



DERMATOLOGICAL SURGERY

COMPARATIVE ANALYSIS OF INTRAOPERATIVE FROZEN SECTION AND PERMANENT SECTION MARGINS IN MOHS MICROGRAPHIC SURGERY; WHAT'S THE MEANING OF DIFFERENCE IN RESULTS?

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Introduction: Mohs micrographic surgery (MMS) is distinguished from other techniques in that microscopic examination of all excised tissue occurs intraoperatively rather than after the surgery. Intraoperative frozen section (Fs) margin was immediately examined by pathologist and the permanent sections (Ps) were made and interpreted afterwards. Prompt surgical procedure is the strong point of MMS, but it can make a gross sampling error or a misinterpretation of Fs. False negatives on Fs, that is, persistence of tumor at the margin can be attributed to provoke local recurrence.

Objectives: To date, there were only few analyses between the results of Fs and Ps in patients with skin cancer treated with MMS. Therefore, we tried to refine the cause in patients showing different results between them.

Materials and Methods: A retrospective analysis of 1224 lesions of 1141 patients with skin cancer treated with MMS was undertaken, investigating the resections and pathological analyses in a Pusan national university hospital setting. All patients with a follow-up period of less than 1 year were excluded.

Results: 270 of 1224 (22.1%) lesions showed different results; negative margin on Fs and positive margin on Ps. But, only 2 patients (2/270 0.7%) have been recurred. The reason for these results could be due to the surgical excision margin extremely close to the edge of tumor and it is really a small possibility of false negative Fs.

Conclusion: After a thorough analysis, the positive margin on Ps could not be a recurrence predictive factor in clinical fields. Instead, negative margin on Fs and positive margin on Ps demonstrate strong point of MMS as a delicate surgical technique removing all tumor tissue with the minimal amount of tissue loss.

