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St. Joseph Health   
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## Melanoma: Update from a Surgeon with Skin in the Game

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Skin cancer continues to be the most common malignancy diagnosed in the U.S. Invasive melanoma represents about one percent of skin cancers but accounts for the most mortality. Melanoma incidence has been increasing over the past three decades, and is projected to continue to rise across the world. In 2019 there were 96,480 new cases of melanoma and 7,230 deaths in the United States. Elderly men have the highest risk; however, melanoma is the most common cancer in young adults ages 25 to 29 years and the second most common cancer in those ages 15 to 29 years. In recent years, the rate of melanoma has dramatically increased in young women as well. Although the risk of relapse decreases substantially over time, late relapses do occur.

### Cures Becoming More Common

Early diagnosis is the indisputable best strategy for successful melanoma management and patient survival. Cutaneous melanomas that have not spread beyond the development site are highly curable. Until recently, melanoma that has spread to distant sites has rarely been curable; however, we now have promising treatment options with immunotherapy and targeted therapy. Standardized surgical management, coupled with vast improvement in medical oncology therapies, enable the multidisciplinary Melanoma and Skin Cancer Program team at The Center for Cancer Prevention and Treatment to realize ever-better outcomes.

### Surgical Management of Melanoma

The primary modality for treating early stage melanoma remains surgical excision with or without sentinel lymph node biopsy. The goals of surgical management of melanoma are:

- Ensure complete removal of the lesion with histologically clear margins
- Reduce the risk of local recurrence and metastasis by

- removing an adequate margin of normal appearing tissue
- Completing surgical staging of lymph nodes with sentinel lymph node biopsy when indicated.

### A Key Survival Strategy

Today's primary physicians tend to be well informed concerning epidemiology of melanoma, yet there is sometimes room for improvement regarding proper technique in biopsies of suspected melanoma. We welcome requests to perform biopsies consistent with malignant melanoma guidelines, thus ensuring there is no delay in diagnosis and subsequent definitive, effective treatment.

### ABOUT THE AUTHOR: Trevan Fischer, MD

*Dr. Fischer was drawn to surgical oncology for its multidisciplinary team approach to caring for patients with cancer. His clinical interests are melanoma and cutaneous oncology, breast oncology and soft tissue sarcomas, as well as surgical education. His research focus has mirrored his clinical interests.*

*Dr. Fischer attended the University of Oklahoma*



*for both medical school and undergraduate work and the University of Florida for his general surgery residency. In 2015 he completed a Complex General Surgical Oncology Fellowship at the Providence Saint John's Health Center John Wayne Cancer Institute (JWCI). He transitioned to faculty after graduation and now serves*

*as assistant program director of the JWCI fellowship program. In 2019, Dr. Fischer joined the St. Joseph Hospital Medical Staff and Melanoma and Skin Cancer Program team.*

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