

# Skin cancer: New treatments improve prognosis, but prevention is still essential

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Immunotherapy has revolutionized the treatment of inoperable, metastasised skin cancer. More than 50% of patients are still alive more than five years after treatment, whereas, 10 years ago, this figure was not

even 5%. The experts from the Comprehensive Cancer Center (CCC) of MedUni Vienna and Vienna General Hospital are also playing a major role in researching and developing new treatment strategies. For example, the working group from the Department of Radiation Oncology at MedUni Vienna and Vienna General Hospital has been heavily involved in drawing up the new, recently published international guidelines for treating brain metastases from melanoma. Nevertheless, the experts still stress that the most sensible strategy is to prevent skin cancer by protecting yourself from the sun and having regular check-ups with a dermatologist.

Skin [cancer](#) is divided into two distinct groups, non-melanoma-[skin](#)-cancer, which include [squamous cell carcinoma](#) and [basal cell carcinoma](#), and melanoma. Since melanoma is much more aggressive and metastasises quickly, it is regarded as more dangerous. Squamous cell carcinoma develops more slowly and is less likely to metastasise but, if it does, the prognosis is similar to that of melanoma and therefore poor. Both types of cancer are surgically treatable, if caught at an early stage.

Out of around 2,200 people who are diagnosed with melanoma in Austria every year, around 20% develop metastases. And the number is rising.

## **Harmful recreational behavior—there is no such thing as a "healthy tan"**

Christoph Höller, Department of Dermatology of MedUni Vienna and Vienna General Hospital and member of the CCC, attributes the rising number of cases worldwide to current recreational behaviors. He says: "There is no such thing as a healthy tan. If you want to prevent [skin cancer](#), you must consistently protect your skin from the sun. That means

avoiding the sun, covering your skin, and, if that is not possible, using sunscreen. This is backed up by international studies."

## Combination therapies

Since the new immunotherapies fail to have much effect, if any, in around 50% of patients with metastasised melanoma, the CCC experts are involved in numerous studies, mostly joint international studies, to test new treatment strategies using combination therapies with several checkpoint inhibitors and/or kinase inhibitors.

## Innovative radio-oncology concepts

However, the experts are not only combining different drugs. Radiotherapy is often used as well. For example, to combat extensive lymph node metastases or to relieve pain in bone metastases. The best-known application is the "Gamma knife" for treating brain metastases.

Cora Waldstein, Department of Radiation Oncology of MedUni Vienna and Vienna General Hospital and member of the CCC, explains: "In-depth experience and know-how are required to treat metastasised melanoma successfully using radiotherapy. Due to the high number of patients, we are constantly building up both these aspects. This expertise is recognized in the professional world and that is why our working group has played a major role in issuing the new international guidelines for treating brain metastases of [melanoma](#)."

Provided by Medical University of Vienna

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