

this issue

Let us answer some questions you may have

- **Do all Congenital Melanocytic naevus require excision?**
- **What are Sebaceous naevus?**



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Sebaceous naevus: what are they and what is their importance?

Sebaceous naevus (of Jadassohn) are hamartoma's of sebaceous glands with hyperkeratotic apocrine glands and hair follicles. They are present in 0.3% of all newborn's.

They often occur on the scalp or face and can measure up to 10cm. Initially, they appear round small and pink, however by adolescence they appear verrucous and elevated. 10-15% of these will undergo malignant transformation by adult hood. These tumours are often Basal cell carcinomas however unusually they can sometimes develop aggressive carcinomas that may metastasis.

Recommendations are to remove sebaceous naevus before adolescence to reduce the risk of malignant transformation

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Congenital Melanocytic naevus: do they all require excision?

Congenital melanocytic naevus (CMN) are an abnormal collection of melanocytes in an ectopic location present at birth. 1% of infants are born with a CMN with the trunk and extremities being the most common location.

They are classified according to size:

1. Small <1.5cm
2. Intermediate 1.5 to 20cm
3. Giant >20cm or more than 2% total body surface area

Their appearance may change with age. After the first 6 months they grow proportionally with the child. Hair growth in the naevus develops around 1-2 years old and after 10 year they become elevated verrucous and hyperkeratotic. 80% of giant naevus have satellite lesions.

So do these lesions require removal? Small and intermediate naevus do not carry an increased risk of melanoma, so removal is for cosmetic reasons. Giant naevus on the other hand have a 17-fold increase risk of melanoma compared to the normal population. Unfortunately this risk is not decreased by removal of the lesion. However, due to the disfiguring nature of these lesions, removal is recommended followed by close surveillance.

Neurocutaneous melanosis is a condition where melanocytic lesions are present in the central nervous system. This can occur with giant CMN that are located in the midline and is diagnosed with an MRI. Unfortunately, once these become symptomatic it is usually fatal within 2 years.



WPRS IS CELEBRATING IT'S 2nd BIRTHDAY!!!

The WPRS team would like to thank you all for your continuing support over the past 2 years, and look forward to another exciting year ahead.