

**Summary and Conclusion**

Non-melanoma skin cancer is an important disease. It is the most common cancer world-wide and its incidence all over the world is rapidly increasing in alarming manner. It has a high cure rate, but neglect can allow the cancer to enlarge, causing possible disfigurement and disability.

Non-melanoma skin cancer can be prevented through public awareness of their possible risk for NMSC development and how to avoid this.

World-wide efforts have been made to determine the possible etiological factors of NMSC and to find clues for its development, implying this information in the prevention of the disease.

The present study aimed at determining the incidence of NMSC in a one year period in patients attending the Dermatology Outpatient Clinic in Benha University Hospital and to clarify some of the epidemiological features of these tumors. The study is concerned with environmental influences, predisposing host conditions, clinical features and histopathological patterns of NMSC in these patients.

Thirty seven patients were collected in one year period from January 2002 to January 2003 and subjected to full history taking, clinical examination and histopathological examination of lesions.

The incidence of NMSC estimated was 0.19% and although this incidence is not an accurate incidence, yet it is of a considerable importance.

Most of patients were above the age of forty. Males and females were nearly equally affected. Patient's occupations varied, however most of them work in cultivating lands exposing themselves to the hazards of
the sun and to inorganic arsenic compounds used in pesticides and insecticides. In the present study, most of patients had a naturally brown skin, dark brown to black hair and brown eyes. This suggests that there is increased risk among persons with relatively pigmented skin than what was expected.

Basal cell carcinoma was more common than SCC with a ratio 1.46: 1. All BCC lesions developed on a normal skin, while 50% of SCC lesions originated from a precancerous lesion. Seventy percent of lesions were on the face.

The most common BCC type found was the nodulo-ulcerative type. It showed a positive correlation with female sex of patients, finding the lesion on mid upper face and being of the solid histopathological variety.

Although, SCC has multiple appearances and stages, only one lesion, however, was metastasizing to regional lymph nodes. They were mostly of the well-differentiated histopathological type and of grade I or II.

These findings provide insights to the epidemiological features of NMSC in our country. A cooperative work of primary health care clinics, governmental hospitals, university hospitals and private clinics allover Egypt to find out the real incidence of NMSC in Egypt is needed. Also public awareness of the dangers of solar radiation and the necessary preventive measures are required.