Evaluation of the Dermatology Patient and their Lesion(s)

- Physical Description of the Primary Lesion
- Location/Distribution
- Timing
- Contributing History
  - Exposures
  - Contacts
  - Medical History
  - Family History

Remember skin disease like any other condition and the examination is only a snapshot in time. Most conditions/lesions have a progression and can appear quite different at different times.
Terms and Descriptions

- Macule: small flat skin lesion
- Patch: elevated larger flat skin lesion
- Papule: skin lesion <0.5mm
- Nodule: elevated skin lesion >0.5mm
- Plaque: elevated skin lesion that has texture

- Wheel: raised edematous lesion
- Vesicle: fluid filled lesion <0.5 cm in diameter
- Bulla: fluid filled lesion >0.5 cm in diameter
- Pustule: pus filled lesion
- Scale: visible or palpable flake
- Crust: dried exudate
- Horn firm projection of keratin
Terms and Descriptions

- Annular
- Linear
- Elevated
- Geometric
- Dermatomal
- Geographic
- Grouped
- Solitary

- Vascular
- Blanching
- Sclerotic
- Pulsatile

- Sub-cutaneous
- Intradermal
- Cutaneous

Anatomical Descriptions

- Consistency and Conventional descriptions that can be clearly identified by a third party reviewer.
- Photo-documentation
Dermatology Resources

Dermatological Surgery

- Shave Biopsy
- Punch Biopsy
- Excision
- Incision
- Incision and Drainage
- Electrodesciscation and Curetage
- Cryotherapy
- Electrofulgaration
- Radio frequency ablation
- Laser treatments
Anticoagulants and Outpatient Surgery

- Current Consensus is not to discontinue anti-coagulation therapy before outpatient dermatologic ambulatory surgery due to assumed risk of thrombotic event, e.g. cardiovascular or cerebral vascular incident

Skin Cancers

- Basal Cell Carcinoma
- Squamous Cell Carcinoma
- Melanoma
- Everything Else
Actinic Keratoses-
a pre-malignant lesion

- Identification
- Treatment options

Treatment Options
- 5-flurouricil
- Diclofenac
- Photodynamic therapy
- Cryosurgery
- Chemical destruction
- Curretage

Photodynamic Therapy
- Topical Application of 5-aminolaenolic acid (ALA) or methyl ester (MAL) as a photosensitizer
- Non-Invasive
Diagnosis of Non-Melanocytic Carcinoma (Basal Cell Carcinoma)

Basal Cell Carcinoma and Sebaceous Hyperplasia
Diagnosis of Non-Melanocytic Carcinoma (Squamous Cell Carcinoma)

Skin Cancer and the Organ Transplant Patient

- Squamous Cell Carcinoma is 65 times more common in transplant recipients than in non-transplant patients.
- Kidney Transplant patients are ~ 4x more likely to develop melanoma.
- In Australia, after 4yrs following cardiac transplant, approximately 25% of patients die of skin cancer.

International Transplant Skin Cancer Collaborative (ITSCC)
www.itscc.org
Diagnosis of Melanoma

- ABCDE’s
- Dermoscopy
- Biopsy

Biopsy Techniques – What they are and how to choose…..

- Incisional
  - Superficial Shave Biopsy
  - Shave Biopsy(Saucerization)
  - Punch Biopsy
  - Curetting
  - Fine Needle Biopsy

- Excisional
  - Excision
  - Deep Scoop(Saucerization)

Most significant staging Parameter is Breslow Depth

In most cases there is only one opportunity to accurately determine the depth….

The Initial Biopsy
Shave Biopsies (Including Saucerization)

**Pros**
- Speed of procedure and limited morbidity

**Cons**
- Inadequate sampling for diagnosis or determination of depth

Final Depth can be indeterminant due to transection

Incisional Biopsy

**Pros**
- Full depth may be determined

**Cons**
- Sampling Error may provide inadequate sampling to evaluate the actual Breslow Depth due to sampling error
- Limitations of sample may restrict diagnosis by not allowing for evaluation of lesional architecture
Excisional Biopsy

Pros
Full depth may be determined and the whole tumor can be evaluated

Cons
Excessive tissue removal for benign lesions

Treatment of NMSC and Melanoma

- Treatment in both cases is influenced based on the initial lesion, its characteristics, its location, the patient’s past medical history and contributing factors, patient desires. …

- Treatments for NMSC include Destructive and Excisional treatments

- Treatments for Melanoma include Excisional treatment for primary tumors

Destructive treatments include: Electrodessication, Electrodessication and Curettage, Curettage, Cryosurgery, Chemotherapy, Heat Therapy, Chemical destruction, Radiation therapy

Excisional treatments include: Conventional Surgery, Mohs Surgery
Mohs Surgery

- What is Mohs Surgery?
- Is Mohs and acronym?

Mohs Surgery

- How is Mohs Surgery performed?
- What makes it different from conventional excision with pathologic examination?
Melanoma
Sentinel Node Biopsy

- Evaluation of metastatic dissemination within the lymphatic system
- Most commonly used for Breast Cancer or Melanoma
- Dye compound is injected at the site of the primary tumor which allows the identification of node specific drainage patterns.
- Pathologic examination of the draining lymph node allows determination of the metastatic state
- This information is used to guide therapy (nodal dissection, etc.) and allow for tumor staging

Melanoma
Radiologic Examination

- Analysis indicates a benefit for the evaluation of metastatic state in high risk individuals
- Allows for following clinical progression

- CT
- MRI
- PET
- PET/CT
- Ultrasound
Appropriate follow-up examination for skin cancers

- Appropriate follow-up scheduling is very dependent on the findings of the initial tumor.

- For melanoma superficial/insitu, q 6 months x 2 yrs then yearly
- For invasive melanoma, q 3 months x 2 yrs, then q 6 months x 2 years, then yearly
- For NMSC, depends on the setting of the initial tumor, may be appropriate q 3-6 months x 2 yrs, then yearly unless new lesions are detected.

Lumps, Bumps, and Cysts

- Keloid
- Myxoid Cyst
- Epidermal Cyst
Lumps, Bumps, and Cysts

Furuncle

Nail Lesions
Nail Lesions

- Paronychia
- Psoriatic nail
- Habit tic deformity
- Subungual hematoma
- Peudomonas Infection
- Subungal SCC originating from a subungal wart
Impetigo and Intertrigo and similar skin conditions

Ulcers that are vascular
Ulcers that are not vascular

- Ecthyma
- Brown recluse spider bite
- Pyoderma Gangrenosum

Xerosis, Cracked Heels, and other tough things we encounter

- Dry skin
- Rough, cracked heels
Blisters on the buttocks....

Zoster, a blistering presentation in a regional dermatomal distribution
Zoster, or something else….

Positive findings on KOH prep
Majocchi's Granuloma presenting like Zoster

Other Linear vesicular Dermatomal Conditions
Yeast, Fungus and other things growing on us

Look alices
Eythroplasia of Queyrat or Candidiasis or Zoon's Balanitis?
Look alikes

- Paget’s Disease of the nipple
- Extramammary Paget’s Disease of the Buttocks

Thank you!