

# Patient story: Skin cancer

## Misha Lynn

KILLING  cancer

## Minutes from surgery, Misha discovers PDT

**This is Misha Lynn, a 43-year old Special Needs teacher from Dunoon in Scotland. She looks happy enough, albeit slightly apprehensive, waiting for the injection of the Foscan drug that would make her light sensitive and ready for the light treatment that would destroy her basal cell carcinoma (BCC).**

Her local dermatology specialist had told her that one in three people in Scotland are now expected to develop a skin cancer in their lifetime.

Two weeks before, Misha had been in the waiting room at Glasgow Royal Infirmary, ready to have the BCC surgically removed. She had been warned that despite the obvious need for plastic surgery afterwards, the final result could leave her with "significant" scarring.



After all, a hole the size of a 5p piece was to be taken from her nose. As she waited, she read an article in a magazine about PDT and the KILLING Cancer charity.

The article explained how the charity could put her in contact with a PDT specialist. The Photodynamic Therapy treatment would not involve surgery - so she would keep her nose - and that it was available to her on the NHS. She simply needed a letter to refer her.

Her specialists in Scotland recommended surgery as her best treatment option, while Misha had been asking continuously if a non-surgical route would be possible. Working in a school, she was worried about possible unkind remarks about her appearance following the surgery.

Misha needed assurances about the treatment, and she was encouraged to speak to other patients about the therapy. She spoke to Beverley Moy who had been told by no less than seven medical experts that PDT wouldn't work for her. But it did. And the PDT for Beverley meant that she avoided the surgical removal of a tear duct.

Misha made her decision. She wanted PDT, and flew to London for her consultation at the National Medical Laser Centre at London's University College Hospital. The fact that PDT for skin cancer is approved by the Government's drugs watchdog, NICE, helped to confirm her choice.

The charity arranged for Misha to be seen promptly by Colin Hopper, senior Maxillo Facial surgeon. He has made PDT his speciality, treating more than 1,000 head, neck and skin cancer patients over the past 16 years.

On the Monday Misha had the drug injection, and at 12.45 pm on the Wednesday she received the 200-seconds of light exposure to activate the drug that would kill the BCC. It does so by starving the cancer cells of oxygen.

Colin Hopper completed the process and the light treatment without any discomfort or burning to Misha, who flew back to Scotland the same afternoon.

Misha was back at school within weeks with her nose intact and completely healed. She is naturally delighted, but also fearful for the thousands of other patients who are living with the consequences of the most destructive surgery.

It should be pointed out that this PDT procedure is used for deeper cancers. A PDT cream, such as ALA or Metvix, is usually the treatment for surface skin cancers and pre-cancers.