

SIGN 140

Management of primary cutaneous squamous cell carcinoma *A national clinical guideline*



Background

Skin cancers are a major and increasing health burden in our ageing population. Cutaneous squamous cell carcinoma (SCC) has increased in incidence by more than 50% in the 10-year period from 2001 to 2011. Whilst many SCC are low-grade and readily treated with surgical excision, there remains an important minority that grow rapidly, are highly invasive and carry a risk of metastasis and death. The overall rate of metastasis is low (<5%) but, where distant metastases are present, the five-year survival is poor at only 25-40%. Treatment options are limited once distant metastasis or unresectable locoregional recurrence has developed, so it is important that patients with high-risk SCC are discussed at the skin cancer multidisciplinary (MDT) meeting to ensure adequate initial treatment.

Patients with compromised immunity due to long-term immunosuppressive therapy, such as following organ transplantation, or as treatment for chronic inflammatory disease, or those patients with a disease that causes immune compromise, such as haematological cancers, will commonly develop multiple primary SCC tumours, sometimes very large numbers of SCC, with the potential for significant surgical morbidity and associated health costs. These patients may have a 150-fold increased risk for SCC and should receive specialist care.

The need for a guideline

Treatments for SCC are variable and currently undertaken by a wide variety of doctors: general practitioners, dermatologists, radiotherapists and surgeons (general, plastic, oculoplastic, oral and maxillofacial or ear nose and throat). Consequently, there is a wide variation in management of patients with SCC across Scotland, both in treatments given and in referral rates to the skin cancer MDT.

The challenge for healthcare professionals is to...

- identify the few patients with the highest risk SCC who require urgent and often aggressive management and to distinguish this group from the great majority with low-grade tumours and a good prognosis
- direct available resources to the management of patients with high-risk SCC appropriately, thus reducing the incidence of metastatic SCC
- reduce variability amongst practitioners currently managing patients with SCC
- reduce regional differences in those patients with SCC that are referred to the skin cancer MDT
- overcome the limitations of the current SCC staging system, which does not efficiently identify those SCC most likely to metastasise.

Remit

This guideline provides recommendations for referral, management and follow up of patients aged 18 years and over with primary invasive SCC, including SCC arising:

- on both sun-exposed (SE) and non-SE sites
- in immunocompetent or immunosuppressed patients
- on high-risk sites including the ear, lip and scars
- in Bowen's disease
- in chronic wounds or areas of chronic inflammation.

The guideline addresses pathological, clinical and tumour features, or combination of features, that best facilitate risk stratification in patients with primary invasive cutaneous SCC.

It includes a management algorithm and pathological reporting proforma.

Potential users

This guideline will be of interest to dermatologists, histopathologists, oculoplastic, ear nose and throat, oral and maxillofacial and plastic surgeons, skin cancer clinical nurse specialists and oncologists, general practitioners and patients and their families.

Implementing this guideline

The implementation strategy for this guideline encompasses:

- identification of the key recommendations that should be prioritised for implementation
- an economic impact assessment of recommendations likely to have significant resource implications
- key points for audit
- guideline and supporting materials, including a patient version, available to download from the SIGN website
- dissemination of a quick reference guide to all appropriate healthcare professionals
- electronic dissemination of the full guideline to all NHS Boards
- awareness raising events at conferences for the British Association of Dermatologists and the British Association of Oral and Maxillofacial Surgeons, in July 2014
- iPhone, iPad and Android apps.



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