

19 Malignant melanoma, superficial spreading**Micro**

- This is a biopsy of skin showing an asymmetrical, compound, pigmented melanocytic lesion.
- The junctional component has both lentiginous and nested patterns with architectural atypia.
- There is marked cytological atypia.
- Pagetoid invasion is evident.
- The epidermis shows incipient ulceration.
- The growth phase is vertical and the Breslow depth is less than 1mm.
- The tumour invades the reticular dermis (Clark level 4).
- The mitotic rate is less than 1/mm².
- No lymphovascular or peri-neural invasion seen.
- There is associated brisk inflammatory response.
- There are no microsatellite or in-transit metastasis foci.
- Excision is complete with 1.6mm peripheral margin and 3.7mm deep margin.

Diagnosis

- Malignant melanoma, superficial spreading pT1

Further work/comment

- Confirmatory immuno-markers are S-100, Melan A and HMB45 in dermal component.
- The points that would be discussed in the dermatology MDT:
 - Type: This is the most common type of melanoma.
 - Growth phase, Breslow thickness and Clark level.
 - Ulceration.
 - Mitotic index.
 - Microsatellite/in-transit metastasis.
 - Lymphovascular and perineural invasion.
 - Tumour infiltrating lymphocytes.
 - Completeness of excision and margins status
 - Consider referral to regional centre for sentinel node sampling
 - Consider BRAF mutation testing of the biopsy if there is evidence of metastatic disease on imaging and no further biopsies can be carried out