

EXCISION OF SKIN LESIONS

Excision refers to removal of a skin lesion by completely cutting it out.

Why Do Skin Lesions Have To Be Excised?

A common reason why skin lesions are excised is to fully remove skin cancers such as basal cell carcinoma, squamous cell carcinoma or melanoma. If the cancer is not cut out it may spread to the surrounding skin and to other parts of the body (metastasize). Other reasons that skin lesions are excised include cosmetic appearance, to remove an inflamed cyst, or recurrent infection.

What Is Involved In Excision Of A Skin Lesion?

Your dermatologist will explain to you why the skin lesion needs excision and the procedure involved. You may have to sign a consent form to indicate that you consent to the surgical procedure. Advise your doctor if you are taking any medication (particularly aspirin or warfarin, which could make you bleed more), or if you have any allergies or medical condition. Remember to tell your doctor about any herbal remedies as a number of these can also lead to abnormal bleeding.

The most common type of excision is an elliptical excision. The ellipse is designed so that the resulting scar runs parallel with existing skin creases. This will ensure that the scar is as narrow and short as possible.

The area to be excised is marked with a colored pen. The dermatologist will then cut around and under the lesion with a scalpel and sharp scissors so that it is completely removed. The lesion is placed in formalin and sent to the pathology laboratory. The pathologist will examine the specimen and provide your doctor with a report a few days later.

There may be some bleeding in the area from where the lesion has been removed. The doctor may coagulate the blood vessels with a diathermy. This can make a hissing sound and a burning smell. The edges of the ellipse will then be sewn together to make a thin suture line. There may be two layers of sutures (stitches) a layer underneath that is absorbable and a layer of sutures on the surface which will need to be removed in 4-14 days. Occasionally special skin glue is used to join the edges together, instead of sutures. A dressing may be applied and Instructions should be given on how to care for your wound and when to get the stitches out.

What Are The Wound Care Instructions?

Your wound may be tender 1-2 hours after the excision when the local anaesthetic wears off, so leave the dressing in place for 24 hours or as advised by your dermatologist. Avoid strenuous exertion and stretching of the area until the stitches are removed and for some time afterwards.

If there is any bleeding, press on the wound firmly with a folded towel without looking at it for 20 minutes. If it is still bleeding after this time, seek medical attention.

Keep the wound dry for 48 hours. You can then gently wash and dry the wound. If the wound becomes red or very painful, consult your dermatologist as it could be infected. The scar will initially be red and raised, but usually reduces in color and size over several months.

Will I Have A Scar?

It is impossible to cut the skin without scarring in some way; however your dermatologist will try to excise the lesion in a way that will keep the scar to a minimum. Some people have an abnormal response to skin healing land these people may get larger scars than usual (keloid or hypertrophic scarring).