

Men's Health

Will I Look Like a Monster?

One Men's Health editor discovers that skin cancer on your nose can be face-altering

By [Adam Campbell](#), April 27, 2011

A LITTLE OVER a year ago, I noticed a pimple on my nose. Which would have been perfectly normal, except that I was 39 years old at the time. And this "pimple" never went away.

Nine months later, finally convinced that my tiny zit wasn't going to morph into a poppable whitehead, I made an appointment with a local dermatologist. My wait time: 3 months. This seemed like forever to me; I was informed it was alarmingly average for a new patient.

Of course, I should have known to act faster, since I'm the fitness director at the world's largest men's health magazine. But random skin growths, more than any other medical symptom, challenge us to balance prudence with paranoia. On the one hand, we don't want to overreact to every little mark and mole we notice.

On the other hand...

The doctor said I had skin cancer—specifically, basal-cell carcinoma. This wasn't good, obviously. But I should point out that everyone with basal- or squamous-cell carcinoma is told by, well, everyone: "At least it isn't melanoma!" And they're right. So I tried to adopt a positive mindset.

"There's just one problem," my dermatologist warned me. "The location." He explained that on other parts of my body—my arm or back, for example—treatment was as simple as "scooping" the cancer out, making sure to remove a larger piece of the flesh than needed (just to be on the safe side). Then the wound would be cauterized, leaving behind a survivor scar I could proudly flash when someone asked about my LiveStrong band.

But my case was more complicated. "Given that it's on your nose, you're going to need reconstruction," the doctor informed me.

What I heard: "You're going to look like a monster."

That's why I made an appointment with [Christopher Miller, M.D.](#), the director of dermatologic surgery at the University of Pennsylvania School of Medicine. Dr. Miller is one of the country's top Mohs surgeons. In [Mohs surgery](#), the physician extracts the least amount of tissue possible while removing all the cancer. Then, in my case, Dr. Miller would reposition skin from an adjacent area to cover the wound, and follow up with precision stitching and laser therapy to leave barely a trace of the operation.

Yet let me tell you: All of this is hardly comforting when it's your nose, and you've had the chance to Google "before after photos Mohs surgery."

DR. MILLER SAT in front of me explaining what I was about to undergo. "I'm going to cut a hole in your nose that's about the size of a dime," he said. "Then I'll cut a flap of skin from higher up on your nose, and move it down. After that, I'll cut another flap..."

Suddenly, Dr. Miller's gaze shifted to his right: "How long have you had that spot on your eyelid?" His question was directed at Amy Rushlow, my 26-year-old colleague who was covering the surgery for our website. She was sitting a few feet away from Dr. Miller.

"About 2 years," Amy said.

"Anyone ever look at it?"

"My ophthalmologist said it was just a skin tag."

"Ever bleed?"

"Maybe a couple of times, I guess."

"I think it's basal cell. We need to have that biopsied."

I'm not sure who was more surprised: me or Amy.

I had to ask Dr. Miller, "How can you be so sure from across the room?"

"I did more than 1,300 Mohs surgeries last year. All I do is operate on people with skin cancer," said Dr. Miller. "It's helped me become good at detecting lesions, even when they're subtle."

A few days later, Amy's biopsy results proved him right.

Turns out, Amy and I aren't the only *Men's Health* staffers to be faced with Mohs surgery. Brian Boyé, our 44-year-old fashion director, underwent the surgery a week before I did. And senior editor Ben Court, 38, had the procedure 7 years ago (as did his wife). All of which serves as a reminder: If you want protection from skin cancer, don't count on youth—reach for a bottle of sunscreen.

A WEEK AFTER my surgery, a nurse removed the 40 stitches from my nose. Then Dr. Miller sat down next to me and started swabbing the area with a cotton swab soaked in alcohol.

"I want to clean it before you have a look," he said. "It'll give you more confidence about how it's going to look once it's fully healed."

"What about the spot above my lip?" I asked, referring to a patch of persistently dry skin that Dr. Miller had decided to biopsy the day of my surgery.

He checked the pathology results. "It's squamous," he said, as he handed me a mirror. "We can handle it the same way." This was frustrating: Eight years ago, another dermatologist had told me this spot was "nothing."

I inhaled deeply as I lifted the mirror and looked at my reflection. I was pleasantly surprised: I wasn't a monster. Confidence level: rising. (Watch the video of my surgery on the previous page. It contains graphic footage from my operation, but you also see how fast and impressive my recovery has been.)

YESTERDAY, ERIC ADAMS, another editor here, pointed out a skin tag barely poking out from underneath his sideburn. He's 41. "What do you think? Probably nothing, right?"

I could see a tiny scab on it. It had been bleeding.

"I think it's basal cell. You should have that biopsied," I said, channeling Dr. Miller. Of course, I don't really know if it's skin cancer. Then again, Eric doesn't know that it isn't.

Editor's note: Have you been diagnosed with skin cancer? To discover how to find the best surgeon possible, read Campbell's follow-up story, "[When Skin Cancer Attacks Your Face](#)."

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