

EXPLORE A KEY SUSPECT IN ATOPIC DERMATITIS

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American Society for Dermatologic Surgery

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Psoriatic DiseaseBy [Kate Burba](#)

Source/Disclosures —

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SAVE

Cutaneous sebaceous carcinomas did not recur after Mohs surgery

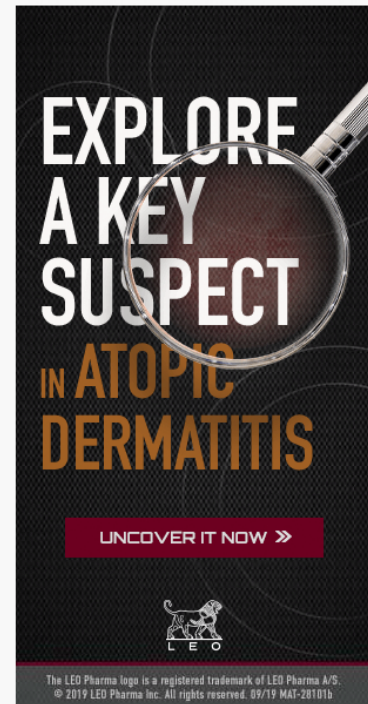
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Cutaneous sebaceous carcinomas are less aggressive than their ocular counterparts and may be treated sufficiently with [Mohs micrographic surgery](#), according to a presentation at the American Society for Dermatologic Surgery annual meeting.

“The treatment of cutaneous sebaceous carcinomas (cSCs) is surgical extirpation. Several studies have recently shown that Mohs micrographic surgery (MMS) is appropriate for the treatment of SCs,” **Kathryn A. Potter, MD**, assistant professor at Augusta University, and colleagues wrote. “The 8th edition of the American Joint Committee on Cancer directs the clinician to stage eyelid sebaceous carcinomas separately from cSCs. ... In December 2019, clinical practice guidelines for SCs were published in *Lancet Oncology* stating that cSCs can be staged.”

In a retrospective review, outcomes of [cSCs treated with MMS](#) were compared with previously published reviews to determine if staging would change patient treatment or prognosis. The 14 cSCs were smaller than 2 cm and did not invade beyond the subcutis or show perineural invasion. Average follow-up at 30 months yielded no tumor recurrence or regional metastases.

“Our experience is similar to several other recently published retrospective reviews with supporting evidence that cSCs are less aggressive than their ocular counterparts and also supporting the use of MMS for the treatment of these tumors,” Potter and colleagues wrote. “Should a clinician encounter a cutaneous sebaceous carcinoma with aggressive features, specifically large diameter or perineural invasion, it would be prudent to stage the tumors

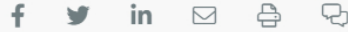


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according to the guidelines, but based on our limited, retrospective review, it appears that aggressive cutaneous sebaceous carcinomas are rare.”

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