

MELANOMA AND MELANOCYTIC NAEVI

## ACCURACY IN MELANOMA DETECTION IN A MEXICAN REFERRAL CENTER: 2 YEARS OF EXPERIENCE

Zf Barragán-estudillo (1) - M Macedo-pérez (1) - R Roldán-marín (1)

Dermato-oncology Clinic, Faculty Of Medicine, Research Division, Universidad Nacional Autónoma De México, Dermato-oncology Clinic, Mexico City, Mexico (1)

INTRODUCTION: Malignant Melanoma (MM) constitutes approximately 4% of all skin cancers (SK) and is responsible for 75 % of SK mortality in US and Europe(1). In 2003, Mexico's Histopathologic Cancer Registry reported 14,319 cases of SK, of which 9.02 % (1293 new cases) corresponded to melanoma, with 377 deaths.(1). Dermoscopy is a useful, noninvasive diagnostic technique that allows early melanoma detection.(2) Experts' sensitivity based only on clinical parameters is around 70-85%, while dermoscopy achieves a 92% of sensitivity and increases diagnostic accuracy between 5 to 30%.(2)

OBJECTIVES: The aim of this comunication was to describe the two-years experience in a Mexican Melanoma Referral Center.

MATERIAL & METHODS: 20 patients with cutaneous melanoma were analyzed through a retrospective database collected from September 2016 to March 2018 at the Dermato-Oncology Clinic, Faculty of Medicine, Universidad Nacional Autónoma de México. Median age was 52.4 years and 15 (75%) were males. 16 (80%) patients were diagnosed in our clinic, 4 were referred from other settings. Prevalent skin Phototype was IV. Most common melanoma subtype was Superficial Spreading Malignant Melanoma (SSMM) observed in 8 patients (40%) followed by Acral Lentiginous Melanoma (ALM), in 5 patients (25%), Lentigo Maligna (LM) in 4 patients (20%) and Nodular Melanoma (NM) in 3 patients (15%). Median Breslow thickness was 0.8 mm, prevalent Clark level was I (40%). Only 1 patient had personal and family history of MM.

CONCLUSION: This is the first study in Mexican Population on a Referral Melanoma Center, and even when in Mexico patients usually present poor prognosis due to a delay in diagnosis, our Breslow thickness was lower than previously reported in other mexican studies (mean 5.22 mm)(1). Our findings suggest specialized skin cancer training and use of noninvasive diagnostic techniques allows better and earlier melanoma detection even in mestizo population with darker skin phototypes.





