

MPN Horizons
Understanding the
New Complexity of MPNs

13-15 October
Zagreb, Croatia

2023


Special cases: skin cancers & thrombosis

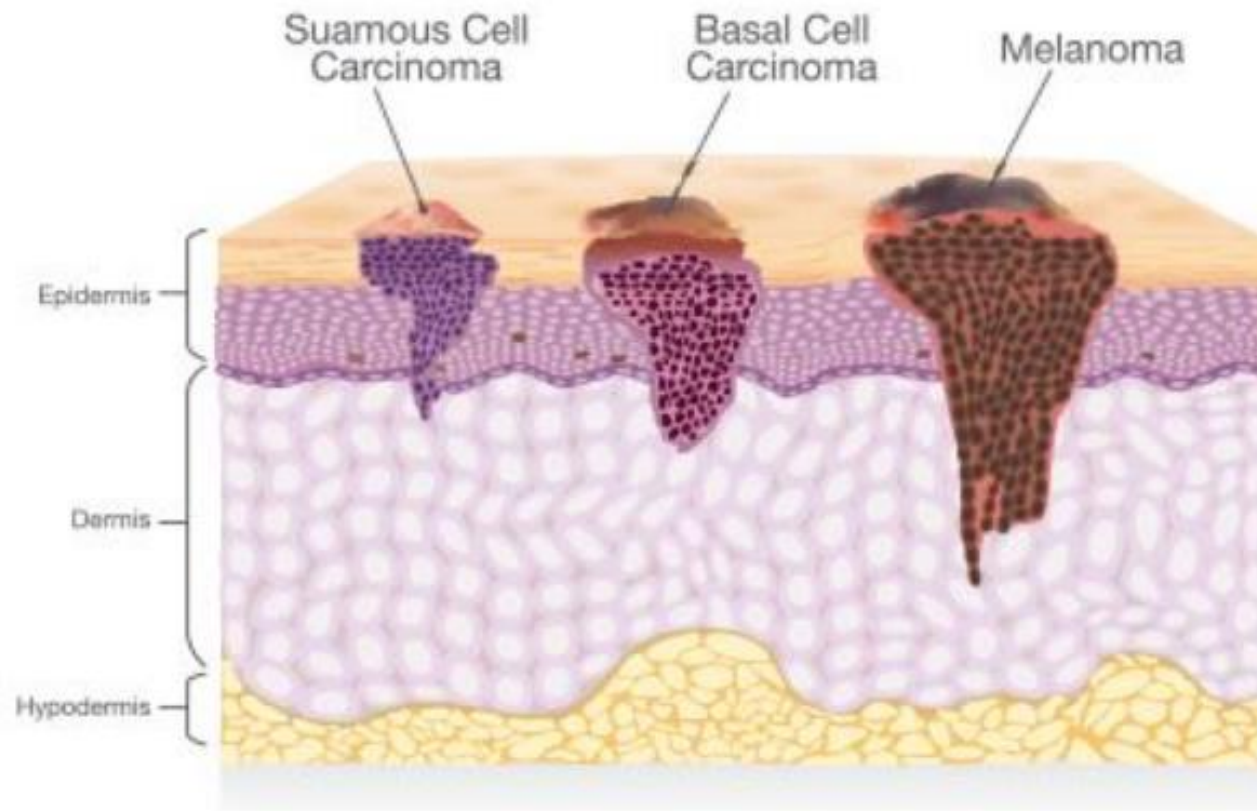
Claire Harrison



Skin cancer

- Your skin is your largest organ and an important one to protect.
- Just like any other organ it is susceptible to cancer..
- Skin cancer trumps all other forms of cancer.
 - According to one estimate, about 5.4 million cases of skin cancer are diagnosed among 3.3 million people each year.
 - There are 3 main types of skin cancers

Type of skin cancer



Basal cell cancer



Most common not usually aggressive

Treated with surgery

Can be linked to hydroxyurea / hydroxycarbamide

Squamous cell cancer



- Second most common
- Often multiple
- Usually linked to sun damage
- Can be aggressive
- Risk with Hydroxyurea/ carbamide and Ruxolitinib

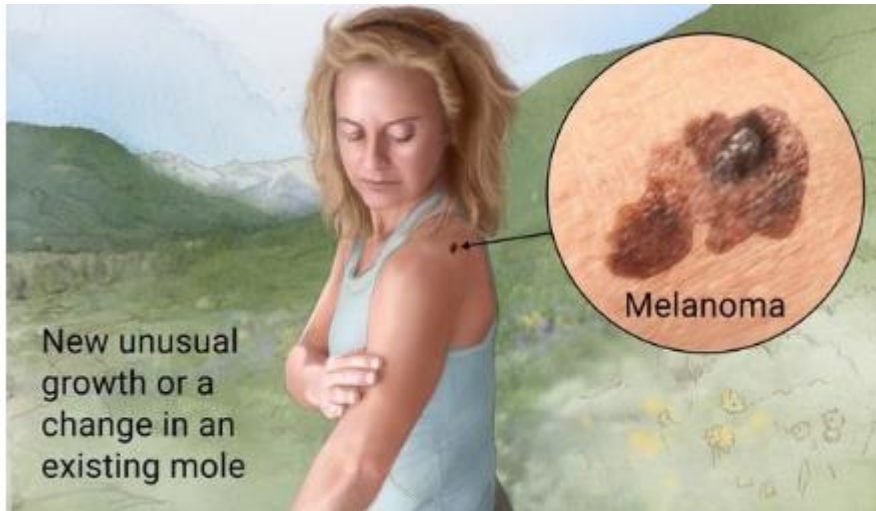


- Pre-cancerous areas called actinic keratosis



Melanoma

- Rarest but most aggressive
- Not usually linked to MPN treatments



Risk factors for skin cancer

- Fair skin— anyone, regardless of skin colour, can get skin cancer
- A history of sunburns
- Excessive sun exposure
- Sunny or high-altitude climates
- Moles
- Precancerous skin lesions
- A family history of skin cancer
- A personal history of skin cancer
- Weakened immune system
- Exposure to radiation

- **HYDROXYCARBAMIDE, RUXOLITINIB**

What to watch out for

- A skin growth that increases in size and changes colour or texture
- A mole, birthmark, beauty mark or any brown spot that:
 - changes color
 - increases in size or thickness
 - changes in texture
 - is irregular in outline
 - is bigger than 1/4", the size of a pencil eraser
 - appears after age 21 years
- A spot or sore that continues to itch, hurt, crust, scab, erode or bleed
- An open sore that does not heal within three weeks

Be Skin Aware

How to reduce your risk of skin cancer

A number of changes to your lifestyle can significantly reduce your risk of skin cancer including:



Avoid over exposure to the sun



Avoid the use of sunbeds



Wear a hat or protective clothing to protect your head, face, neck and shoulders



Apply a high-factor 4 star+ rated, waterproof sunscreen every two hours



Wear sunglasses with UV protection



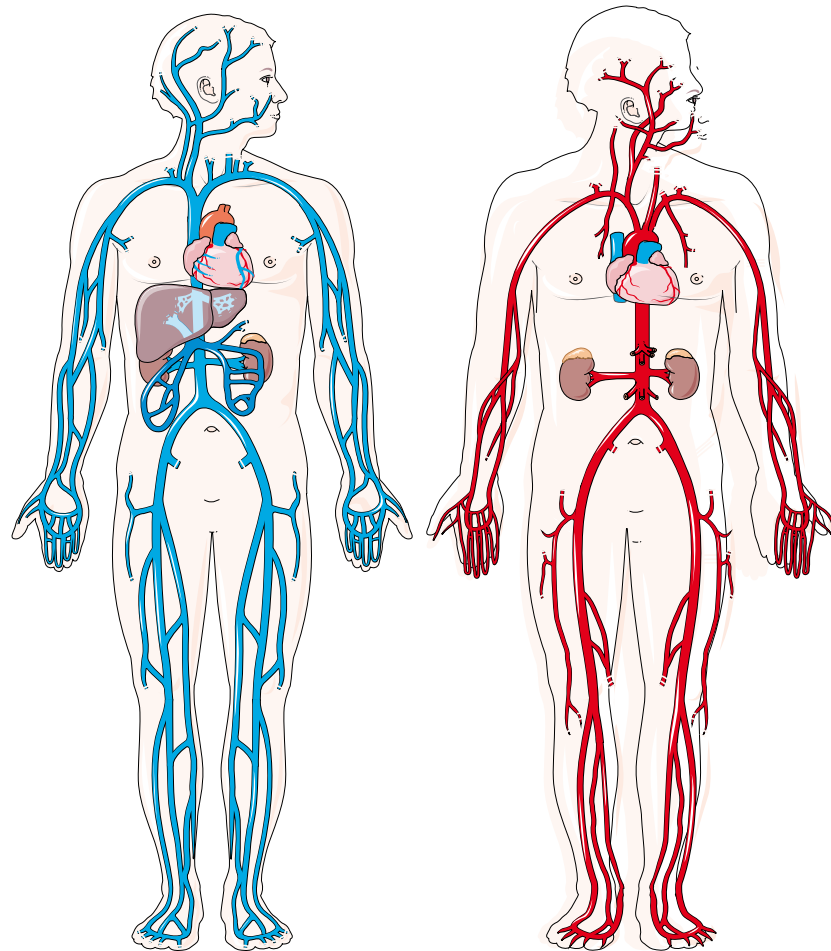
Move into the shade from 11.00hrs -15.00hrs when UV is strongest



Consider regular skin screening

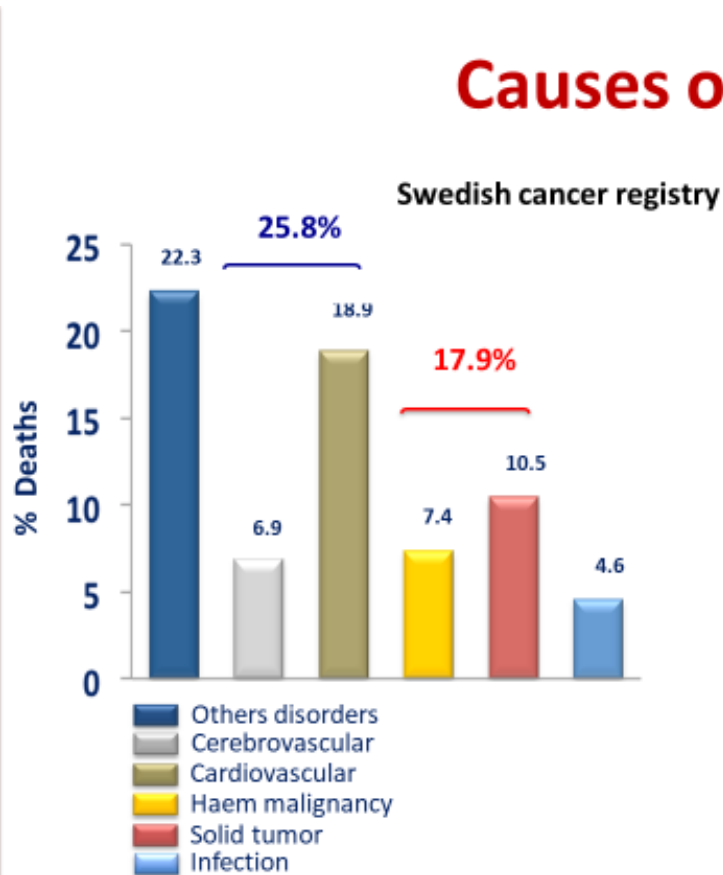
THROMBOSIS

Venous and arterial thrombotic localisations often but not always unusual sites for MPN

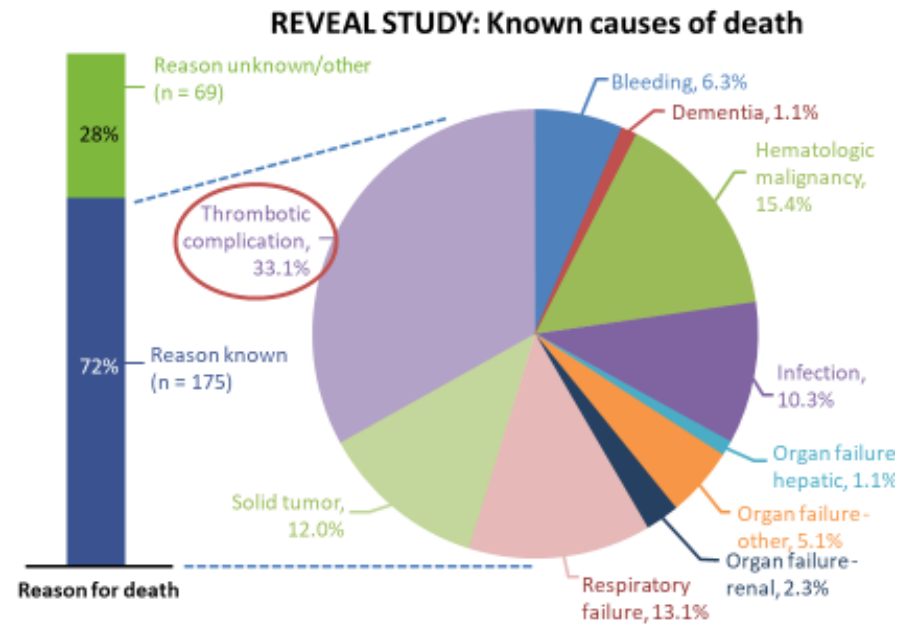


Commonest cause of death in MPN especially PV and ET

Causes of Death in PV

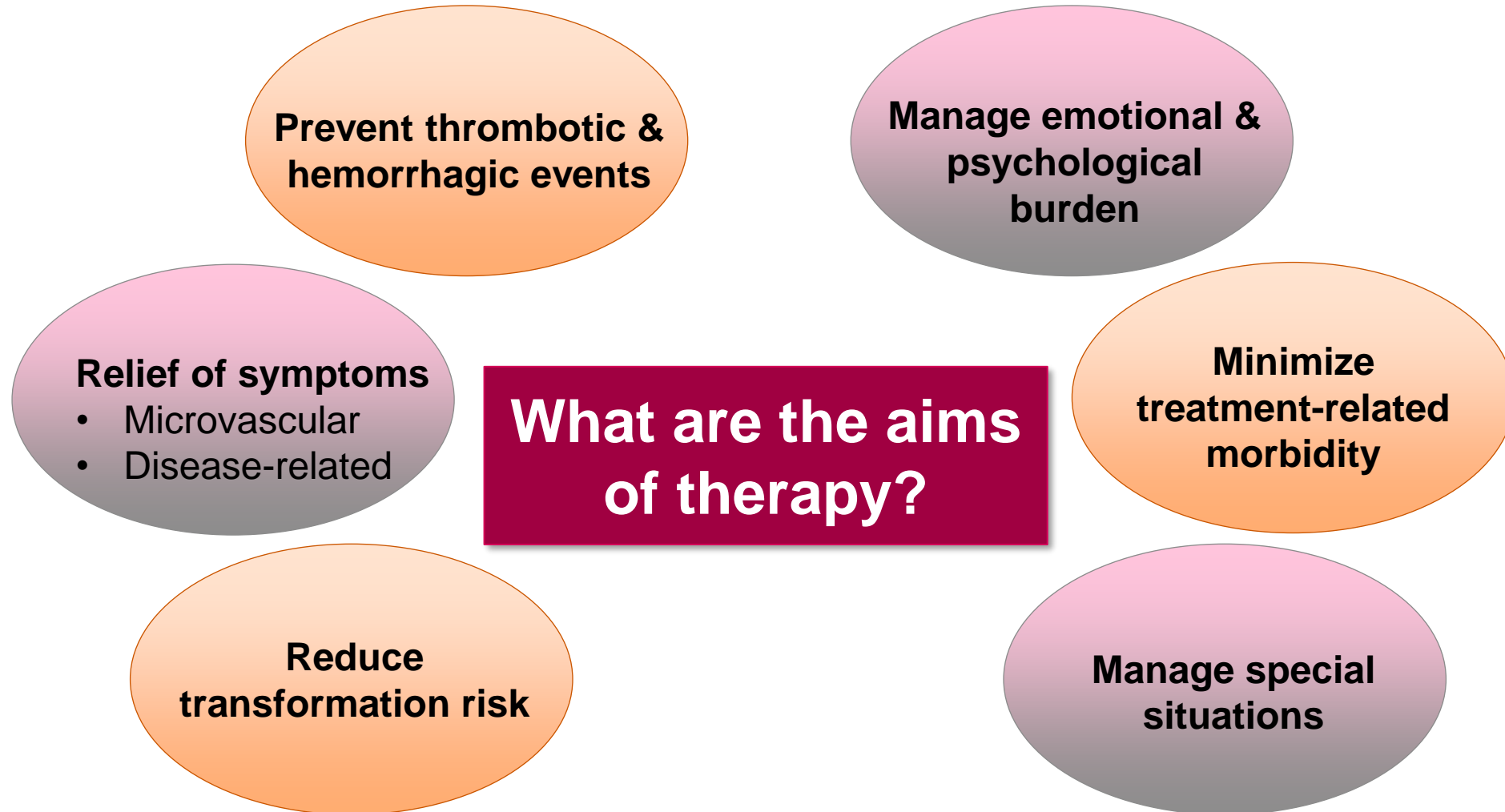


Hultcrantz M et al, JCO 2015;33:2288.



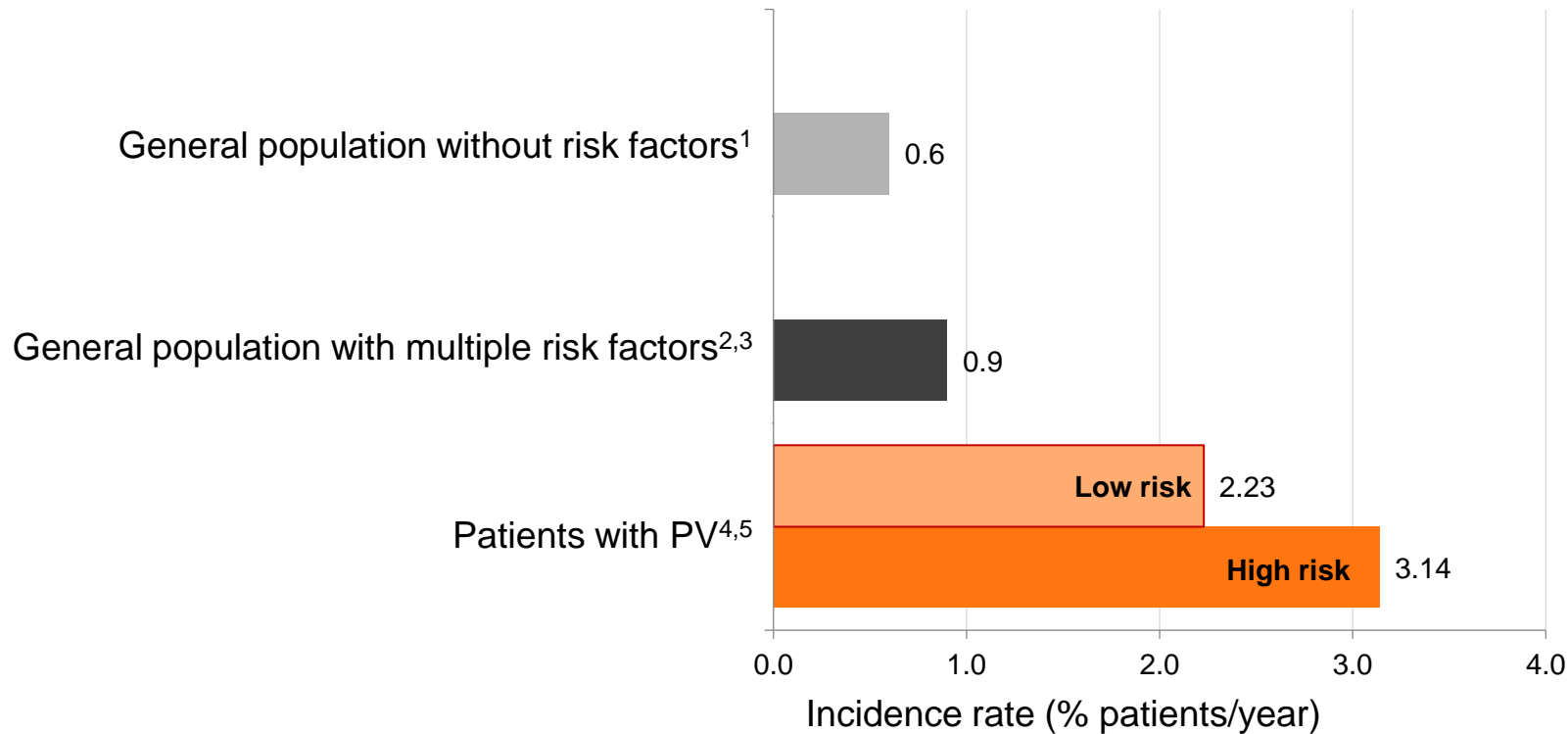
Stein BL, et al. presented at ASH 2020; #484

Aims of therapy



How low risk is low-risk polycythemia vera?

Annual rate of thrombosis in contemporary patients with PV and in general population



Low risk is not NO RISK

1. Antithrombotic Trialists' (ATT) Collaboration. Lancet. 2009;373:1849-60. 2. Yusuf S, et al. N Engl J Med. 2016;374:2021-31.
3. Risk and Prevention Study Collaborative Group. N Engl J Med. 2013;368:1800-8. 4. Barbui T, et al. Blood. 2014;124:3021-3.
5. Tefferi A, et al. Leukemia. 2013;27:1874-81

Generic health advice also applies to MPN patients:

look after
yourself.



there is only one
of you.