

Surgical treatment of melanoma



***Surgery** is the primary treatment for **all stages** of
Melanoma

WLE Rationale...

- * The **Wide Local Excision** is for gaining a large 'safety margin' around the site of the primary Melanoma, to reduce the risk of recurrence *in that site only.*
- * No evidence of an overall survival advantage

Treatment groups

- * Divided into:
 - * in situ
 - * Thin = <1mm
 - * Intermediate = 1-4mm
 - * Thick = >4mm

In situ Melanoma

- * **No staging Investigations** are indicated
- * Requires WLE **5mm**



Thin Melanomas [<1 mm]

- * Staging Investigations may have a **low** pick-up rate:
 - * **blood tests** (LFTs, FBC, LDH)
 - * **No Imaging**
 - * ? US
 - * ? CT
- * Requires **referral** for:
 - * WLE ~**1cm**



Intermediate Melanomas [1-4mm]

- * Staging Investigations may still have a low pick-up rate.
 - * **blood tests** (LFTs, FBC, LDH)
 - * Imaging with **CT** or PET
- * Requires referral for:
 - * WLE **1-2cm**
 - * **sentinel node biopsy**
 - * ~15% chance of + **SN**



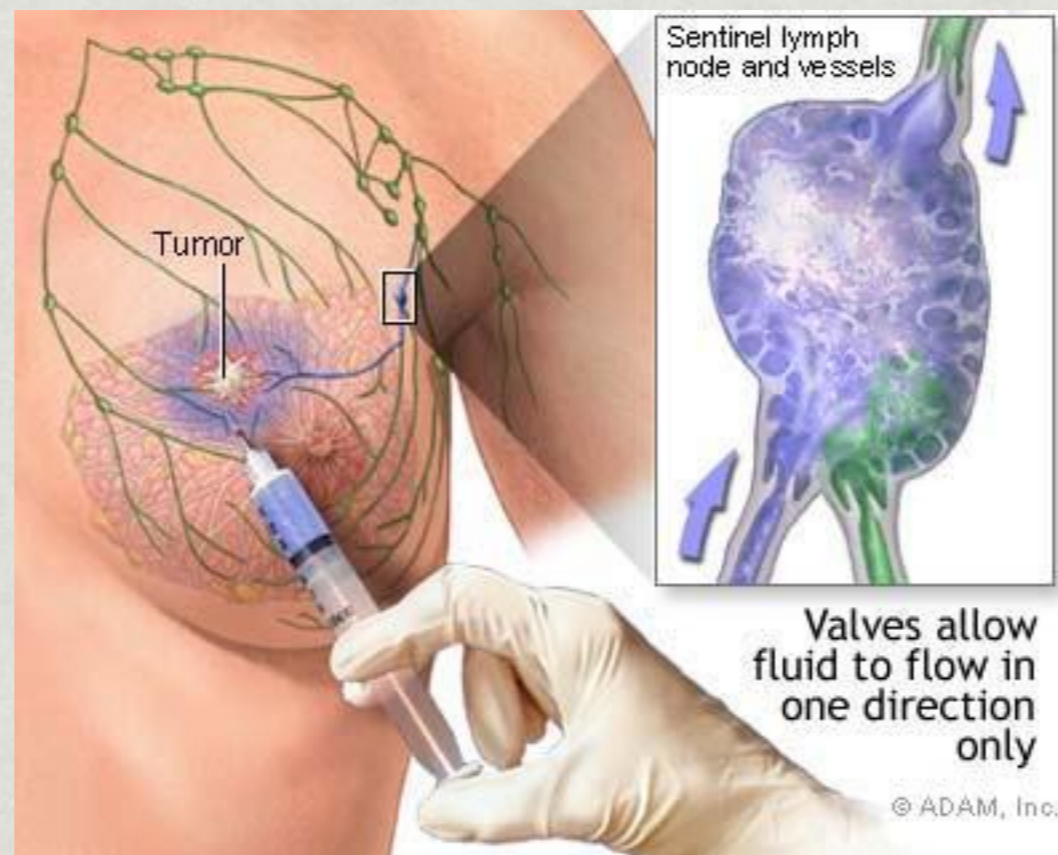
Thick Melanomas [>4mm]

- * Staging investigations are more important (**10-26% positive**)
 - * blood tests (LFTs, FBC, LDH)
 - * Imaging
 - * **CT** or PET
- * Requires **referral** for:
 - * WLE **~2-3cm**
 - * complete **lymph node dissection**



Sentinel node biopsy

- * For Melanomas between 1 & 4mm
- * “To pick the patients who don’t need a full lymph node dissection”
- * Injection of radionuclide on morning of surgery



Sentinel node biopsy

- * Localisation of the draining lymph node with probe.
- * Important **prognostic** indicator:
 - * SN **negative** = 12% Recurrence
 - * SN **positive** = 46% Recurrence
- * 5yr **survival is greater** in patients having a completion node dissection vs. observation



Regional Chemotherapy

- * Isolated limb infusion
- * Very high chemo dose that couldn't be tolerated systemically
- * For:
 - * in-transit mets
 - * Thick primaries
 - * Multiple distal recurrence
 - * Inoperable palliation



The future:

- * vemurafenib
- * this has shown cell death in Melanoma cell lines if **v600E** mutation is present (60-80%)
- * Trials have shown **80%** partial to complete regression, lasting **2 to 18 months**.....

