

Melanoma in situ

Skin Oncology Team Patient Information Leaflet

Introduction

This leaflet has been written to help you understand more about melanoma in situ. It tells you what they are, what causes them, what can be done about them and where you can find out more.

What is melanoma in situ?

There are two types of melanoma in situ: lentigo maligna and superficial spreading melanoma in situ.

In both cases, the melanomas contain abnormal cells which are sometimes referred to as pre-cancerous cells. In situ means that there are abnormal cells but they are only in the top layer of the skin (the epidermis). This means that they have not spread anywhere else in the body and for this reason, it is rare for this type of melanoma to come back once they have been removed.

What do they look like?

Lentigo maligna appear as flat, brown patches of skin on sun-exposed areas such as the face, neck and fronts of arms. They are usually slow-growing and may be one to two centimetres in size although they can be much bigger. They are more common in elderly people.

The other type, superficial spreading melanoma in situ, can be a mixture of browns, dark brown or black and might be flat or slightly raised. They can be any size and can occur anywhere on the body. However, the most common places to find them are on the legs and faces of women.

How are they treated?

They are removed by using surgery. At the same time, the surgeon will also take out a border of healthy skin tissue from around the melanoma. This tissue will be examined under a microscope to make sure that the melanoma has been completely removed.

What are the risks of surgery?

As with any surgery, there are some risks. It is important that we tell you about these so that you can decide whether to have the surgery.

The risks are:

A scar

You will have a scar that usually takes a few months to settle down. Even after this time it may remain thick and red. If you have surgery in certain areas such as your chest, shoulder or back, it is more likely that the scar will be thicker.

Bleeding

This can happen a few hours after surgery. Usually it is only slight and will stop if you press a clean dressing over it for a couple of minutes. If the bleeding does not stop or becomes heavy, please either contact us on 01384 456111 ext. 3088, visit your GP or in an emergency, go to your nearest Emergency Department (A&E).

Infection

This may happen a few days after surgery or after you have your stitches removed. If you experience a fever (high temperature), bad pain or a smell from your wound, contact your GP as you may need some antibiotics.

Breakdown of the wound

This is quite rare. It is when the wound may partly or completely split open at the time your stitches are removed, or soon after this.

Depending on the size of your wound, this may be left to heal on its own or it may need to be stitched back together.

Pain

You may experience some pain or soreness after your surgery. If this happens, please take painkillers such as paracetamol (always read the label; do not exceed the recommended dose). If you have very bad pain, please contact your GP.

What are the benefits of the surgery?

The benefits of having the melanoma in situ removed are that it is very unlikely to come back or to spread to the surrounding areas of your skin.

What happens if I do not have surgery?

If you do not have treatment, there is a risk that the melanoma in situ may continue to grow. It may start to spread both outwards and downwards into your skin tissue. If this happens, it may become invasive and spread to other areas of your body.

What happens after treatment?

Most patients who have a melanoma in situ completely removed do not have to come back to see their consultant.

However, if you have any concerns after you go home, such as another abnormal-looking area of skin or a change to an existing mole, you should see your GP.

How can I help myself?

As you have had a melanoma in situ, your risk of getting another one is higher than average. For this reason, it is important that you take care in the sun. Stay in the shade between 11am and 3pm, when the rays of the sun are strongest.

When you are in the sun, cover up with a hat, clothing and sunglasses and use at least a factor 30 sun cream or lotion.

Can I find out more?

You can find out more from the following organisations:

Macmillan Cancer Support

0808 808 00 00

Weblink:

<http://www.macmillan.org.uk/Cancerinformation/Cancertypes/Melanoma/AboutMelanoma/Typesofmelanoma.aspx>

Cancer Research UK

0300 123 1022

Weblink:

<http://www.cancerresearchuk.org/about-cancer/melanoma/stages-types/melanoma-in-situ-stage->

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Skin Oncology Team on 01384 456111 ext. 3088 (9am to 5pm, Monday to Friday)

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dudleygroup.nhs.uk/services-and-wards/oncology/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

للحصول على هذه النشرة بحجم أكبر، وعلى شكل إصدار صوتي و بلغات أخرى، الرجاء الاتصال بالرقم 08000730510.

此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

ਇਹ ਪਰਚਾ ਵੱਡੇ ਅੱਖਰਾਂ, ਬੋਲ ਕੇ ਰੀਕਾਰਡ ਕੀਤਾ ਹੋਇਆ ਅਤੇ ਦੂਸਰੀਆਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਵੀ ਪ੍ਰਾਪਤ ਹੋ ਸਕਦਾ ਹੈ, 0800 073 0510 ਤੇ ਫੋਨ ਕਰੋ ਜੀ।

Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru va rugăm sunați la 0800 073 0510.

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