

DERMATOLOGY & OCULOPLASTIC CONSULTANTS

What is Skin Cancer? Skin cancer is tissue which grows at an uncontrollable and unpredictable rate. There are 3 main forms of skin cancer: Basal Cell Carcinoma, Squamous Cell Carcinoma and Malignant Melanoma. The names refer to the origin of the cells in relation to the skin.

How does Skin Cancer Grow? Skin cancer begins in the epidermis and grows downward forming roots as well as spreading horizontally along the surface. The extension is not easily visualized.

How is Mohs' Microscopic surgery performed? Mohs is a precise method of treating certain skin cancers. It combines surgical removal of the cancer with in-office microscopic examination of the removed tissue. First the tumor and surrounding area are anesthetized and then the tumor is surgically removed by. The removed tissue is marked with colored dyes to map the tissue compared to the excision site. The tissue is processed and examined by Dr. Kovach under the microscope. The borders and base are examined to determine whether all the cancer has been removed or, if any cancer is still present, precisely map the residual cancer. Another stage of skin cancer removal is performed at the corresponding mapped location. Healthy tissue is spared. The process is then repeated.

It is always better to initially remove too little and perform a second stage than to remove more than is necessary.

How long does the process take? The whole process is usually completed in 1 day. Total removal of a skin cancer may involve several surgical stages and therefore, tissue processing. The length of each session will depend on tumor location, tumor size and tumor difficulty.

How effective is Mohs surgery in the treatment of skin cancer? Using the Mohs surgery technique, the percentage of success is very high, often 97 – 99%. This technique offers an excellent chance of cure, although there is no 100% guarantee. Mohs surgery also creates the smallest possible surgical defect so this can assist in the best possible cosmetic outcome.

When is Mohs surgery applicable? Mohs surgery is utilized in large skin cancers, recurrent skin cancers, invasive skin cancers, areas at risk for high recurrence like facial planes and thin skinned areas like hands and feet.

Will the surgery leave a scar? Yes, any form of therapy will leave a scar once you cut the skin. This can be minimized with good reconstructive techniques performed by Dr. Brannan, adhering to wound care and any imposed physical limitations, consistent sun protection and the addition of Biocorneum silicone scar gel with SPF.

Will my insurance pay or Mohs surgery? Most insurance companies will pay for at least part if not all of the surgery, but it is dependent upon the type of plan you carry and what your insurance has covered in the calendar year. Our staff will pre-verify your coverage, ascertain your benefits and determine your responsibility. You will be advised in advance if there are payments that you will need to make on the day of surgery.

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What happens at the preoperative (consultation) visit? The preoperative visit gives the physician the opportunity to examine your skin cancer, take a pertinent history and answer your questions. Sometimes, a consultation and the surgery will be on the same day.

How should I prepare myself for Mohs surgery? Try to get a good night's rest and eat a full breakfast. If you are taking any medication, take it as usual unless we direct otherwise. It is a good idea to bring a book or magazine with you on the day of surgery. The procedure may take a full day and there is time to relax while the tissue specimen is processed and reviewed.

What is the next step after Mohs'surgery has been completed? When Dr. Kovach has determined that the skin cancer has been completely removed, Dr. Brannan and Dr. Kovach consult on how to treat the wound created by the surgery. Usually there are 3 choices, (1) close the wound with sutures, (2) let the wound heal by itself, (3) cover the wound with a skin graft or flap. Dr. Brannan's oculo-facial plastic surgery expertise is very beneficial with extensive complex cancers on the face. Occasionally, radiation therapy may be utilized as an adjunctive treatment in invasive multi-staged cancers.

Once the wound has healed, how often must I return for a follow-up? Depending upon how your skin cancer is repaired, there may be a series of clustered appointments to insure the best outcome. A period of observation is necessary by your dermatologist to examine for recurrence. Also, studies have shown that once you develop a skin cancer, there is a possibility that you will develop others in the years ahead. Also, should you notice any suspicious areas on your skin, it is best to check with your referring physician to see if a biopsy is indicated.

Later on, must I avoid the sun? Our goal is to have you active and sunsmart in Sarasota. We do not think that sunshine will be harmful to you as long as you provide yourself with adequate protection, avoid burning, use discretion and continue with routine skin screenings.

It is best to apply sunscreen with a SPF of 30, fifteen minutes prior to going out. Dr. Anderson recommends physical barriers like zinc oxide and there are many formulations like Elta MD that are micronized and sheer. These sunscreens last 4 hours and are hypoallergenic. Different sunscreens need to be re-applied every 2 hours and are not water proof past 90 minutes. In addition to sunscreen, usage of wide brimmed hats, wide rimmed glasses and UPF clothing can be a tremendous benefit.