

AB149. SOH21AS108. The impact of wide local excision and sentinel node biopsy on outcomes of patients with melanoma over age 70

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Background: The incidence of melanoma is increasing in the elderly population, in whom prevalent comorbidities must be considered perioperatively. Despite developments in adjuvant therapy, wide local excision (WLE) +/- sentinel lymph node biopsy (SLNB) remains the cornerstone of treatment. This study aims to determine how age and associated comorbid factors influence surgical decision-making and subsequent outcomes for melanoma patients over the age of 70 years.

Methods: Data was collected retrospectively for all melanoma patients over the age of 70 treated at a single tertiary referral centre over 10 years. Demographics, comorbidities, diagnosis, surgical management details, disease-free (DFS) and overall survival (OS) were tabulated. The impact of age and comorbidities were analysed.

Results: A total of 107 patients met inclusion criteria. Median age was 79.33 (range, 70–96) years, and median Breslow Thickness was 1.45 (range, 0.02–22) mm. Excisional biopsy only was performed in 15% (n=16), with 85% (n=91) progressing to WLE. Patients who underwent WLE displayed increased DFS (P=0.003), with no impact on OS (P=0.716), and were significantly younger than those who only had excisional biopsy (P=0.003). Of those eligible

for SLNB (n=41), 53.7% (n=22) underwent the procedure. SLNB had no significant impact on DFS (P=0.633) or OS (P=0.222).

Conclusions: In the elderly melanoma patient cohort, WLE resulted in improved DFS, but had no effect on OS. Patients who are suitable surgical candidates should be offered WLE where possible, in an effort to reduce morbidity from recurrent disease.

Keywords: Aged; 70 and over; comorbidity; melanoma; mortality; sentinel lymph node biopsy (SLNB); wide local excision (WLE)

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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