even the most basic information regarding their skin cancer risk becomes difficult to ascertain.

In fact, Native Americans are an important US demographic. Surprisingly to some, 5.2 million Americans trace all or a substantial part of their heritage to Native American roots and this population is growing in every state except Vermont1. For these reasons, it is becoming increasingly important for dermatologists to become more aware of their skin disease related needs. Despite their lower incidence of melanoma, Native Americans also have a lower 5-year survival rate of 69.8% versus 91% among Caucasians5,6. This may be due to a lower index of suspicion in these persons leading to delay in diagnosis and is particularly worrisome because the current data suggests that the incidence of this cancer is continuing to rise in this group. Furthermore, the mean age for diagnosis of melanoma is
52-54, one of the lowest out of all races\(^1\). Therefore, it is vital that Native Americans become aware of their skin cancer risks, use preventive measures such as sunscreen, are aware of the importance of early diagnosis, and are included in educational interventions to reduce their risk of skin cancer.

Yet despite this, skin of color articles that utilize direct interventions (such as focus groups or classes) in order to educate ethnic populations of skin cancer risk have also often excluded Native Americans\(^5\). None of five recent skin cancer interventions included such a participant. This is may be due, in part, to the cultural and language barriers faced when attempting to recruit them\(^1\). Education is the primary method for increasing skin cancer knowledge among ethnic groups\(^3\). Therefore, if these efforts exclude Native Americans, they may not be having broad-based impact across these groups.

What can be done to ameliorate this problem? Better data needs to be collected from this group to assess the knowledge gaps related to skin cancer both in patients and providers. To facilitate this effort, researchers should utilize translators and work together with community leaders to develop relationships based on trust and understanding. Hopefully, efforts such as these will lead to an increased level of knowledge and understanding of the associated challenges and the generation of targeted public educational programs that will help reduce the risk of skin cancer in this underserved population.

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References:


