



Understanding malignant melanoma

Cancer Services

Produced: Jan 2023

Review: Jan 2026

Information for patients

Leaflet number: 535 Version: 9.1

What is malignant melanoma?

Malignant melanoma is a type of skin cancer that develops from melanocytes. Melanocytes are the skin cells that produce the pigment called melanin which helps protect the skin from sun damage. Malignant melanoma can arise either from a pre-existing mole or, more commonly, from normal-looking skin. It usually presents as a change in a mole or as a new dark patch of skin.

Although the cause is not fully understood there is evidence to suggest that ultraviolet (UV) rays from the sun can result in long-term damage to the skin, which may contribute to the development of malignant melanoma.

In general the risk of developing melanoma is greatest in white-skinned people, particularly those who have lots of moles and who burn easily and tan poorly in the sun. It is also more common in those who have a family history of melanoma, particularly in a close relative such as parent, brother or sister. This risk increases if more than one family member is affected.

How is malignant melanoma diagnosed?

If we suspect that you may have melanoma, the mole or area of skin will be removed together with a small margin of normal skin (usually 2 to 5 millimetres). You will be given a local anaesthetic injection to numb the area. The wound will be stitched and you will have a permanent scar. This procedure is called a **diagnostic excision biopsy**.

On rare occasions only a small sample, rather than the entire mole or area of skin, will be removed and this procedure is known as an **incisional diagnostic biopsy**.

The mole or area of skin will be sent for analysis and examination under a microscope.

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk



How is malignant melanoma diagnosed? (continued)

If the diagnosis of melanoma is confirmed, what further treatment you need will depend on how deeply it extends. The depth (thickness) of the melanoma is measured in millimetres. This is sometimes referred to as the **Breslow** thickness. This measurement also helps the doctors to determine the stage of your melanoma and recommend future treatment.

What is the treatment for malignant melanoma?

Your treatment plan will be discussed by the skin cancer multi-disciplinary team (MDT). This team meets regularly and consists of dermatologists, plastic surgeons, medical and clinical oncologists (specialist cancer doctors), plastic surgeons, a pathologist and a specialist nurse. Other healthcare professionals may also attend these meetings from time to time.

If melanoma is diagnosed as a result of the biopsy, it is likely that you will require a **wider excision**. This involves another operation to remove an extra margin of the skin from around the original melanoma site, which is again examined under a microscope. This reduces the risk of the melanoma recurring (coming back) at its original site.

If possible, the wound will be stitched closed although sometimes it is necessary to repair the area with a skin graft or other type of plastic surgery procedure. You may require time to get back to your usual routine, including taking time off work, depending on the type of surgery you have had. Your surgeon will advise you about this.

If your melanoma is **thin/early stage** your treatment will be the removal of up to a further 1 cm margin of normal skin. You will require follow-up appointments for one year.

If your melanoma is a **medium/high risk stage**, your doctor may recommend further investigations such as a sentinel lymph node biopsy (SLNB) or possible scans.

If any of these are recommended for you, you will be given information about them at your appointment.

What follow-up should I expect after treatment?

There is a chance that your melanoma may come back (recur) at the same site or spread from the skin to other parts of the body. Therefore you will be followed up regularly for the next five years (or one year if your melanoma is thin/early stage) and examined for any signs of recurrence or spread.

At each visit the site of the original melanoma will be examined to check for any sign of recurrence. You will also be examined to make sure you do not have any other unusual moles or worrying skin changes.

If your melanoma is **thin/early stage**, you will be followed up for one year and offered two six monthly appointments. If your melanoma is **medium/high stage** you will be followed up for a period of five years, with an appointment every three months to start with, increasing to every six months and then annually.

Should I examine myself between appointments?

We recommend that you check your skin for any new or changing moles every month.

Signs to look for are:

- an existing mole or dark patch that is getting larger or a new one that is forming
- a mole that has an irregular outline
- a mole that has changed in colour or has a mixture of different colours.
- a mole that has become inflamed, itches or bleeds.

If melanomas recur they may appear as lumps beneath the skin, often around the site of the original melanoma, or further up your arm or leg. This means they may not look like the original melanoma. The lump may appear the same colour as the surrounding skin and feel like a dried pea or a marble-sized, hard, smooth, round nodule, under the skin.

Melanoma can also spread to the lymph glands. Your doctor or nurse will show you how to examine your neck, armpits and groins for any enlargement of your lymph glands.

If you are worried, or have any questions, you should contact the skin cancer nurse specialist team, during office hours. The contact number is below.

Do not be embarrassed that you are causing extra work: we would much rather see you or discuss things with you on the phone, than have you worry, often unnecessarily, or risk delaying treatment.

Should I protect my skin from the sun?

Yes, you need to protect yourself against excessive exposure to the sun, even in the UK. It is advisable to protect yourself between April and September in the UK, and always when abroad in sunny climates.

For detailed information about sun protection, please read the booklet "Protecting your skin from the sun". If you do not have a copy, please ask your key worker for one.

Vitamin D advice

Avoiding sunlight exposure can lead to Vitamin D deficiency. As you have been diagnosed with melanoma and advised to protect your skin from the sun, we will be checking your Vitamin D level. If your level is low you are likely to be advised to take Vitamin D supplements which are widely available from supermarkets and chemists. Foods containing higher levels of Vitamin D include oily fish including salmon, sardines, mackerel, red meat, liver, egg yolks and fortified foods such as some fat spreads and breakfast cereals. Your healthcare team will give you more detailed advice depending on your level of Vitamin D.

Further information on Vitamin D is available at:

https://www.nhs.uk/conditions/vitamins-and-minerals/vitamin-d/

Coping with your diagnosis

Everyone reacts differently to being told that they have cancer. There is no right or wrong way to feel. Some of the feelings you may experience include shock, fear, anger, guilt and isolation. You should not expect to feel all of these and you may find that some times are more difficult than others, such as when you are first told that you have melanoma; and before your follow-up appointments.

The following advice may help:

- Try to understand as much as you can about melanoma and its treatment. Knowing about melanoma will help dispel myths and lessen fear.
- Write down any questions you have and bring them with you when you come to the clinic.
- Bring a friend or relative with you to the clinic to listen to what is said.
- Let family, friends and health professionals know how you feel. Do not bottle up your feelings.
- Allow yourself time to come to terms with the diagnosis. Set yourself achievable goals.
- Contact one of the national or local support groups listed at the back of this booklet. It can be a
 valuable source of reassurance and encouragement to know that someone else has been
 through something similar.

Who can I talk to?

- Your GP or district nurse
- **Skin cancer nurse specialist.** This is a nurse who has undergone specialist training and has expertise in skin cancer. The nurse works within the hospital as part of the skin cancer multidisciplinary team. The specialist nurse will be your **key worker**, co-ordinating your care and acting as a central contact. When you no longer need to come to the hospital, the role of **key worker** is handed over to someone more appropriate, such as your GP.

The specialist nurse can provide emotional support to help cope with the diagnosis of cancer, as well as providing information and advice about melanoma and its treatment, self-examination and sun protection measures. You can contact your key worker between hospital visits using the contact number at the end of this leaflet.

- **Local and national voluntary organisations.** These groups are a chance to meet or talk to others who have experienced cancer. Many offer one-to-one support, complementary therapies, trained counsellors and group meetings. You can contact them anonymously.
- **Spiritual help.** Many local religious groups offer help and support, including the hospital chaplaincy.



Sources of information and support

Sue Young Cancer Support

Telephone: 0116 223 0055

Website: www.sueyoungcancersupport..org.uk

Provides practical and emotional support to all patients and carers (aged 18 and over).

Macmillan Cancer Support

Produces a booklet "Understanding melanoma and treatment with surgery" that might be helpful.

Freephone: 0808 808 00 00

Website: www.macmillan.org.uk

Cancer Research UK

Telephone: 0808 800 4040

Website: www.cancerresearchuk.org

Changing Faces

A charity for people and families whose lives are affected by conditions, marks or scars that later their appearance. Runs a skin camouflage service.

Website: www.changingfaces.org.uk

Telephone: 0300 012 0275

Websites:

Wessex Cancer Trust www.wessexcancer.org.uk

NHS website www.nhs.uk

Key workers

If you have any questions about your operation please contact:

Skin Cancer Nurse Specialist team: 0116 258 6170

اگر آپ کو یہ معلومات کسی اور زیان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔ علی هذه المعلومات بلغةٍ أُخری، الرجاء الاتصال علی رقم الهاتف الذي يظهر في الأسفل જો તમને અન્ય ભાષામાં આ માહિતી જોઇતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ `ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ। Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk

