Melanoma Risk in the Military Community [VIDEO]

Watch MRA CEO Dr. Marc Hurlbert and Army Veteran Andrew Smith discuss the risk of this skin cancer among the military and veterans.

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Veterans Day is observed each November 11. The Melanoma Research Alliance (MRA) wishes to recognize the brave individuals who have served and sacrificed for our country. As the largest private nonprofit funder of melanoma research worldwide, we are keenly aware of the important intersection between military service and melanoma.

Military service involves a unique set of challenges and occupational hazards ranging from immediate safety to long-term wellbeing, and one often overlooked is the increased risk of melanoma and other skin cancers. When it comes to melanoma, recent research has found that veterans are not only at higher risk for melanoma but are also more likely to have advanced-stage disease when it's detected. Compared with the general population, veterans face a nearly 18% higher risk of being initially diagnosed with Stage 3 and a 13% higher risk of being initially diagnosed with Stage 4 melanoma.

This is important because when melanoma is found and treated early, it is often highly curable. However, as melanoma progresses it becomes far harder to treat.

Risk Factors for the Military Community

Of the most common cancers diagnosed among veterans, melanoma is fourth.[1] Melanoma diagnoses are also increasing among active-duty service members with the greatest incidence rates seen in the Air Force, Navy and the Marines.[2] Sun exposure and lack of protection from UV rays, potential exposure to carcinogens and other chemicals, and overall demographics of the veteran population may also play a role in this increased risk.

- Sun Exposure and Temperature: Experiencing prolonged sun exposure is common for many military personnel, especially those serving in outdoor occupations or deployed to sunny or hot regions. This can increase their risk of developing melanoma, as roughly nine out of ten skin

cancers are caused by UV exposure. The temperature where service members serve also plays a role. Not only can heat promote carcinogenesis directly in the skin, but when it is warmer, people tend to wear less clothing and spend more time outdoors.

- Lack of Sun Protective Measures: Despite harsh weather locations with high UV-exposure, sun-safety behaviors are often lacking among service members. In certain settings, adherence to sun protection measures — such as wearing protective clothing, hats, and sunscreen — may be challenging due to operational requirements or limited access to these resources. In one study, 77% of veterans deployed to Iraq and Afghanistan reported 4+ hours working in the sun per day, and 63% had at least one sunburn during their deployment. Only 13% of those surveyed reported routinely using sunscreen, while 87% reported their sunscreen use as “sporadic” or “sometimes.”

- Occupational Exposures: Some military occupations involve exposure to potential carcinogens, such as certain chemicals or substances, which may contribute to an increased risk of melanoma. However, the specific impact of these exposures on melanoma risk is still being studied.

- Veteran Demographics: Several demographic factors within the veteran population represent an increased risk of melanoma — including sex, age, and race. According to recent census surveys, of the roughly 16.2 million veterans in the United States, nearly 90% were male, 26.5% were 75 years of age or older, and 72.3% were white.

Detecting Melanoma Early

At the time of diagnosis, veterans are more likely to have advanced melanoma, meaning that it has spread beyond the original site either into nearby lymph nodes or distant organs.[1] While treatments for advanced melanoma are improving rapidly – including 16 FDA approvals in the last decade — early detection is key to a positive prognosis. When caught early, melanoma is highly curable in most cases.

It is important to set aside time each month to thoroughly examine your skin for new or changing lesions. Look for moles or growths that are asymmetrical, have an irregular border, exhibit changes in color, have a diameter larger than the size of a pencil eraser or have evolved in size or thickness. If you notice one or more of these signs, see your health care provider.

As the military becomes more diverse[3], it is also important to note that not all melanomas follow the same pattern. Melanoma may present differently in those with skin of color. There are also rare melanoma subtypes – uveal, acral, and mucosal melanoma – which are not believed to be caused by UV exposure but pose a potential threat to the vast military and veteran community.

National Response and Ongoing Research

Recognizing the additional risk for melanoma faced by the military and veteran population, the U.S. Congress established the Melanoma Research Program (MRP) as part of the Congressionally Directed Medical Research Programs (CDMRP). The Melanoma Research Program is committed to diminishing the disease burden of melanoma on service members, veterans, as well as the general population. In 2023, the MRP intends to award a total of $40 million in melanoma research funds.

At MRA, we are also partnering with the United States Departments of Defense (DOD) and Veterans Affairs (VA) on a groundbreaking retrospective study across the national VA system examining melanoma cases in veterans over the last 20 years. This research is aimed at identifying the risk factors for rare melanomas, which are still unknown to the general population, not just the veteran community.

Also launched late last year, MRA's RARE Registry for patients with acral, mucosal, and cutaneous melanomas, has become a centralized platform where advocates and researchers come together to push research forward.

"We are committed to advancing research and improving outcomes for all people affected by melanoma, including the military and veteran community," said MRA's CEO Dr. Marc Hurlbert. "We hope that by funding the best possible science, fostering collaboration across institutions, and by bringing patients, advocates, and researchers together we can continue to move the field forward to better understand, prevent, treat, and ultimately cure melanomas."

On November 10th, MRA's CEO Dr. Marc Hurlbert and Army Veteran and melanoma survivor Andrew Smith joined together for a special discussion about melanoma risk in the military and veteran community. Andrew shared his experiences with the unique sun safety challenges created by the extreme and harsh conditions service members face in theater and Dr. Hurlbert discussed the innovative research MRA is leading in partnership with the United States Departments of Defense (DOD) and Veterans Affairs (VA).

You can watch the video on YouTube, below or at the top of this article.

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