ABSTRACT BOOK
ABSTRACTS

24TH WORLD CONGRESS
OF DERMATOLOGY
MILAN 2019

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

SKIN CANCER (OTHER THAN MELANOMA)

CERVICAL METASTASES FROM NMSC (NONMELANOMA SKIN CANCER) OF HEAD AND NECK

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Introduction: Cutaneous squamous cell carcinoma represent about 20% of the non-melanoma skin cancer of the head and neck.

Objective: Despite the low rate of node metastasis the survival rate is reduced by 50% when there is a pathologic node disease.

Material and methods: A retrospective analysis of patients was performed. About 150 Patients, from IRCSS National Cancer institute of Rome "Regina Elena", with non melanoma skin cancer (NMSC) of the head and neck were enrolled in the present study. All treatment , pathologic details and follow up data were reviewed.

Results: Each patient received surgery of the primary skin cancer and treatment of the parotid gland or neck in case of clinical involvement or adverse features of primary. Adjuvant radiotherapy was considered in case of prognostic negative factors or locoregional involvement.

Conclusion: There is few data in literature on the role of elective neck dissection in patients without evidence of lymph node metastasis.
In particular, it is not yet well established how much the preventive treatment of the neck and the parotid gland has a role on the control of disease recurrence and overall survival. While Elective neck dissection and parotidectomy are associated with increased locoregional control and disease free survival in T3 or T4 tumor, is not clear if the earlier stages could benefit from the same treatment rather than a wait and see policy. Patients with NMSC of the head and neck with clinical evidence of node metastasis have a poor prognosis in terms of locoregional control and disease free survival. It is important to pay attention considering preoperative adverse features for each patient and tailor treatment to reduce morbidity.

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1885
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