

# Over 112,000 Americans Estimated to Be Diagnosed with Invasive Melanoma in 2026

Melanoma Research Alliance discusses prevention, detection and improvements in invasive melanoma detection and treatment.

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By Joan Levy, Chief Science Officer at Melanoma Research Alliance

Each year, the American Cancer Society (ACS) releases updated estimates about trends in cancer in their report [Cancer Facts and Figures](#). This report highlights the estimated incidence (number of new cases), prevalence (number of people alive today with a history of cancer), and survival statistics in the United States. Importantly, the report tracks cancer trends over time – allowing us to monitor the impact of prevention, detection, and improvements in treatment approaches.

The latest projections for melanoma in 2026 reveal a continuing challenge in the fight against the deadliest form of skin cancer. According to the report, approximately 112,000 new cases of invasive melanoma are expected to be diagnosed in the United States this year - an increase over last year's 104,960 projected cases. Of those diagnoses, 65,400 are expected to occur in men and 46,600 in women. In 2026, invasive melanoma is projected to be the fourth most commonly diagnosed cancer in men and the fifth most common in women. An estimated 8,510 Americans (5,500 men and 3,010 women) are expected to die from the disease.

This data is incredibly useful for understanding how rates of melanoma shift over time, how research and new treatment options are improving patient survival and outcomes, and for highlighting the work that still needs to be done.

## Trends in Incidence and Survival Rates

Incidence of invasive melanoma increased steeply in the US since the 1970's until recently. While overall melanoma incidence rates have stabilized among women under 50 and have declined by

about 1% per year in men under 50, rates in adults 50 and older continue to increase in women by almost 2.8% per year, and 1.4% in men. Additionally, the broader landscape of cancer trends is shifting. Recent findings indicate that overall cancer incidence rates in women under 50 have increased from 51% higher than men in 2002 to 82% higher in 2021, and melanoma is one of the most common cancers in young adults between the ages of 20-39 (especially in young women).

Experts estimate that roughly 90% of all melanoma diagnoses are attributed to ultraviolet (UV) exposure from sunlight or indoor tanning and thus are potentially preventable. This highlights the importance of continued research, education, and prevention efforts, especially among younger populations. Other risk factors for melanoma include a strong family history of the disease and the presence of atypical, large, or many (more than 50) moles.

At the same time, advances in research have significantly expanded treatment options for patients. Since MRA's founding in 2007, there have been 17 new drug approvals for the treatment of invasive melanoma including different types of immunotherapies and targeted therapies. These new treatments have led to remarkable improvements in outcomes for patients with melanoma. The five-year survival rate for patients with advanced metastatic melanoma (spread to other parts of the body) increased from 15% in the mid-2000s to 35% (data between 2015-2021). When diagnosed at a localized stage (melanoma confined to the site that it was diagnosed), five-year survival rates are as high as >99%. In addition, mortality (rate of risk from dying from melanoma) over the past decade has declined by approximately 2% per year in women and 3% per year in men, reflecting the potential impact of these new treatments.

## Addressing Disparities in Melanoma Diagnosis and Outcomes

Despite these advancements, racial disparities persist in melanoma outcomes. Overall, the [lifetime risk](#) of getting melanoma is about 3% for White people, 0.5% for Hispanic people, and 0.1% for Black people. Yet, from 2015-2021, the five-year survival rate was 95% among White individuals but only 70% among Black individuals.

This disparity may be due to the fact that while melanoma occurs less frequently among [People of Color](#), when it does occur, it is diagnosed at a more advanced stage of disease. When found and treated early, most melanomas are curable. However, as melanoma progresses, it becomes far more challenging to treat. Researchers believe this happens for two reasons. First, because People of Color perceive their own risk to be low, they may delay getting medical care. Second, doctors are also more likely to overlook melanoma among People of Color or may not examine non-sun exposed areas for signs of rare melanoma subtypes (such as acral melanoma). This is because some doctors may also assume their patients of color are at a reduced risk of melanoma and/or are unfamiliar with acral melanoma.

This disparity underscores the critical need for early detection, equitable access to high-quality treatment for people of all races, and improved awareness among People of Color and clinicians diagnosing the disease.

## The Path Forward and MRA's Research Priority Areas

With melanoma remaining as the fourth and fifth most diagnosed cancer in the U.S. among men and women respectively, continued efforts in funding research, prevention, and education are crucial to better outcomes for patients. Promoting early detection and sun safety remain essential to these efforts.

Additionally, more research into the rare melanoma subtypes is urgently needed, including the development of new treatments and studies on incidence, survival, and risk factors. These subtypes include:

- [Acral melanoma](#) - forms on the palms of the hands, soles of the feet, and nail beds
- [Ocular \(or uveal\) melanoma](#) - forms in the eye
- [Mucosal melanoma](#) - arises in areas with mucosal tissues, including the nose/nasal cavity, inside the mouth, and genitourinary tract.

To better understand the rare melanoma subtypes, MRA launched an initiative called the [RARE Registry](#) an interactive registry for patients facing mucosal and acral melanoma as well as cutaneous melanoma, the most common melanoma subtype. RARE provides a free web and mobile-friendly tool to share information and experiences, disease history, advance research and awareness of patient journeys, and get potential matches to clinical trials.

Most recently, MRA opened the [MRA Melanoma Biorepository](#) - a new initiative for patients to donate melanoma and normal tissues from past or future procedures. These donations will fuel

discovery and help qualified researchers better understand the different subtypes of melanoma (with a particular emphasis on acral and mucosal melanoma), identify new treatment targets, and improve outcomes for patients.

MRA's goals are reflected in its current [scientific priority areas](#) of increased focus on improving early detection and diagnosis across all races and ethnicities, understanding treatment resistance, deciphering brain metastasis and leptomeningeal disease, and advancing research into rare melanoma subtypes.

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