Functional Surgery, When Possible, Is the Best Option for Malignant Tumors of the Nail Unit
cirugía en tumores malignos del aparato ungueal: si es posible, mejor cirugía funcional

The main aim of cutaneous oncology surgery is to remove tumors with sufficient safety margins to offer the greatest chance of cure. The second aim is to preserve, where possible, the function of the affected organ, and the final aim, though often valued more highly by the patient, is to achieve good cosmetic outcomes. These principles are especially important when dealing with the hand, which is the most distinctive human organ and one of the main tools used to interact with the environment.¹

In this issue of Actas Dermosifiliográficas, Miguel Ángel Flores-Terry et al.² from Hospital General Universitario de Ciudad Real describe their experience with the surgical treatment of malignant subungual tumors (squamous cell carcinoma and melanoma), where amputation of the distal phalanx is the most common surgical technique. They performed function-sparing surgery consisting of excision of the nail unit with adequate margins and subsequent repair aimed at preserving the affected phalanx and its function. Used in appropriate indications (squamous cell carcinoma without bone involvement and melanoma with a Breslow thickness < 1 mm), the technique produced excellent results, comparable to those described in the literature, and the authors observed no changes in prognosis compared with amputation.

Studies such as this contribute to increasing awareness of surgical techniques that, while neither novel nor complex, help to improve patient quality of life and encourage us to continuously re-evaluate our practice.

References


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