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## Mohs micrographic surgery vs. wide excision and late reconstruction for periocular basal cell carcinoma treatment

**Radwan Almousa**

Chelsea and Westminster Hospital, UK

**Purpose:** To analyze the outcome of basal cell carcinoma (BCC) treatment in a tertiary referral center in the UK.

**Methods:** Retrospective, comparative, interventional study of patients who underwent surgical treatment of periocular BCC between 2013 and 2015. Patients were divided into two groups; the first group had the BCC removed using Mohs microscopic surgery (MMS), the second group underwent wide excision with later reconstruction. The primary outcome was the recurrence rate in both group, the secondary outcomes were reconstructive technique, lesion site and size, histopathology, and rate of complications.

**Results:** One hundred forty-six patients (93 female, 53 male) with a total of 151 cases were treated. Median follow-up was 14 (range 6-40) months; median age was 74.4 (range 40.5-99.5) years. The BCC involved mostly the lower lid in 70 cases (46.3%), followed by medial canthus, upper lid, lower lid, brow, and lateral canthus, in 45 (29.8%), 14 (9.2%), 12 (7.9%) and 9 (5.9%) cases respectively. 102 patients had MMS surgery and 49 patients had wide excision. Most of the surgical defects were closed using local flaps (117) and the rest of the cases were closed using direct closure technique (26) and skin graft (8). In the MMS group, the average surgical defect (263.1±344.6 mm), was 3.75 times the original clinical tumor size (70.8±105.8 mm) (P<0.001). Three patients in the wide excision group had a recurrence of the BCC tumor. There was no recurrence in MMS group.

**Conclusion:** The microscopic BCC tumor is significantly larger than its clinical appearance. MMS is more effective in complete removal of the tumor than wide excision technique with less recurrence rate.

### Biography

Radwan Almousa has completed his Basic Ophthalmology training from Royal Cornwall Hospital. He has completed 1 year Oculoplastic Fellowship from the National University Health System in Singapore, then another year of Cornea Fellowship from Queen Victoria Hospital in the UK. He is an Ophthalmology Consultant at Chelsea and Westminster Hospital in London. He has published 16 papers in reputed peer reviewed journals and continues to serve as a Reviewer for few ophthalmic journals.

radomousa@hotmail.com

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