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## Australia at cutting edge of melanoma treatment

Australian Dermatologists, Pathologists, Surgeons, and GPs are at the cutting edge of melanoma detection and treatment, according to the Australasian College of Dermatologists (ACD).

A recently published article in the *Australasian Journal of Dermatology*, 'The most common challenges in melanoma diagnosis and how to avoid them', indicates seven of the most common pitfalls in detecting melanoma\*, all of which are already being addressed to varying degrees in Australia.

ACD Honorary Secretary, Dr Stephen Shumack says that Australian medical professionals have already moved rapidly towards implementing many of the suggestions made by the authors of the article.

"Australia is the most advanced country in the world when it comes to melanoma diagnosis and treatment," says Dr Shumack.

"Diagnosis of melanoma is the subject of a lot of teaching and research in Australia.

"We have the earliest diagnostic rates, and the highest cure rates, as well as an educated and aware medical community and general public.

"This paper provides some insight into the problems in melanoma detection, and provides suggestions as to how to overcome these, but the Australian dermatological, surgical and GP community is well on its way towards addressing all of the issues."

The article suggests, for example, that a clinician should consider obtaining a biopsy of any clinically raised lesion that the patient describes as evolving.

"Clinicians in Australia, including GPs and Dermatologists, biopsy (take samples of) more lesions than the actual number of melanomas – about ten to twenty times more – so if there's a degree of suspicion then we err on the side of safety and biopsy for pathological examination," says Dr Shumack.

"The article also encourages the use of 'experienced' Pathologists for melanoma detection. Due to the high rates of skin cancer found in Australia, Pathologists here are very well versed in the detection of melanoma.

“The general public in Australia are indeed very well educated when it comes to skin cancer, and are able to help themselves by keeping a lookout for suspicious lesions and ensuring they have a skin check as a part of their regular check-up with their GP,” says Dr Shumack.

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## **MEDIA ENQUIRIES**

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\* According to the article ‘The most common challenges in melanoma diagnosis and how to avoid them’, as published in the *Australasian College of Dermatology* (2009), 50, pp1-15:  
“The most common scenarios resulting in misdiagnosis of melanoma are: (i) misdiagnosis of nodular melanoma by a dermatologist; (ii) misdiagnosis of nodular melanoma by a pathologist; (iii) incomplete biopsy; (iv) melanoma misdiagnosed as ‘dysplastic naevus involving margins’; (v) melanoma misdiagnosed as a Spitz naevus; (vi) unrecognized desmoplastic melanoma; and (vii) metastatic disease without a known primary.”