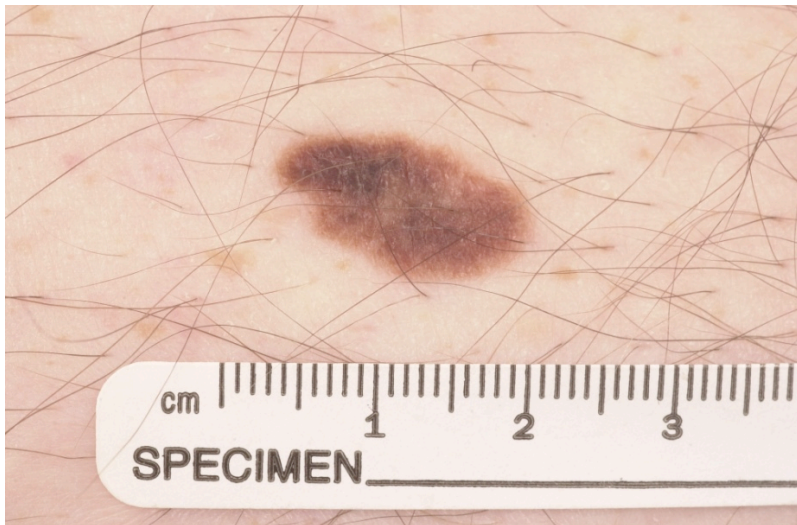


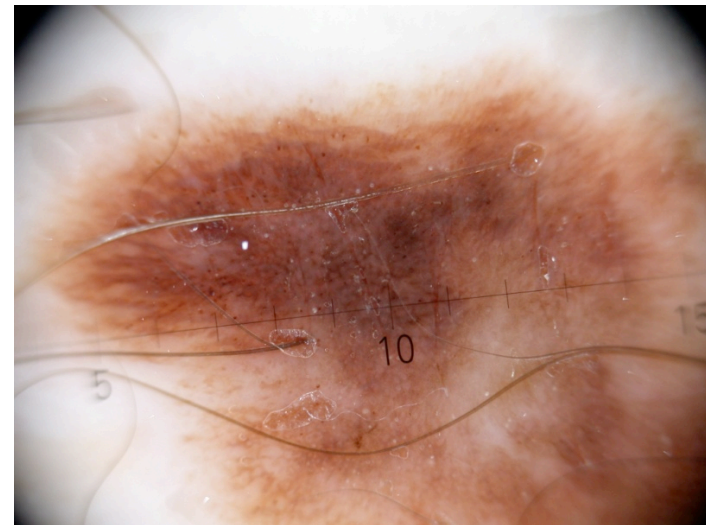
**FUNDAMENTALS:**  
Subtypes of Melanoma

## Superficial spreading melanoma (SSM)

- Most common type (60%), peaks in adults 40-60 years
- Usually found on trunk in men, lower legs in women.
- Irregularly pigmented, poorly circumscribed; usually >6mm.  
“Red, white, and blue” tumor.



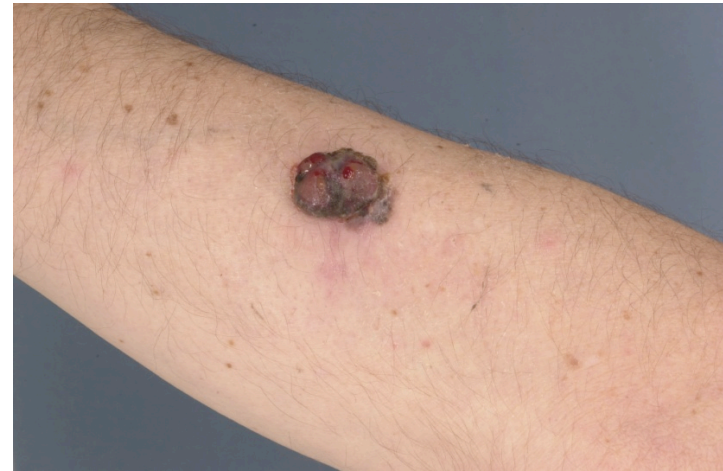
(courtesy of Dermatology Clinic: Bellevue Hospital Center)



On dermatoscopy

## Nodular melanoma (NM)

- 20% of melanoma cases, peak: adults 40-60 years
- Usually a circumscribed dark-brown papule or nodule; frequently ulcerated
- Vertical growth > horizontal spread, thus typically diagnosed at a thick stage and carries the worst prognosis



(courtesy of Dermatology Clinic: Bellevue Hospital Center)

## Lentigo maligna melanoma (LMM)

- 10% of cases, in older adults (>60 years);
- Often on the face, related to chronic light exposure
- Large macule with irregular pigment, may have areas of regression
- By definition, LMM requires development of clinical nodule or tumor invasion into the dermis
- Long vertical growth phase, thus carries better prognosis



(courtesy of Dermatology Clinic: Bellevue Hospital Center)

# Acral lentiginous melanoma

- 5% overall, but 30% of melanomas in dark-skinned individuals (ex. African-Americans, Asians)
- Develops in areas without hair follicles, such as the palms or soles
- Present with late / advanced stage of disease



(courtesy of Dermatology Clinic: Bellevue Hospital Center)



# Acral lentiginous melanoma – variants

## Subungual melanoma

- Presents as a dark streak under the nail; pigment streaks in the nail fold (“Hutchinson sign”) extending to the finger tip



(courtesy of Dermatology Clinic: Bellevue Hospital Center)

## Digital melanoma

- found on tips of toes or fingers

## **Amelanotic malignant melanoma**

- Skin-colored or pink
- More often nodular or subungual, but can be any type
- Difficult to recognize: the differential diagnosis includes basal cell carcinoma, vascular tumors, Spitz nevus