Melanoma Treatment



Your histology results confirm a melanoma and further treatment is necessary.

Subtype: _____

- In situ
- Breslow thickness _____mm

The Breslow thickness describes how thick the melanoma is in your skin and is the most important factor guiding further treatment.

Treatment

In Situ (Pre-Invasive) Melanoma

This melanoma is confined to the top layer of the skin and thus it is considered cured after a second excision called a wide local excision (cutting it out with a margin of clear skin). This is usually 5mm but can be wider depending on other factors. No other treatment is required. Ongoing checks of the scar are required. In addition you are considered high risk for further melanomas and other skin cancers so regular full body dermoscopic skin checks are recommended.

Early Invasive Melanoma

This melanoma extends into the second layer of skin where the skin blood and lymph systems are found and there is potential for melanoma cells to spread via these to other areas of the body (metastasize), although with these early melanomas this is very unlikely to occur.

You will be referred to a specialist for a wide local excision taking 10mm side margins and extending more deeply through the fat layer under the skin. This is usually done under local anaesthetic but in some body sites more complex surgery such as skin grafting or flaps maybe required. It may be recommended that this be done under general anaesthetic.

No other tests are routinely recommended. You will need follow-up checks of both the scar and lymph nodes, and regular full body dermoscopic skin checks.

Intermediate and Thick Melanomas

This will require a wide local excision as above and also discussion with your specialist about sentinel lymph node biopsy (SLNB), a dye study which is done under anaesthetic at the same time as your surgery. This is to check whether or not the melanoma has already spread to the most at-risk lymph node(s).

This gives further information about your prognosis and can be useful for guiding further therapies. It is possible other tests may be required as well.

You will need regular follow-up checks, both to check for recurrence of the melanoma and further skin cancers.

Next steps;

Your follow-up recommendation is			
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Other considerations

Careful UV protection of your skin is important.

It is important that you advise your close family members of the melanoma as it does increase their risk of developing a melanoma and on-going regular skin checks for them is advisable.

Understandably, it can be difficult to process a melanoma diagnosis. Molecheck is here to support you through your diagnosis and treatment, so please do not hesitate to contact us with any questions you may have.

Further information and ongoing support

If you would like more detailed and technical information regarding Melanomas, please visit:

www.dermnetnz.org/topics/melanoma

www.dermnetnz.org/topics/melanoma-in-situ

www.dermnetnz.org/topics/i-have-advanced-melanomawhat-now