

Identifying the Sentinel Lymph Node in Patients with Cutaneous Melanoma – Preliminary Report of a Private Clinic in Bucharest

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Abstract

Background: The accuracy of the staging, along with the reproductibility of intraoperative lymph car-tography, and lymph node biopsy in patients with malignant melanoma was unanimously validated in the last decade. This technique allows the discovery of lymph node micrometastases with the help of immunohistochemical methods. The goal of the present study is to present the experience of our clinic in identification and biopsy protocol of the lymph node.

Method: A year-long retrospective analysis was running between March 2019 - December 2019 concerning 57 patients with cutaneous melanoma on which detection and excisional biopsy of the lymph node was performed. The procedure was performed by the double method using vital dye and a radioactive tracer. Demographic information was filed, as well as data on location of primary tumors, tumor histology, and radioactivity level.

Results: The mean Breslow thickness of primary skin melanomas was 2.7 mm. At least one lymph node was identified in 56 of the 57 patients included in the study. Among those, 15 (26%) had at least one metastatic node. The mean number of excised lymph nodes per patient was 1.6.

Conclusions: The cartography and biopsy of lymph nodes need the involvement of a complex multi-disciplinary team made of nuclear medicine, surgery, and anatomopathology specialists. This way one provides both a correct staging of the patient with melanoma and access to adjuvant innovative therapies, thus considerably improving the prognosis.

Key words: melanoma, lymph node, lymph scintigraphy