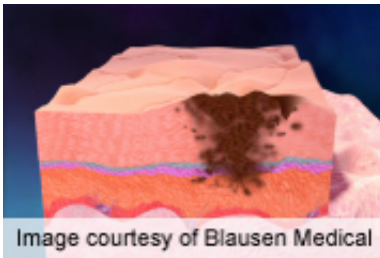


Dermatologist care tied to better self-detection of melanoma

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(HealthDay)—Patients with self-detected primary melanoma who have an established dermatologist are more likely to have thinner lesions at the time of diagnosis, according to research published in the May issue of the *Journal of the American Academy of Dermatology*.

Michelle Y. Cheng, of the University of Pittsburgh School of Medicine, and colleagues conducted a retrospective cross-sectional study of 388 patients with primary [melanoma](#) to assess the association between the characteristics of dermatologic care and melanoma depth at diagnosis.

The researchers found that patients with an established [dermatologist](#), compared with those without an established dermatologist, were more likely to receive a diagnosis of melanoma in situ (63.6 versus 44.5 percent; $P = 0.001$) and have thinner invasive melanoma (0.48 versus 0.61 mm; $P = 0.003$). These patterns were observed for patients with self-

detected, but not dermatologist-detected, melanoma. Self-detected melanomas were in situ for 59.0 percent of [patients](#) with an established dermatologist, compared with 37.0 percent of those without an established dermatologist (P = 0.006). Melanoma invasiveness or depth was not related to time from last dermatologic examination or wait time for an appointment.

"Education obtained at the dermatology appointment may improve early self-detection of melanoma, and having an established dermatologist may facilitate earlier evaluation of concerning lesions," the authors write.

More information: [Abstract](#)
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