Letter to Dermatology

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Practical Considerations of Melanoma/Skin Cancer Screening Clinics

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I read with interest the publication by Rampen et al. on 'Practical considerations of melanoma/skin cancer screening clinics'. It was of note that in his last sentence Dr. Rampen suggested that the screening of melanoma would be difficult in the UK. I would refer both Dr. Rampen and other readers of Dermatology to our recent publication in the British Medical Journal. In this publication we report on the results of our melanoma early detection campaign which was begun in 1985. In summary, the careful audit of all melanoma patients presenting in Scotland in the 5 years prior to and after education in 1985 shows that following public education initiatives the proportion of melanomas thicker than 3.5 mm in females has gone down steadily, and the mortality trends for females are now also falling. Unfortunately, this has not been the case in males, and clearly other approaches to public education are required.

What Dr. Rampen and others who run screening clinics must demonstrate is that screening clinics of the type he advocates do result in patients coming forward with thinner tumours which

have a greater likelihood of cure, and in time that the introduction of screening clinics is associated with falling mortality trends from melanoma. Feasibility is one thing, efficacy is another.

Reference

MacKie RM et al.: Audit of public education to encourage earlier detection of malignant melanoma. Br Med J 1992;304:1012-1015.

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