

Factors Increase the Risk for Malignant Melanoma

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Introduction

Skin melanoma is becoming more common, making early detection crucial because it has a very good prognosis for treatment when caught early. In order to effectively popularise epidemiological knowledge and spread pro-health habits, the study emphasizes the importance of using prevention as a strategy. The paper calls attention to risk factors that increase the likelihood of developing the condition [1].

The most frequent malignant tumors in people are skin malignancies. Because skin cancers are occurring more frequently, it is crucial to diagnose them early. *Melanoma malignum*, in particular, has a high prognosis for treatment when discovered at an early stage. UV light has been linked to the development of melanoma in numerous scientific works and investigations. Another major danger is sunburns, particularly those that occur in early life. UV exposure causes the normal melanocytic nevi to develop in the majority of people, especially those with pale skin and also causes dysplastic nevi to develop in those who are predisposed to it. In addition to the hereditary component, a mutation in the *CDKN2A* gene, which codes for the proteins *p16* and *p14ARF*, is present in individuals with a family history of melanoma. The above-mentioned proteins may express themselves too much or too little as a result of a *CDKN2A* gene mutation and this could result in melanoma malignum development [2].

Melanoma malignum is one of the most dangerous malignancies of the skin, mucous membranes of the mouth, genitalia, and eye. It originates from pigment cells and takes the shape of unusual, pigmented birthmarks, but it most frequently appears in the skin that is unaltered from birth. Solar radiation and sunburns sustained as children and adolescents are regarded as the main risk factors. Age, mechanical and chemical sensitivity, dysplastic nevi syndrome, xeroderma pigment sum, prior skin cancer, artificial radiation used in self-tanning bed "solariums," and skin sensitivity. The etiopathogenesis of malignant melanoma depends significantly on the skin's prototype.

Dermatology patients still need to be thoroughly informed about the actions and skin lesions that can influence the emergence of MM and atypical birthmarks. Many dermatology patients are unaware of the skin lesions that should concern them and the circumstances that make them more likely to occur. They are also ignorant about the elements that raise the risk of melanoma development [3].

Therefore, there is a need for greater evaluation of patients' understanding in this respect as well as their general education regarding the risk factors for the occurrence of birthmarks and melanoma that are related to lifestyle choices as well as those brought on by genetic loads. It is important to underline the importance of melanocytic nevi being thoroughly evaluated medically and to encourage preventative behavior. Skin cancer can also develop as a result of immune-suppressive medication and post-transplant conditions [4].

They are not the only determinants of the disease, even though the aforementioned components are among those that have the biggest effects on how melanoma manifests. Even in persons who have not been exposed to the disease, skin melanoma can develop. Numerous mechanisms responsible for the growth and spread of the cancerous cells in melanoma have been uncovered over the course of many years of research into the disease's evolution. Many malignancies have a genetic component, which causes mutations in the DNA. A number of genes whose mutations in melanoma patients aid in the disease's onset have been found [5].

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