Full-Body Exam Finds More, Thinner Melanomas

BY MARY ANN MOON

In patients attending a general dermatology practice, most melanomas diagnosed during a 3-year period were not the presenting complaint, but were only discovered because a dermatologist performed a full-body skin examination, according to a recent report.

Such melanomas, discovered incidentally during an unrelated office visit, were more likely to be thinner or in-situ lesions than those that were inquired about by the patient or someone who observed them on the patient, said Dr. Jonathan Kantor and Deborah E. Kantor, C.R.N.P., of North Florida Dermatology Associates, Jacksonville.

More than half of melanomas were discovered by a dermatologist and had not been noted by the patient or another physician.

The U.S. Preventive Services Task Force has stated that current evidence is insufficient to recommend either for or against routine full-body melanoma screening, and previous studies of patients in tertiary referral centers have reported that physicians detect only 14%-34% of melanomas.

"Our aim was to determine the proportion of patients in a private dermatology practice in whom melanoma was detected but was not the presenting complaint. If a substantial proportion of melanomas are detected only after a dermatologist's examination, this may suggest that FBSE [full-body skin examination], and not simply a problem-focused approach, should at least be considered for selected patients," the researchers said (Arch. Dermatol. 2009;145:873-6).

The findings also "may help to promote education and encourage future patients to avail themselves of full-body skin examination," they added.

The investigators performed a retrospective case series of all patients diagnosed as having melanoma (51 cases) or melanoma in situ (75 cases) during a 3-year period. Patients were aged 15-92 years (mean age, 60 years).

A total of 56% of melanomas were discovered by a dermatologist and had not been noted by the patient, a spouse, a friend, or another physician. Similarly, 60% of the melanomas in situ were discovered by a dermatologist, they said.

"Moreover, we found that dermatologist detection was associated with thinner melanomas and an increasing likelihood of the melanoma being in-situ," they said.

"Thus, full-body skin examinations confer both an absolute benefit (detecting most melanomas) as well as a clinically significant marginal benefit (detecting melanomas with less tumor thickness). We hope that these findings will help spur large population-based studies in high-risk populations to develop an evidence-based approach to determining appropriate screening practices and intervals," the investigators added.

The researchers reported no financial disclosures. ■

Study Disputes Link Between Melanoma and Antioxidants

BY MARY ANN MOON

Antioxidant supplements do not appear to increase the risk of melanoma, according to a large, population-based study.

None of the exposure variables examined—overall antioxidant use, duration of use over the past 10 years, total dosage expressed in pill-years, or years of adult use during adulthood—correlated with melanoma risk in either men or women, said Dr. Maryam M. Asgari of Kaiser Permanente Northern California, Oakland, and her associates.

They undertook this study because the Supplementation in Vitamins and Mineral Antioxidants (SUVIMAX) study, a primary prevention trial published in 2007, found that daily oral supplementation with a combination of antioxidants raised the incidence of melanoma in women. The SUVIMAX findings were alarming, given that an estimated 48%-55% of American adults use supplements regularly, Dr. Asgari and her colleagues wrote.

They further examined the issue in a cohort of 69,671 adults who answered a 24-page questionnaire regarding health history, lifestyle factors, diet, supplement use, and cancer risk factors. They focused on the five antioxidants assessed in the SUVIMAX trial: vitamin C, vitamin E, zinc, beta carotene, and selenium.

Most of the study subjects (66%) were either current or former users of multivitamins. During 7 years of follow-up there were 461 incident cases of cutaneous melanoma.

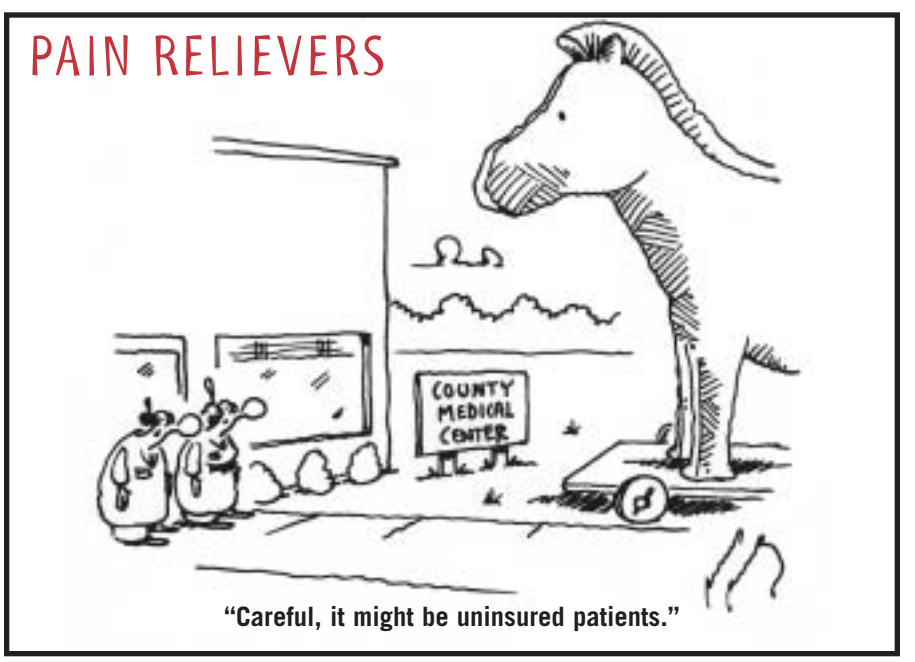
Antioxidants were not associated with the disease. "Specifically, in the highest dose category of multivitamins … there was no increased risk of melanoma. Results were similar in men and women," the investigators wrote (Arch. Dermatol. 2009;145:879-82).

Moreover, since many people take multivitamins plus additional beta carotene and selenium supplements, comparably high doses of these two nutrients were tested in a separate analysis. Again, no increased risk of melanoma was found and the results were the same for women and men.

It is likely that the SUVIMAX findings "could be explained by methodological shortcomings," Dr. Asgari and her associates wrote.

In that study, subjects answered only a single question pertaining to their lifetime sun exposure, and "the analysis was based on only 16 cases" of melanoma. In addition, the incidence of melanoma in the SUVIMAX population was only 25 cases per 100,000 person-years—one-fifth the rate in the current study.

The work of Dr. Asgari and her associates was supported in part by the National Institute of Arthritis, Musculoskeletal and Skin Diseases and the National Cancer Institute. No financial conflicts of interest were reported. ■



"Careful, it might be uninsured patients."