

Incidence rates

- Skin cancer is the most common cancer in the United States.¹⁻²
- Current estimates are that one in five Americans will develop skin cancer in their lifetime.³⁻⁴
- It is estimated that approximately 9,500 people in the U.S. are diagnosed with skin cancer every day.⁵⁻⁷
- Research estimates that nonmelanoma skin cancer, including basal cell carcinoma and squamous cell carcinoma, affects more than 3 million Americans a year.^{5, 8}
- Research indicates that the overall incidence of BCC increased by 145 percent between 1976-1984 and 2000-2010, and the overall incidence of SCC increased 263 percent over that same period.⁹
 - Women had the greatest increase in incidence rates for both types of NMSC.⁹
 - NMSC incidence rates are increasing in people younger than 40.⁹
- More than 1 million Americans are living with melanoma.¹⁰
- It is estimated that 192,310 new cases of melanoma, 95,830 noninvasive (in situ) and 96,480 invasive, will be diagnosed in the U.S. in 2019.⁶⁻⁷
 - Invasive melanoma is projected to be the fifth most common cancer for both men (57,220 cases) and women (39,260 cases) in 2019.⁶⁻⁷
- Melanoma rates in the United States doubled from 1982 to 2011 and have continued to increase.^{1, 7}
- Caucasians and men older than 50 have a higher risk of developing melanoma than the general population.^{6-7, 11}
 - The incidence in men ages 80 and older is three times higher than women of the same age.⁶
 - The annual incidence rate of melanoma in non-Hispanic Caucasians is 26 per 100,000, compared to 4 per 100,000 in Hispanics and 1 per 100,000 in African Americans.⁶
- Skin cancer can affect anyone, regardless of skin color.
 - Skin cancer in patients with skin of color is often diagnosed in its later stages, when it's more difficult to treat.¹²
 - Research has shown that patients with skin of color are less likely than Caucasian patients to survive melanoma.¹³
 - Twenty-four percent of melanoma cases in African American patients are diagnosed at the regional stage, while 16 percent are diagnosed at the distant stage.⁷
 - People with skin of color are prone to skin cancer in areas that aren't commonly exposed to the sun, like the palms of the hands, the soles of the feet, the groin and the inside of the mouth. They also may develop melanoma under their nails.¹²
- Before age 50, melanoma incidence rates are higher in women than in men; however, rates in men are twice as high by age 65 and three times as high by age 80.⁶
 - It is estimated that melanoma will affect 1 in 27 men and 1 in 40 women in their lifetime.⁷
- Melanoma is the second most common form of cancer in females age 15-29.¹⁴
 - Melanoma incidence is increasing faster in females age 15-29 than in males of the same age group.¹⁵
- Research indicates that the incidence of melanoma in women 18-39 increased 800 percent from 1970 to 2009.¹⁶

- Melanoma in Caucasian women younger than 44 has increased 6.1 percent annually, which may reflect recent trends in indoor tanning.¹¹

Survival rates

- Basal cell and squamous cell carcinomas, the two most common forms of skin cancer, are highly curable if detected early and treated properly.^{6, 17}
- The five-year survival rate for people whose melanoma is detected and treated before it spreads to the lymph nodes is 99 percent.⁶⁻⁷
- Five-year survival rates for regional and distant stage melanomas are 64 percent and 23 percent, respectively.^{6-7, 15}

Mortality rates

- The vast majority of skin cancer deaths are from melanoma.⁶
- Nearly 20 Americans die from melanoma every day. In 2019, it is estimated that 7,230 deaths will be attributed to melanoma — 4,740 men and 2,490 women.⁶⁻⁷
 - Research indicates that men diagnosed with melanoma between the ages of 15 and 39 were 55 percent more likely to die from melanoma than females diagnosed with melanoma in the same age group.¹⁸
- People with SCC have a higher risk of death from any cause than the general population.¹⁹
- An estimated 4,420 deaths from skin cancers other than melanoma and NMSC are expected to occur in the United States in 2019.⁶⁻⁷

Risk factors

- Exposure to natural and artificial ultraviolet light is a risk factor for all types of skin cancer.⁶
- The majority of melanoma cases are attributable to UV exposure.²⁰⁻²²
- Increasing intermittent sun exposure in childhood and during one's lifetime is associated with an increased risk of squamous cell carcinoma, basal cell carcinoma and melanoma.²³
 - Research suggests that regular sunscreen use reduces melanoma risk.²⁴⁻²⁵
 - Higher melanoma rates among men may be due in part to lower rates of sun protection.^{1, 26}
- Even one blistering sunburn during childhood or adolescence can nearly double a person's chance of developing melanoma.²⁷
 - Experiencing five or more blistering sunburns between ages 15 and 20 increases one's melanoma risk by 80 percent and nonmelanoma skin cancer risk by 68 percent.²⁷
- Exposure to tanning beds increases the risk of melanoma, especially in women 45 and younger.²⁹⁻³⁰
 - Researchers estimate that indoor tanning may cause upwards of 400,000 cases of skin cancer in the U.S. each year.³¹⁻³²
- Risk factors for all types of skin cancer include skin that burns easily; blond or red hair; a history of excessive sun exposure, including sunburns; tanning bed use; a weakened immune system; and a history of skin cancer.⁶
- People with more than 50 moles, atypical moles or large moles are at an increased risk of developing melanoma, as are sun-sensitive individuals (e.g., those who

sunburn easily, or have natural blond or red hair) and those with a personal or family history of melanoma.^{6, 33}

- Melanoma survivors have an approximately nine-fold increased risk of developing another melanoma compared to the general population.³⁴
- Men and women with a history of nonmelanoma skin cancer are at a higher risk of developing melanoma than people without a nonmelanoma skin cancer history.³⁵
 - Women with a history of nonmelanoma skin cancer are at a higher risk of developing leukemia, breast, kidney and lung cancers, and men with a history of nonmelanoma skin cancer are at a higher risk of developing prostate cancer.³⁵
- Caucasian individuals who have had more than one melanoma have an increased risk of developing both subsequent melanomas and other cancers, including those of the breast, prostate and thyroid.³⁶

Prevention and detection

- Because exposure to UV light is the most preventable risk factor for all skin cancers, the American Academy of Dermatology encourages everyone to stay out of indoor tanning beds and protect their skin from the sun's harmful UV rays by seeking shade, wearing protective clothing and using a broad-spectrum, water-resistant sunscreen with an SPF of 30 or higher.
 - Because severe sunburns during childhood may increase one's risk of melanoma, children should be especially protected from the sun.⁶
- Skin cancer warning signs include changes in size, shape or color of a mole or other skin lesion, the appearance of a new growth on the skin, or a sore that doesn't heal. If you notice any spots on your skin that are different from the others, or anything changing, itching or bleeding, the American Academy of Dermatology recommends that you make an appointment with a board-certified dermatologist.
- The American Academy of Dermatology encourages everyone to perform regular skin self-exams to check for signs of skin cancer.
 - About half of melanomas are self-detected.³⁷⁻⁴¹
- A dermatologist can make individual recommendations as to how often a person needs a skin exam from a doctor based on individual risk factors, including skin type, history of sun exposure and family history.
- Individuals with a history of melanoma should have a full-body exam by a board-certified dermatologist at least annually and perform regular self-exams to check for new and changing moles.⁴²

Cost

- About 4.9 million U.S. adults were treated for skin cancer each year from 2007 to 2011, for an average annual treatment cost of \$8.1 billion.²
 - This represents an increase over the period from 2002 to 2006, when about 3.4 million adults were treated for skin cancer each year, for an annual average treatment cost of \$3.6 billion.²
- The annual cost of treating nonmelanoma skin cancer in the U.S. is estimated at \$4.8 billion, while the average annual cost of treating melanoma is estimated at \$3.3 billion.²
- Researchers estimate that there were nearly 34,000 U.S. emergency department visits related to sunburn in 2013, for an estimated total cost of \$11.2 million.⁴³

Learn more about skin cancer:

[Basal cell carcinoma](#) [Melanoma](#) [Squamous cell carcinoma](#) [Skin Cancer Resource Center](#)

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