

MELANOMA AND MELANOCYTIC NAEVI

THE VALUE OF DERMOSCOPY IN DIAGNOSING MELANOMA IN SITU

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Background: Early recognition is the most important intervention to improve melanoma prognosis. Noninvasive in vivo imaging techniques have become an important diagnostic aid for the skin cancer detection. Dermoscopy, also known as dermatoscopy, epiluminescence microscopy or skin surface microscopy, has been shown to increase the clinician's diagnostic accuracy when evaluating cutaneous neoplasms. The dermatoscope facilitates the visualization of subsurface skin structures that are not visible to the unaided eye.

Observation: A 52-year-old male patient presented with a 1,2 x 1,1 cm of an asymmetric pigmented lesion slightly elevated on the dorsal part of the left foot. Dermoscopic examination revealed atypical lesion with asymmetry in two axes, irregular pigment network, irregular streaks, irregular dots/globules, light brown areas and regression. Complete surgical excision was performed. Histopathologically the lesion was reported as a melanoma malignum in situ.

Key message: The use of dermoscopy allows the detection of melanoma in early stages and identifies characteristics of melanoma that would go unnoticed to the naked eye. Lesions with reticular light brown areas and regression of dermoscopic structures should undergo surgical excision for the suspicion of melanoma.





