

# 18<sup>th</sup> Global Dermatology Congress

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## Small-diameter melanomas: clinical-dermoscopic challenge in early diagnosis

**Background:** Melanoma is a leading cause of death from skin diseases due to potentially lethal nature. Thus, early diagnosis of melanoma cannot be overemphasized because thin melanomas have an excellent prognosis. Special difficulties in early detection of melanoma lie in melanocytic lesions whose diameter is below 6 mm, hypo-pigmented and non-pigmented lesions, and regular and rather clearly defined papular and nodular lesions regardless of their color (differential diagnosis: desmoplastic melanoma, Spitz nevus, Blue nevus). Briefly, there are many reasons to miss the diagnosis of small-diameter melanoma, particularly because melanoma is an excellent imitator of benign skin tumors. On the other hand, we can always use clinical, well-known ABCDE acronym for small-diameter melanomas and the dermoscopy as an additional diagnostic test often prevents the application and questions the “excellence” of known dermoscopic algorithms.

**Aim:** Emphasize and pay attention to this diagnostic challenge in everyday clinical and dermoscopic practice.

**Method:** We have demonstrated several interesting clinical-dermoscopic cases of patho-histologically verified melanoma with the diameter below 6 mm, including a rare naevoid malignant melanoma. We analyzed gender, age, anatomic localization, dermoscopic structures and patho-histological parameters, especially in terms of prognostic factors.

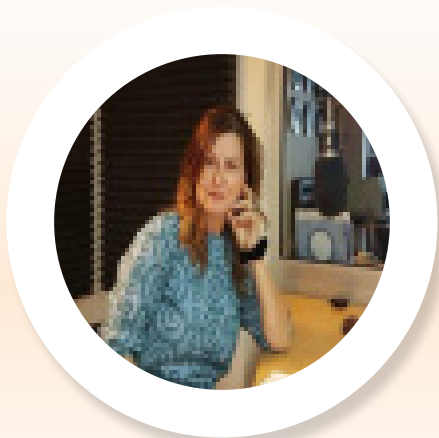
**Conclusions:** In order to recognize very small melanoma total body skin examination (TBSE) needs to be performed, detailed family and personal anamnesis needs to be obtained, the clinical ABCDE acronym is to be followed as much as possible and the classical algorithm, so called pattern analysis, should be applied in dermoscopic analysis of a suspicious lesion. Timely diagnosis and excision of the suspicious lesion with pathohistological verification are crucial for the prognosis, i.e. patient’s survival.

### Biography

Irdina Drljevic is currently employed at the “Private Dermatology and Venereology Practice - Dr. Drljevic” in Sarajevo and at the Department of Public and Preventive Health and Infectious Diseases of the Medical Faculty and School of Health Care University of Zenica, where she was awarded the title of Assoc. Professor in 2011, and Professor in 2017. In 2008 she completed a respectable International School of Dermoscopy at the Department of Dermatology, Medical University of Graz, Austria, under the guidance of esteemed professors Peter Soyer and Giuseppe Argenziano, and a year later she was educated in a class led by professor Harald Kittler in Vienna, Austria. She was a visiting lecturer at several plenary conferences and symposiums on dermatology in the Region of SI Europe, and in Bosnia and Herzegovina. She is one of the founders and the first vicepresident of the Balkans Association of Dermoscopy (BAD) active since 2011, where she has been engaged as a licensed lecturer of the BAD. Dr. Drljevic is the first and current President of the Dermoscopy Association of B&H established in 2011. In December 2013, in the capacity of the President of the Organization Committee of the First Winter School of Dermoscopy with International Participation, she made a large contribution in education of specialists dermatologists, plastic surgeons, family medicine doctors and others.

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### Notes:



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