



SURGICAL ASSOCIATES

Patient Education

Wide Local Excision for Melanoma

You have been referred to Surgical Associates to have a wide local excision after a diagnosis of malignant melanoma. Melanoma is a serious form of skin cancer. If left untreated, melanoma can spread (metastasize) to other parts of the body. If detected early, treatment can be effective at preventing spread of the disease.

Once melanoma is diagnosed, the next step is determining the clinical stage, or extent of the disease. This is determined by:

- Thickness of the tumor
- Ulceration (loss of skin) over the surface of the melanoma
- Involvement of lymph nodes (sentinel nodes)
- Evidence of tumor spread beyond the lymph nodes (distant metastases)

After initial diagnosis, most patients require surgery to remove the entire melanoma as well as a rim of normal tissue surrounding the entire lesion. This is called a **wide local excision**. The purpose is to decrease the chance of recurrence at the same site. Occasionally, skin grafting is necessary depending upon the location of the excision. This may require a consultation with a plastic surgeon.

Because the wide local excision removes a large area of tissue and skin, this incision is often under tension. The sutures may need to remain in place 14 to 21 days and will be checked by your surgeon or a member of the care team.

Lymph Nodes

The most common site where melanoma spreads is to the lymph nodes that drain the area of skin where the melanoma was located. Sometimes lymph nodes that are involved can become enlarged and can be felt, but in most cases the nodes are not palpable.

Sentinel lymph node biopsy is removal of the first one or few lymph nodes that drain the area of the melanoma. This procedure may be recommended depending on the characteristics of the tumor, including thickness.

The nodes are identified by injecting a radioactive material or dye around the primary tumor and then imaging and marking the nodes. This is called **lymphoscintigraphy**. This is done in the radiology department. Please leave the markings that are placed during the procedure and re-mark the areas if they fade, with normal bathing, prior to the surgery.



At the time of surgery for wide local excision, the surgeon will inject a tracer to confirm the area of the sentinel node. They will make a separate incision and remove this node or nodes.

Sentinel lymph node biopsy results are used by your oncologist and care team to determine the best treatment options for your cancer and assist in clinical staging.

Potential side effects

After a sentinel node biopsy, you may experience pain or bruising at the site.

Some patients develop a small collection of fluid at the site. For most patients, this causes minimal symptoms and resolves on its own. Rarely, it will require your surgeon to drain the area, or it may become infected.

Another rare complication is swelling in your entire arm or leg called **lymphedema**.

Lymphedema can be a lifelong issue. Update your provider if you are having swelling so this can be further evaluated, and further recommendations can be made.

If the melanoma is on your arm or leg and you require sentinel lymph node biopsy at the time of your wide local excision, your surgeon may recommend **SOZO testing** to screen for the development of lymphedema. SOZO is a noninvasive procedure called bioimpedance spectroscopy. This procedure can help us detect lymphedema at an early stage, allowing us to start treatment right away to prevent long term issues. We recommend getting a baseline reading prior to surgery and then following up every 6 months for 2 years.

Going forward

You will follow up with your surgeon after surgery until your surgical sites are fully healed. You should follow up regularly with a dermatologist for the rest of your life. You may also need to follow up regularly with an oncologist, and they will recommend any additional needed treatment based on your results, status and history.

You can read more about malignant melanoma on the National Institutes of Health website, [cancer.gov](https://www.cancer.gov).

References: UpToDate.com “Patient Education: Melanoma Treatment; Localized Melanoma” by Dr. Jeffrey A Sosman, MD.