

Types of Skin Cancer

Basal Cell Carcinoma

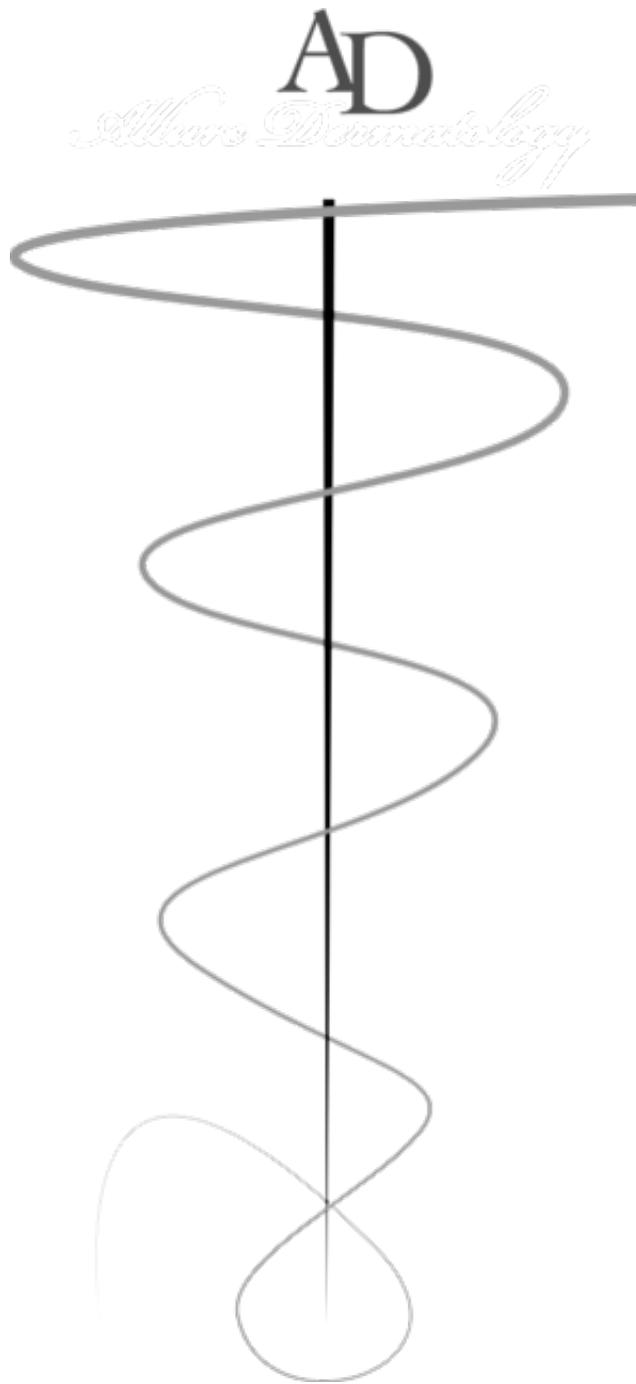
Basal cell carcinoma is the most common skin cancer, representing about 80% of new skin cancers. This type is rarely life threatening and does not usually spread. They usually occur in patients who have had repeated sun exposure. Patients that develop a basal cell cancer have a 60% chance of developing another one within five years.

Squamos Cell Carcinoma

Squamous cell carcinoma is another type of skin cancer that is rarely life threatening. It represents about 16% of new skin cancers and is found most often in people with fair complexions. This type may develop from an Actinic (solar) Keratosis which is a scaly, crusty patch of sun-damaged skin. They can appear as a red bump or may seem like an ulcer. They may also seem like a sore that just won't heal. They can range in size from a few millimeters to a few centimeters in diameter.

Malignant Melanoma

Only about 4% of newly diagnosed skin cancers are malignant melanomas. They are the most serious form of skin cancer and can be life threatening. However, if treated early the cure rate is about 95%. This cancer can stem from a mole that has been present for many years. If you have a mole that has changed in appearance, you should have it examined by a specialist.



MOHS MICROGRAPHIC SURGERY

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Mohs Micrographic Surgery

Mohs surgery combines the surgical removal of a tumor with immediate microscopic examination of the tumor and underlying diseased tissue. This process allows your Mohs-trained provider to identify, remove, and examine the tumor and its roots layer-by-layer until the cancer is completely gone. Mohs surgery provides the highest cure rate and lowest chance of regrowth, while minimizing potential scarring and disfigurement; it is the most exact and precise means of removal.

Mohs surgery is effective for most types of skin cancer and commonly used to treat basal and squamous cell carcinomas. It is the treatment of choice for cancers which are recurring, large, or have edges which cannot be clearly defined as well as in areas where it is important to preserve healthy tissue for aesthetic or functional results.

Your risk of cancer can be reduced by protecting yourself from the sun. Be aware of suspicious growths and visit your dermatologist for regular check-ups.

Patient Information and Preparation for Surgery

If you are taking prescription medications, continue to take these unless otherwise directed by your physician. However, inform your Mohs surgeon if you are taking blood-thinning medications such as Coumadin, Plavix, Aspirin (or Aspirin substitute such as Advil, Motrin, Nafton, Naprosyn, etc.), vitamin E, ginkgo, garlic, ginseng, ginger, ephedra or other nutritional supplements. These medications and supplements can sometimes cause an increased chance of bleeding after surgery.

Day of Surgery

You should arrive well-rested. Eat normally. For your comfort, wear casual layered clothing. If you wish, bring a light snack or something to help occupy your time.

Procedure

Most Mohs cases can be completed in three or fewer stages, requiring less than four hours. However, it is not possible to predict how pervasive a cancer will be. As such, it is advisable to reserve the entire day for this procedure in case the removal of additional layers is required.

Minor Post-Surgical Discomfort Expected

Most patients do not complain of significant pain. If there is discomfort, normally only Tylenol is required for relief. You may experience some bruising and swelling around the wound, especially if surgery is performed near the eye area.

Potential Complications Associated with Mohs Surgery

Patients should understand that there is no guarantee that any procedure will be free of complications or adverse reactions. During Mohs surgery tiny nerve endings are cut, which may produce temporary or permanent numbness in and around the surgical area. If a large tumor is removed or extensive surgery is otherwise required, a nerve to muscles may be cut, resulting in temporary or permanent weakness in a portion of the face. This is an uncommon complication. The surgical area may remain tender for several weeks or months after surgery. Infection is always a possible complication of any surgical procedure: we may attempt to minimize this risk by giving you a prescription of antibiotics if necessary.

Healing, Scarring & Scar Revision

As with all forms of surgery, a scar will remain after the skin cancer is removed and the surgical area has completely healed. Mohs micrographic surgery, however, will leave one of the smallest possible surgical defects and resultant scar. Scars may naturally heal and improve in appearance for a six to twelve month period. There are also many other treatments available for enhancement of the surgical area following skin cancer surgery.