

A new ERA for global Dermatology 10 - 15 JUNE 2019 MILAN, ITALY

DERMATOLOGICAL SURGERY

SURGICAL TREATMENT OF LARGE MALIGNANT NEOPLASMS OF THE SCALP: OUR APPROACH.

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Background: Surgical excision of cutaneous neoplasms of the scalp provides the best chance of cure in the majority of cases. Basal cell carcinomas have the highest incidence followed by squamous cell carcinomas and melanomas. Non Melanoma skin cancers in this region typically arise on large skin areas affected by precancerous changes induced by solar irradiation. Sometimes the patient delays the treatment, so the neoplasm reaches the dermatologist's observation when he has already acquired significant dimensions. Surgical treatment of large neoplasm of the scalp is always an important challenge for the dermatologist surgeon not only for the particular anatomy of this apparatus but also because is necessary to ensure adequate coverage of the skull bone tissue with healthy skin.

Observation: We present our case studies in the treatment of large carcinomas and melanoma of the scalp. Complete surgical removal with margin control is the standard of care to avoid recurrence. Mohs Micrographic Surgery, if available, gives clearance rates equal or better then wide local excision, with possible tissue sparing attributes. Successful reconstruction of the scalp requires careful preoperative planning and detailed knowledge of scalp anatomy. We illustrate the most useful plastic surgery techniques; in the reconstruction of large defects of the scalp highlighting in particular how, despite the difficulty of surgical treatment, there have been considerable advantages for the patient in terms of quality of life and survival

Key message: Surgical treatment of the scalp neoplasms, although they can be large, could be treated with modern plastic surgery techniques, ensuring great advantages in terms of survival and quality of life even in elderly patients.





