



"Comprehensive Family Skin Care"

• Medical • Surgical • Cosmetic

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## Skin Cancer Treatment Options

1) Excision with sutures which has a 95% cure rate and will leave a line scar. This is an in-office procedure and the site is numbed locally. To help cut down on bleeding during the procedure, you may be asked to wait in the lobby 45 minutes to an hour depending on how much you bleed while numbing. The site is excised through dermis down to deep subcutaneous tissue and superficial non-muscle fascia. You will have two layers of sutures. The bottom layer will dissolve but can take up to 6 months. The top layer of sutures needs to be removed. The specimen will be sent off to the lab to check on margins to make sure that the cancer was fully removed.

2) Electrodesiccation and curettage (ED&C) which has a 95% cure rate and will leave a circular dipped in scar that will improve slightly with time. The site is numbed locally and the cancer growth is "scooped out" using an instrument called a curette. The curette resembles a sharp spoon. Low-level electricity (electrodesiccation) is used to kill cancer cells at the edges of the growth and to control bleeding during the procedure. These steps are repeated 3 times during the procedure.

3) Radiation which has a 92% cure rate. Radiation is the use of high-dose x-rays or other high-energy rays to kill cancer cells and shrink tumors. Side effects include erythema (redness), potential ulceration (localized and temporary), potential skin discoloration (temporary lighter or darker skin at the site), loss of hair at the treatment location, and potential for skin cancer 20 years later at the treatment location. This treatment requires you to come in three times a week for three weeks (9 treatments).

4) Moh's surgery which has a 98% cure rate and will leave a line scar. This procedure is not done in our office. You will be referred out to a Mohs surgeon. Mohs micrographic surgery is a highly specialized procedure for the removal of skin cancer. Usually, a pre-op appointment with the Mohs surgeon will be followed by a surgical appointment. There are three surgical steps to Mohs micrographic surgery: (1) the surgical removal of the visible portion of the skin cancer with excision or scraping; (2) the surgical removal of a thin layer of tissue at the bed of the cancer, and (3) examination of all of the excised tissue under the microscope. These 3 steps comprise of 1 stage. Multiple stages, each usually separate by an hour, will occur during the surgical appointment until all of the skin cancer is removed. Closure of the defect (hole where the cancer is present) will then occur at the Mohs surgeon or at another surgeon's office that day or later in the week.

5) Imiquimod cream which has a 70-80% cure rate. A thin layer of imiquimod is applied to the cancerous lesion(s) at night Monday-Friday (off on the weekends). Stop one week before the return appointment. To use, poke a hole with a pin into the packet and apply a very thin layer. One packet should last 2 weeks (despite the label stating 1 application). Imiquimod cream works by causing the body's immune system to attack the abnormal cells. During this process, even previously normal appearing skin may turn red and/or scaly if the cells are abnormal under the skin. This process does not cause scarring but can cause temporary redness and irritation, usually with no pain despite the redness.