In mid-2016, our team, at my urging, decided to focus January's annual medical issue on cancer. So in November, as we were finalizing the stories, the topic was top of mind when I noticed a new mole on my thigh. I sent a picture of it to my dermatologist, Dr. Amy Taub. "Not bad but not good," she texted back.

Two weeks later, I had the mole removed, and a week after that, the verdict was in: stage I melanoma. Survival rates are nearly 100 percent when the disease is caught early. But allowed to spread unchecked, it can turn deadly.

We scheduled an appointment to remove a larger area. And by the time this issue comes out, my brush with cancer will likely be over. But it gave me pause: There's no history of skin cancer in my family. I'm Greek and naturally olive skinned, and I don't lie out in the sun. (Dr. Taub had made me sign a no-tanning pledge—though, full disclosure, up until a few years ago, there were occasional visits to tanning beds.)

My friends have asked how I knew to get the mole examined. I had read before what skin cancer looks like, and this spot checked the boxes (among them: uneven, asymmetrical borders; variations in color). I've since learned that for women, melanoma most commonly occurs on their legs. For men, it's their backs.

There are so many reasons I'm thankful to work at this magazine—and now I have a new one.

SUSANNA HOMAN
Editor in Chief and Publisher