## 11<sup>th</sup> Global Dermatologists Congress

November 14-15, 2016 Dubai, UAE

## Metastatic melanoma: An unusual presentation

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n 89-year-old female presented with an eighteen-month history of a large, protuberant, nontender left groin mass Ameasuring 15×8 cms. There were numerous melanocytic nevi present on her chest and abdomen. Past medical history was unremarkable. Computed Tomography (CT) of the pelvis showed a heterogeneously enhancing well circumscribed complex mass in the subcutaneous tissue with mixed solid and cystic components. Core biopsy was performed and histopathological analysis revealed scattered dissociated malignant cells with enlarged, eccentric nuclei and unevenly distributed chromatin, consistent with metastatic melanoma. A staging CT revealed bilateral lower lobe pulmonary metastasis with left hilar lymphadenopathy. The primary site of the melanoma remains to be established. The patient declined any treatment and died within six months of diagnosis. The incidence of malignant melanoma is rising with majority of the cases being detected when the disease is curable. However a small proportion of cases present with metastatic disease at time of diagnosis and carry a poor prognosis. The 10-year survival rate for patients with metastatic melanoma is known to be less than 10%. Although any organ can be involved, common sites for metastases include the liver, bone and brain. Cutaneous metastases are a frequent event in the progression of melanoma seen both in the early and late phases of disease. The site of metastasis is an important independent predictor of survival; patients with distal nodal and soft tissue metastases have a better survival than patients with visceral metastasis. Systemic therapy is the cornerstone of treatment for metastatic melanoma. Palliative surgery or radiotherapy to metastatic sites is generally performed to relieve symptoms secondary to tumor growth. In summary, melanoma is a potentially fatal form of skin cancer and early detection is crucial to improve survival and decrease mortality.

## **Biography**

Pooja Kadam is currently a Dermatology and Phlebology Research Fellow from Sydney, Australia. She has completed her MBBS from the University of New South Wales in 2011 and currently pursuing her Master of Science (Medicine) through research. She spent a year doing General Medicine Residency in Albany, New York. Currently she is also the unaccredited Dermatology Registrar at St. Vincent's Hospital, Sydney and Assist with the dermatology outpatient's clinics.

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