RESIDENTS’ ROOM

Strategies for the Early Diagnosis of Melanoma

RF - Estrategias de diagnóstico precoz en melanoma

A. Martin-Gorgojo, a, * I. Pastushenko b

a Servicio de Dermatología, Hospital Clínico Universitario de Valencia, Valencia, Spain
b Servicio de Dermatología, Hospital Clínico Universitario Lozano Blesa, Zaragoza, Spain

Received 30 January 2014; accepted 30 January 2014

KEYWORDS
Melanoma;
Early diagnosis;
Early detection of cancer

PALABRAS CLAVE
Melanoma;
Diagnóstico precoz;
Diagnóstico precoz de cáncer

Early diagnosis of melanoma remains a major challenge. Although there has been a clear increase in the detection of melanoma in situ and thin melanomas in recent years, deaths due to melanoma have remained virtually unchanged in the past decade, probably due to low rates of early detection of nodular and rapidly growing melanomas in specific population groups.

In a study based on data from the Spanish National Cutaneous Melanoma Registry containing 13,628 melanoma cases registered between 1997 and 2011, Rios et al.1 reported that men, and in particular men aged over 50 years, had greater Breslow thicknesses and other poor prognosis factors, and suggested that early detection and prevention campaigns should target not only the general population but also men in this age group.

One question that may arise during the design of such campaigns is whether instruction in skin self-examination combined with periodic visits to the dermatologist could be of value. Based on a study of 423 cases and 678 controls, a US research group reported that skin self-examination conducted between 1 to 11 times a year without the need for prior instruction from a specialist reduced the risk of deeper melanomas and doubled the chances of self-detection of melanoma; the results were even better for patients who additionally visited a doctor during the year analyzed.2 Although it would appear reasonable to recommend skin self-examination combined with a visit to a specialist, the authors of the above study recognized that their results could be affected by confounding or bias, and highlighted the need for more evidence.

We would also like to stress the importance of the adequate use of hand-held and digital dermoscopes in the early detection of melanoma. The value of dermoscopy has been increasingly acknowledged over the years and was confirmed in a recent review by Dr. Zalaudek’s group that also addressed several issues that remain to be resolved.3

Further work is needed to define the best strategies for the early detection of melanoma, and in particular the early detection of aggressive forms of melanoma. The implementation of appropriate diagnostic measures could be favored by the introduction of adequate policy and legislative measures, such as the obligation to report all cases of melanoma,
as proposed by Ríos et al. Indeed, melanoma was designated a notifiable disease in the United States in 2010.

References

