

our Contributors



Skin Care

Jeffrey S. Dover, M.D., FRCPC

Dr. Jeffrey S. Dover graduated as the silver medalist, magna cum laude from the University of Ottawa. He received dermatology training at the University of Toronto followed by research fellowships at St. John's Hospital for Diseases of the Skin at the University of London in London, England, and a two-year photomedicine fellowship at Harvard Medical School, Dover is a former associate professor of dermatology at Harvard Medical School, was chief of dermatology at the New England Deaconess Hospital for more than 10 years and also associate chairman of dermatology at Beth Israel Deaconess Medical Center. He is an associate clinical professor of dermatology at Yale University School of Medicine and adjunct professor of medicine (dermatology) at Dartmouth Medical School. Dr. Dover is a director of SkinCare Physicians in Chestnut Hill, Mass. He is the author of more than 300 scientific publications and he has co-authored and edited 37 textbooks. He is founding editor of Journal Watch for Dermatology. Dover has received many honors including repeated nominations for "teacher of the year" at Harvard Medical School. He received the prestigious Leon Goldman Award as well as the Ellet Drake Award of the American Society for Laser Medicine and Surgery and was honored for his work in laser surgery by the Sturge Weber Foundation at its 20th Annual Gala. He is married to Dr. Tania Phillips and has two daughters, Sophie and Isabel.



Skin Care

Dr. Jeremy B. Green

Dr. Jeremy B. Green graduated cum laude with a bachelor's degree from Princeton University. He completed his medical education at the Northwestern University Feinberg School of Medicine and the University of Miami Miller School of Medicine where he graduated with Alpha Omega Alpha (AOA) honors. He trained at the University of Miami Department of Dermatology & Cutaneous Surgery where he served as its chief resident. Green completed advanced fellowship training in laser and cosmetic surgery at SkinCare Physicians in Chestnut Hill, Mass.



The Fashion Doctors

Dr. Ruby Natale Andrew (left)

Dr. Ruby Natale Andrew has a master's in biomedical science and a dual doctorate degree in clinical psychology. Andrew is a licensed clinical psychologist. She has been a practicing clinician for 10 years and has focused her work on helping people feel comfortable with who they are, promoting self-esteem and reducing obesity. Given her background in psychology, she is well versed in helping people find their inner beauty, as well as ways to make them shine on the outside. By knowing your true self, you are better able to dress in ways that match your personality. Andrew will assist clients in ways to make fashion a part of who they are.

Dr. Marianna Toroyan (right)

Dr. Marianna Toroyan has been involved in many arenas of the fashion industry for more than 10 years. While she was earning her doctorate degree, she developed a curriculum to improve self-esteem and realized that fashion was a factor in increasing self-image. She continued her passion for style by earning a degree from Parsons New School for Design. Toroyan is excited to be utilizing a combination of her doctoral and fashion degrees to style and produce shows for corporations, as well as work with clients in improving and shaping their self-image.



Photography

Ian Justice

A native of picturesque Melton Mowbury in England, Ian Justice has wrought his sense of style and impeccable work ethics into a photography career that approaches the two-decade mark. Justice not only makes beautiful images for print and web-based advertising, but realizes worlds in which products tell a story. His skill with the camera and profound knowledge of the equipment and its possibilities make each project sparkle with creative freedom and originality. A unique education at The College of Wooster in Ohio, with a major in studio arts/photography and a minor in psychology, have given Justice work a distinguished style that carries through all his projects. Justice's studio location in the Metro Boston area is the launching base to assignments that have taken him to places like Iceland, Italy, France, Brazil, Hawaii and all over the United States. His experience in the world of fashion and photography, combined with a driven and easygoing personality, makes Justice the ideal creative companion for any project.

Hair and Make Up (cover)

Kathleen Schiffmann

Kathleen Schiffmann a Boston-based hair and make up artist represented by Team Artist (www. teamartistrep.com).



Fashion Contributor

Emily Banis Stoehrer

A Massachusetts native, Emily Banis Stoehrer is an assistant professor and the program director for fashion design and merchandising at Fisher College in Boston's Back Bay. A trained fashion and textile historian, she has a master's degree from the Fashion Institute of Technology and previously worked at the Museum of Fine Arts, Boston where she compiled fashion, textile and jewelry research for related exhibitions and publications. She is currently finishing her first book, "Fashion Design, Referenced," which will be available from Rockport Publishers in February.



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1. There are three major types of skin cancer: basal cell carcinoma, squamous cell carcinoma and melanoma. What are their causes and who is at risk?

Each year in the United States there is more skin cancer diagnosed than breast, prostate, lung and colon cancers combined. Basal cell carcinoma (BCC) and squamous cell carcinoma (SCC) collectively are referred to as non-melanoma skin cancers (NMSC) and represent the most common cancers, affecting more than a million Americans a year.

Risk factors for NMSC include increasing age, cumulative sun exposure and fair skin. Others at risk include smokers, people who use tanning beds and those with reduced immune systems. These cancers are lethal in less than 1 percent of the cases, but they spread locally and cause unnecessary suffering. More than 2,000 Americans die annually from NMSC, mostly due to SCC that has spread to surrounding lymph nodes.

Melanoma represents uncontrolled growth of pigment cells in the skin. The incidence of melanoma is rising. It most frequently occurs in light eyed, fair skinned, light haired people, but can occur in darker skinned people as well. It is seen most commonly with intermittent bursts of sun exposure in childhood (think blistering sunburns).

Others at increased risk include those with a family history of melanoma and individuals with multiple moles and unusual moles. If diagnosed early, more than 99 percent of melanomas can be cured. If left untreated, it can spread, and once this happens treatment is difficult and outlook is poor.

Unlike NMSC which typically affects older individuals, melanoma is the most common cancer in young adults aged 25-29, and is the second most common cancer in women age 39 and under after breast cancer.

2. How can we reduce our risks for skin cancer? Does genetics play a role or is it all from the sun? Does diet play a role?

Sun protection and avoidance are crucial to reduce the risk of skin cancer. We tell our patients to enjoy the nice weather, but be smart. Avoid sun exposure during its peak intensity between 10 a.m. - 3 p.m. While SPF 30 sunscreen is recommended, wearing wide brim hats, lightweight cotton long-sleeved shirts and seeking shade if possible is far more important.

Genetics does play a role in skin cancer development, especially regarding melanoma. If you have had a first-degree relative with skin cancer it is a good idea to visit your dermatologist for a skin check. Although sun and genes clearly play a role in skin cancer, to date there is no scientific evidence of a link between skin cancer and diet in humans.

3. Skin self-examinations are recommended. What are we looking for to determine if it's cancer?

NMSC usually presents as a pink, smooth, rough or scaly spot that may bleed and can be tender. When examining your own moles, think ABCDE.

- Asymmetry: If you were to draw a line down the middle of the mole and the two halves are not mirror images of each other, it's asymmetrical.
 - Border irregularity: The edge of the mole is notched or blurred.
 - Color variegation: There are two or more colors in the mole.
 - Diameter: Greater than 6mm or larger than a pencil eraser.
- Evolving: Any change in the mole, including development of symptoms like itching or bleeding, could be significant.

It is important to note that the ABCDE criteria are helpful as guidelines, but does not definitively mean it's a cancer. If any of these spots on your body meet the above criteria, visit your dermatologist. A diagnosis of skin cancer requires a biopsy.

4. If diagnosed with skin cancer, what are the treatment options and outlook?

Treatment depends on the skin cancer type and location. For NMSC, we usually recommend either an anti-cancer cream or surgical removal. In melanoma early detection is key. If an unusual mole is found, surgical removal leads to cure with no further treatment in most cases. Treatment of melanoma is dictated by the thickness of the cancer. If the melanoma is thick or has spread survival is much lower and chemotherapy is often required.







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