



Australasian College of Skin Cancer Medicine

President: Dr. Neil Chorley
Censor: Assist Prof Anthony Dixon (Australia)
Dr. Sharad Paul (New Zealand)
Hon. Secretary: Dr. Helena Rosengren

PO Box 1604
Sunnybank Hills QLD 4109
www.skincancercollege.com
karen@skincancercollege.com
Ph: 0414 910 355
Fax: 07 3273 1903
ABN: 16 122 917 337

Melanoma investigations

What scans or blood tests do I need if diagnosed with melanoma?

Patients are often concerned because their doctor excised their melanoma but did not order scans or X Rays or blood tests to further check the tumour.

Melanoma can spread to the liver, lymph nodes, lungs, brain - indeed many organs of the body. It is when melanoma spreads that it can become fatal. As such, patients sometimes expect their doctor will order scans of their liver, lungs and brain to look for early signs of spread.

Perhaps surprisingly, scans are NOT a routine part of managing melanoma patients. There are several reasons for this:

- 1) Unfortunately, when melanoma spreads around the body there are few interventions that can assist and no intervention has been shown to improve the long term survival of melanoma patients. If we could cure patients by finding early spread - then that would change things. When other cancers spread around the body, effective and curative treatments are sometimes available. Widespread melanoma does not have similar answers.
- 2) Sometimes melanoma patients have scans of organs like the liver where a lesion is noticed on the scan. They can then go on to have major liver surgery only to find that the lesion was harmless and had been there for ages and could have remained there. It is just that it was brought to everyone's attention and panic set in because the patient had a previous skin melanoma diagnosis. Indeed scanning melanoma patients frequently leads to surgery for such "false positives" and the complications and outcomes of such surgery is clearly unnecessary and unfortunate.
- 3) Scans are not very good at detecting small melanoma secondaries. Melanoma may have spread to another site and that new lesion may be the size of a pip in this distant location. Scans are not good at picking up such small lesions. As such, a scan being "clear" may not mean that the patient is truly clear of the disease. Patients cannot be advised they are "cured" of the melanoma forever just because they have clear scans.
- 4) The National Health and Medical Research Council (NHMRC) guidelines applicable to Australia and New Zealand have been updated in 2008. They do NOT recommend that melanoma patients be routinely scanned following diagnosis or at routine follow up appointments.

The story for scans is also true for blood tests. Blood tests have limited use and are not a routine component to managing or follow up of melanoma patients.

Indeed, simple skin checks for patients who have suffered melanoma has proven more useful than any scans or blood tests. A patient who has had a melanoma has a 13% chance of growing a 2nd melanoma in the next 10 years. Finding any 2nd melanoma early is vital to survival prospects. While blood tests and scans are not a routine component of melanoma follow up, skin checks are routine.

Do we ever order scans?

Rather than doing routine scans, doctors order blood tests and scans on their melanoma patients when symptoms or progress of the patient deem it appropriate. For example, if a patient who has had melanoma develops jaundice, a scan of the liver will often be ordered as well as liver blood tests. This will help identify what is going wrong with the liver, whether the melanoma is the likely cause and guide which treatments are now needed.

Don't worry if your doctor did not order blood tests, X Rays and scans for you after you were diagnosed with melanoma. These tests are not routine and are only ordered when necessary.

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