

Abbreviations and glossary

Abbreviations

AJCC	American Joint Commission on Cancer	GP	General practitioner
ALM	Acral lentiginous melanoma	HPF	High power field
AMR	Amrubicin	HRT	Hormone replacement therapy
APR	Abdomino perineal resection	IARC	International Agency for Research on Cancer
ARM	Anorectal melanoma	ILI	Isolated limb infusion
ATBC	Alpha-tocopherol beta carotene	ILP	Isolated limb perfusion
BAPS	British Association of Paediatric Surgeons	KM	Kaplan Meier
BSC	Best supportive care	LD	Limited disease
BSI	Brief symptom inventory	LDH	Lactate dehydrogenase
Bx	Biopsy	LM	Lentigo maligna
CAM	Complementary and alternative medicine	LMM	Lentigo maligna melanoma
CBT	Cognitive behavioural therapy	LYS	Life-year saved
CD4	Co-receptor for T cell receptor	M	Metastases
CD8	Co-receptor for T cell receptor	MDC	Multidisciplinary care
CHART	Continuous hyper-fractionated accelerated radiotherapy	MDT	Multidisciplinary team
CI	Confidence interval	MM	Melanoma
CM	Cutaneous melanoma	MMC	Mitomycin
CMN	Congenital melanocytic naevi	MSG	Melanoma study group
CO2	Carbon dioxide	MR	Mitotic rate
CT	Computed tomography	MRI	Magnetic resonance imaging
CXR	Chest x-ray	MS	Median survival
DALY	Disability adjusted life year	MSLT-I	International multicentre randomised controlled trial
DFI	Disease free interval	N	Regional lymph nodes
DIF	Diffuse interstitial fibrosis	NCCN	National Comprehensive Cancer Network
DKG	German Cancer Society	NHMRC	National Health and Medical Research Council
ED	Extensive disease	OCA	Vincristine, adriamycin and cyclophosphamide
ELCAP	Early lung cancer action project	OCP	Oral contraceptive pill
FDA	Food Drug Administration	OR	Odds ratio
FDG-PET	Fluoro-deoxy glucose PET	PAM	Primary acquired melanoma
FNA	Fine needle aspiration	PE	Cisplatin with etoposide
FU	Follow up	PET	Positron emission tomography
G-CSF	Granulocyte colony stimulating factor	PI	Cisplatin with irinotecan
GM-CSF	Granulocyte-macrophage colony stimulating factor	POHEM	Population health model

POMS	Profile of mood states	T	Primary tumour
PS	Performance status	TIL	Tumour infiltrating lymphocytes
QOL	Quality of life	TMD	Total mood disturbance
RCT	Randomised clinical trial	TNFα	Tumour necrosis factor α
RPA	Recursive partitioning analysis	TROG	Trans-Tasman Radiation Oncology Group
RR	Relative risk	Tx	Therapy
RRLCA	Relative risk for lung cancer	UICC	International Union Against Cancer
RT	Radiotherapy	USS	Ultrasound study
RTC	Randomised controlled trial	UV	Ultraviolet radiation
SLN	Sentinel lymph node	VA	Visual acuity
SLNB	Sentinel lymph node biopsy	WBRT	Whole brain radiation therapy
Solaria	Tanning or sunbeds	WHO	World Health Organization
SCLC	Small cell lung cancer	WLE	Wide local excision
SIR	Standardized incidence ratios	YLD	Years lost due to disability
SPF	Sun protection factor	YLL	Years of life lost
SRS	Stereotactic radio-surgery		
SVCO	Superior vena cava obstruction		

Glossary

Actinic keratosis	A precancerous condition. Consists of thick, scaly patches of skin. Also called solar or senile keratosis.
Adjuvant therapy	Additional treatment that is added to increase the effectiveness of the main treatment.
Aetiology	The cause or origin of disease.
Allied health professional (AHP)	One of the following groups of healthcare workers: physiotherapists, occupational therapists, art therapists, chiropodists/podiatrists, dieticians, drama therapists, music therapists, orthoptists, paramedics, prosthetists/orthotists, radiographers, speech and language therapists.
Anaesthetic	A drug that is taken to stop a person feeling pain during a medical procedure. A local anaesthetic numbs only a part of the body; a general anaesthetic causes a person to lose consciousness for a period of time.
Atypical naevi	A condition where a person has a number of moles that are generally larger than ordinary moles and have irregular and indistinct borders. Their colour is frequently not uniform and ranges from pink to dark brown; they are usually flat, but parts may be raised above the skin surface. If the condition runs in the family, it may be called familial dysplastic naevus syndrome.
Autosomal	Refers to a chromosome that is not involved in determining sex. If a disorder is autosomal it affects both males and females equally.

Basal cell carcinoma	A type of skin cancer that arises from the basal cells, small round cells found in the lower part (or base) of the epidermis, the outer layer of the skin.
Benign	Not cancerous; not malignant
Biopsy	Removal of a sample of tissue or cells from the body to assist in the diagnosis of a disease.
Brachytherapy	Radiotherapy delivered by a temporary or permanent implant of radioactive material into a tissue or organ.
Breslow thickness	A measuring scale of thickness for malignant melanomas, measured from the top layer of skin to the bottom of the tumour. The deeper the melanoma has grown, the more likely it is that some cells may have spread through the blood stream or lymphatic system.
Cancer	Growth of altered body cells that keep on growing and which is able to spread from where it started to another part of the body.
Carcinoma	Cancer of the skin tissue that covers all the body organs. Most cancers are carcinomas.
Cells	The 'building blocks' of the body. A human is made of millions of cells which are adapted for different functions. Cells are able to reproduce themselves exactly unless they are abnormal or damaged, as are cancer cells.
Chemoprophylaxis	The use of a drug or chemical to prevent future occurrences of a disease.
Chemotherapy	The use of drugs that kill cancer cells, or prevent or slow their growth.
Clinical oncologist	A doctor who specialises in the treatment of cancer patients, particularly through the use of chemotherapy, by may also use radiotherapy.
Clinical oncology	The specialist treatment of cancer patients, particularly through the use of chemotherapy, but may also be through the use of radiotherapy.
Cohort studies	Research studies in which groups of patients with a particular condition or specific characteristic are compared with matched groups who do not have it.
Computed tomography (CT)	An x-ray imaging technique.
Cytopathologist	A doctor who specialises in the study of disease changes within individual cells or cell types.
Cytotoxic	An agent that kills cells.
Dermatologist	A doctor who specialises in the diagnosis and treatment of skin disorders.
Dermatology	The specialist treatment of skin disorders.

Dermatopathologist	A pathologist with special training and expertise in the diagnosing of skin diseases.
Dermatopathology	The study of the pathology of skin.
Dermoscope	A tool like hand-held microscope used by doctors to view a mole or suspicious spot on living skin.
Dermoscopy	Observing the skin directly using a special magnifying lens, usually performed on a mole or suspicious spot on living skin.
Dermis	The lower or inner layer of the two main layers of tissues that make up the skin.
Diagnostic radiographer	The role of the diagnostic radiographer is to work closely with other specialists, to provide safe and accurate imaging examinations, to give patients information and support and to discuss possible side effects and care.
Diathermy treatment	The use of a direct current electrical apparatus to ablate skin cancer and related dysplasias.
Distant spread	See metastasis
Ear, nose and throat (ENT)	Diagnosis and treatment of diseases of the ear, nose and throat.
Epidemiology	The study of populations in order to determine the frequency and distribution of disease and to measure risks.
Excision	Removal of tissue by surgery.
Fine needle aspiration cytology (FNA)	The use of a fine needle to biopsy a tumour or lymph node to obtain cells for cytological confirmation of diagnosis.
Hapū	Sub-tribe
Histology	The study of body tissue and cells by examination under a microscope to find out what type of body tissue it is, or if a cancer, what type of body cells the cancer cells look like most.
Histopathologist	A doctor who specialises in examining tissue samples microscopically in order to make a diagnosis and ensure tumour excision is complete.
Histopathology	The study of microscopic changes in diseased tissues.
<i>In situ</i>	Localised and confined to one area; often used to describe a cancer that has not spread.
Iwi	Tribe
Isolated limb infusion	A technique that may be used to deliver anticancer drugs directly to an arm or leg. The flow of blood to and from the limb is stopped temporarily and anticancer drugs are injected directly into the blood of the limb. This allows the person to receive a high dose of drugs in the area where the cancer occurred.

Isolated limb perfusion	A technique in which blood vessel surgery is used to temporarily isolate the circulation of an arm or leg from the rest of the body. The blood is mixed with high doses of chemotherapy drugs, recirculated through a heart-lung machine, and heated for a period of time to enhance the drug's potency. The treated blood is recirculated to the affected limb.
Kaupapa Māori	Incorporating Māori culture and belief systems.
Kaitiaki	Carer
Laser therapy	The use of laser technology to ablate skin cancer and related dysplasias.
Lentigo maligna	Flat, mottled, tan-to-brown freckle-like spots with irregular borders, usually appearing on the face or other sun-exposed areas of older persons, which typically enlarge slowly for many years before cancer appears. Also known as Hutchinson's or melanotic freckle.
Lesion	An area of abnormal tissue.
Local recurrence	Local persistence of primary tumour due to incomplete excision.
local metastasis	Development of separate melanoma colonies due to lympho-vascular metastasis despite complete excision of the primary tumour; including 'in transit metastases' and 'satellitosis'.
Lymphadenopathy	Disease or swelling of the lymph nodes.
Magnetic resonance imaging (MRI)	A non-invasive method of imaging which allows the form and metabolism of tissues and organs to be visualised (also known as nuclear magnetic resonance).
Malignant	Cancerous. Malignant tumours can invade and destroy nearby tissue and spread to other parts of the body.
Mana	Power, respect, status
Margin	The edge or border of the tissue removed in cancer surgery.
Maxillofacial	The speciality that combines full surgical training with dental expertise for the treatment of diseases, injuries, tumours and deformities of the face and jaws.
Medical oncology	The specialist treatment of cancer patients through the use of chemotherapy and for some tumours, immunotherapy.
Melanocyte stimulating hormone	Melanocyte stimulating hormone is derived from the pituitary gland and keratinocytes amongst other cells and is capable of stimulating melanin production by melanocytes to increase pigmentation.
Melanoma	A form of skin cancer that arises in melanocytes, the cells that produce pigment.
Meta-analysis	The statistical analysis of the results of a collection of individual research studies in order to add the findings together.
Metachronous	At different times.

Metastases	Also known as 'secondaries'. Tumours or masses of cells that develop when cancer cells break away from the original (primary) cancer and are carried by the lymphatic and blood systems to other parts of the body.
Minimum dataset	A widely agreed-upon and generally accepted set of terms and definitions making up a core dataset acquired for medical records and used for developing statistics for different types of analyses and users.
Mohs surgery	A surgical technique used to treat skin cancer. Individual layers of cancerous tissue are removed and examined under a microscope one at a time until all cancerous tissue has been removed.
Morbidity	A diseased condition or state.
Mortality	Either (a) the condition of being subject to death or (b) the death rate, which reflects the number of deaths per unit of population in any specific region, age group, disease or other classification, usually expressed as deaths per 1000, 10,000 or 100,000.
Noa	Ordinary, safe
Neoplasm	An abnormal mass of tissue that results from excessive cell division.
Occupational therapist	A health professional trained to help people who are ill or disabled learn to manage their daily activities.
Oculoplastic surgeon	A doctor who specialises in the restoration, reconstruction, correction or improvement of the shape and appearance of the eye.
Odds ratio	The ratio of a part to the remainder. It is used to express the chance that a particular outcome will occur.
Oncologist	A doctor who specialises in treating cancer.
Oncology	The study of the biological, physical and chemical features of cancers. Also the study of the causes and treatment of cancers.
Palliative	Anything that serves to alleviate symptoms caused by the underlying cancer but that is not expected to cure it.
Palliative care	Active, holistic care of patients with advanced, progressive illness that may no longer be curable. The aim is to achieve the best quality of life for patients and their families. Many aspects of palliative care are also applicable in earlier stages of the cancer journey in association with other treatments.
Pathologist	A doctor who examines cells and identifies them. The pathologist can tell where in the body a cell comes from and whether it is normal or a cancer cell. If it is a cancer cell, the pathologist can often tell the type of body cell from which the cancer developed. In a hospital practically all the diagnostic tests performed with material removed from the body are evaluated or performed by a pathologist.
Perineural	Around a nerve or group of nerves.
Physiotherapist	A specialist trained in using exercise and physical activities to condition muscles and improve level of activity.

PICO	Populations, interventions, comparisons, outcomes
Plastic surgeon	A doctor who specialises in surgery to correct damage to the skin. For example, reducing the amount of scarring or disfigurement that may happen because of surgery to treat a skin tumour.
Positron emission tomography (PET)	A highly specialised technique using a radioactive tracer to produce a computerised image of body tissues to find any abnormalities. PET scans are sometimes used to help diagnose cancer.
Precancerous	A term used to describe a condition that may (or is likely to) become cancer. Also called premalignant.
Prognosis	A prediction of the likely outcome or course of a disease, the chance of recovery or recurrence.
Prognostic factor	Patient or disease characteristics, for example age or co-morbidity, which influence the course of the disease under study.
Protocol	An agreed policy that defines appropriate action.
Psychological	Adjective of psychology, which is the scientific study of behaviour and its related mental processes. Psychology is concerned with such matters as memory, rational and irrational thought, intelligence, learning, personality, perceptions and emotions and their relationship to behaviour.
Psychologist	A specialist who can talk with patients and their families about emotional and personal matters, and can help them make decisions.
Psychosocial	Concerned with psychological influences on social behaviour.
Radiologist	A doctor who specialises in creating and interpreting pictures of areas inside the body. An interventional radiologist specialises in the use of imaging techniques to assist treatment, for example, the insertion of intravenous catheters.
Radiology	The use of radiation (such as x-rays) or other imaging technologies (such as ultrasound and magnetic resonance imaging) to produce images to assist in diagnosis and treatment of disease.
Radiotherapy	The use of radiation, usually x-rays or gamma rays to kill cancer cells and treat tumours.
Randomised controlled trial (RCT)	A type of experiment that is used to compare the effectiveness of different treatments. The crucial feature of this form of trial is that patients are assigned at random to groups that receive either the interventions being assessed or control treatments. RCTs offer the most reliable (i.e. least biased) form of evidence of effectiveness.
Scintigraphy	A diagnostic method. A radioactive tracer is injected into the body. The radiation it sends out produces flashes of light on a scintillator (instrument used to detect radioactivity), and they are recorded. Also called radionuclide scanning.
Sensitivity	The proportion of people with a disease who have a positive test for the disease.

Sentinel (lymph) node biopsy	Removal and examination of the sentinel node(s) (the first lymph node(s) to which cancer cells are likely to spread from a primary tumour). To identify the sentinel lymph node(s), the surgeon injects a radioactive substance or blue dye, or both, near the tumour. The surgeon then uses a scanner to find the sentinel lymph node(s) containing the radioactive substance or looks for the lymph node(s) stained with dye. The surgeon then removes the sentinel node(s) to check for the presence of cancer cells.
Specificity	The number of people without a disease who have a negative test. (A specific test will rarely misclassify people with a disease as being diseased).
Supportive care	Care that helps the patient and his or her family and carers to cope with cancer and its treatment and in the case of the family and carers, with bereavement. It aims to help the patient maximise the benefits of treatment and to provide the best possible quality of life.
Surgical oncologist	A doctor who specialises in using surgery to treat cancer.
Synchronous	At the same time.
Systemic therapy	Treatment that reaches and affects cells throughout the body rather than targeting one specific area; for example, chemotherapy.
Therapeutic radiographer	The role of the therapeutic radiographer is to work closely with other specialists, to deliver the radiotherapy as prescribed, to give patients information and support and to discuss possible side effects and care.
Tapu	Sacred, forbidden, special
Topical therapy	Treatment with drugs in a lotion, ointment or cream applied to the skin.
Tumour	A mass of excess tissue that results from abnormal cell division. Tumours perform no useful body function.
Whānau	Family, community
Whānau ora	Family wellness

Adapted from Appendix 6, *the Guidance on cancer services: Improving Outcomes for people with skin tumours including melanoma. The Manual*, February 2006. Developed by the National Collaborating Centre for Cancer (NHS).

Index

- abbreviations 209–10
- ABCD(E) rule 27
- abdomino-perineal resection (APR) 132, 134
- accuracy of detection 6–7
- acral lentiginous melanoma (ALM) 28, 46, 74, 75, 203
- acral lentiginous melanoma *in situ* 46, 203
- actinic keratosis 210
- acupuncture 163
- adjuvant radiation therapy 87, 88, 137
- adjuvant systematic therapy 93–4
 - evidence summary 93
 - recommendations xxx, 94
- adjuvant therapy 147, 210
- aetiology 210
- age
 - and anorectal melanoma (ARM) 131
 - and congenital melanocytic naevi patients 9
 - and desmoplastic melanoma 129
 - incidence rates xiii–xiv
 - and prognosis 158
 - risk factors 15, 145, 153
 - and sun exposure 1, 2
 - and superficial spreading melanoma (SSM) 27
- allied health professional (AHP) 210
- amelanotic melanoma 76
- American Joint Commission on Cancer (AJCC)
 - Melanoma Staging Committee 23–6
- amputation 75, 88
- anaesthetic 210
- animal type melanoma 46, 203
- anorectal melanoma (ARM) 131
 - evidence summary 133
 - management of 132–4
 - recommendations xxxiii, 133
 - survival 133
- associated benign melanocytic lesions 43
- atypical naevi 210
- Australia
 - incidence rates xiii–xiv
 - medico-legal considerations 180–1
 - mortality rates xv–xvi
- Australian Cancer Network 183
- automated diagnostic instruments 30
- autosomal 210
- basal cell carcinoma 211
- benign 211
- biopsy 211
 - broad superficial shave 36
 - versus complete excision 38
 - complete excisional 35
 - deep shave 36, 38
 - evidence summary 37–8
 - fine needle 82
 - good practice points xxiii, 38
 - incisional 36
 - partial 35–6, 38
 - and pregnancy 151
 - punch 35, 38
 - recommendations xxiii, 38
 - sentinel lymph node 79–82
- body site of occurrence 157–8
- brachytherapy 211
- Breslow thickness 35, 41, 47, 211
 - and metastasis to lymph nodes 79
 - and prognosis 157–8
- cancer 211
- cancer care services
 - access to 174, 175
 - for Māori 175
 - for Pacific peoples 176
- Cancer Council Australia 2, 5
- Cancer Society of New Zealand 2, 5
- carcinoma 211
- CDKN2A mutations 19–20
- cell type 43, 45
- cells 211
- chemoprophylaxis 211
- chemotherapy 96, 211
- childhood melanoma 145
 - diagnosis 145–6
 - evidence summary 146, 147
 - recommendations xxxiv, 146, 147
 - survival 146–7
 - treatment 146–7

- children
 - and melanoma 145–7
 - and palliative care 205
 - see also congenital melanocytic naevi patients
- Clark's level of invasion 43
 - and prognosis 157–8
- classification and staging 23–6
 - recommendations xxii, 24
- clinical diagnosis 27–31
 - accuracy of 196–202
 - aids 29–30
 - childhood melanoma 145–6
 - evidence summary 31
 - good practice points xxii, 29
 - recommendations xxii, 31
- clinical oncologist 211
- clinical oncology 211
- clinical practice guidelines, developing 182–9
- clinical practice recommendations xix–xxxvi
- clinical trials 93, 127–8
 - evidence summary 128
 - good practice points xxxiii, 128
 - recommendations xxxiii, 128
- clinicopathological correlation 44
- cognitive behavioural therapy (CBT) 102
- cohort studies 211
- communication
 - evidence summary 106
 - with patients 105–6
 - recommendations xxxi, 106
- complementary and alternative medicine (CAM) 163–4
 - and conventional therapies 165–6
 - evidence summary 165, 166
 - recommendations xxxv, 165, 166, 167
 - value for money 166–7
 - what patients find worthwhile 164–5
- computed tomography (CT) 211
- congenital melanocytic naevi 63
- congenital melanocytic naevi patients
 - evidence summary 64, 65
 - good practice points xxv, 66
 - management of 64–6
 - recommendations xxv, 65
 - risk factors 63–4
- conjunctival melanoma 143
- consultation submissions received 194–5
- contraceptive pill 153
- cost-effectiveness
 - complementary and alternative medicine (CAM) 166–7
 - skin screening, whole-body 8–9
- curettage 36
- cytological analysis 37
- cytopathologist 211
- cytotoxic 211
- dacarbazine 95
- deep shave biopsy 33, 38
- dermatologist 211
- dermatology 211
- dermatopathologist 212
- dermatopathology 212
- dermis 212
- dermoscope 212
- dermoscopy 29–30, 212
 - versus naked eye 196–202
- descriptive reports 47
- desmoplasia 43
- desmoplastic melanoma 28, 43, 46, 203
 - evidence summary 129
 - recommendations xxxiii, 129
 - treatment of 129
- desmoplastic neurotropic melanoma 43, 129
- detection of melanoma
 - ABCD(E) rule 27
 - by doctors 27
 - by patients 27
 - rates of 6–7
- diagnosis
 - accuracy of 196–202
 - aids 29–30
 - childhood melanoma 145–6
 - clinical 27–31
- diagnostic radiographer 212
- diathermy treatment 212
- diet therapy 166
- disseminated melanoma 83, 95–7, 135
 - chemotherapy 96
 - evidence summary 97
 - recommendations xxxi, 97
 - surgical treatment 96
- dissemination of guidelines 188
- distant metastases 23, 24, 25, 58, 80, 88, 123
 - and mucosal melanoma 131, 133, 135, 136, 137

- prognosis 157–8
- drug therapy 127–8
- ear, nose and throat (ENT) 212
- educational interventions 103–4
- epidermal collarette 45
- epidermal component 45
- epidermiology 212
- epidermotropic metastasis 39
- ethnic origin 169–70
- evidence levels xx, 186
- evidence summary
 - adjuvant systematic therapy 94
 - anorectal melanoma (ARM) 133
 - biopsy 37–8
 - childhood melanoma 146, 147
 - clinical diagnosis 31
 - clinical trials 128
 - communication 106
 - complementary and alternative medicine (CAM) 165, 166
 - congenital melanocytic naevi patients 64, 65
 - desmoplastic melanoma 129
 - disseminated melanoma 97
 - follow-up 122, 123, 124
 - histopathological reporting 49, 51
 - lentigo maligna (LM) 70
 - local metastasis 88, 89
 - locoregional cutaneous melanoma 58
 - locoregional recurrent melanoma 87, 88, 89, 90
 - metastatic melanoma 60
 - mucosal melanoma 133, 135
 - multidisciplinary care 119
 - occult melanoma 141
 - ocular melanoma 143
 - palliative care 114
 - persistent melanoma 87
 - pregnancy 151, 152
 - prevention 3
 - primary melanoma 56, 74
 - psychosocial factors 108
 - psychosocial interventions 105, 109
 - regional lymph nodes 84, 90
 - risk factors 18, 20
 - sentinel lymph node biopsy (SLNB) 82
 - skin screening, whole-body 6, 7, 8, 9
 - staging 24
 - vulval melanoma 137
- excision 212
 - assessment of completeness 42
 - mapped serial 42
 - margins of 42, 73–4
 - versus partial biopsy 38–9
 - wide local 38, 73–4, 79, 80, 132, 134, 137
- executive summary xi–xii
- extravascular migratory metastasis 42
- eye-conserving therapies 143
- families, and specialist palliative care 115–16
- family history 17
- fibrosis 42, 45
- fine needle aspiration cytology (FNA) 212
- fine needle biopsy 79
- follow-up 121
 - evidence summary 122, 123, 124
 - intervals and tests 122–3
 - recommendations xxxii, 122, 124
 - undertaking 121–2
 - value of 123–4
- frozen section 37, 50
- gender 15
 - incidence rates xiii–xiv
 - mortality rates xv–xvi
 - and prognosis 158
 - risk factors 15
 - and thickness of melanoma 7–8
- gene mutations 19
- general practitioners
 - detection of melanoma 27
- good practice points
 - biopsy xxiii, 38
 - clinical diagnosis xxii, 29
 - clinical trials xxxiii, 128
 - congenital melanocytic naevi patients xxv, 66
 - high-risk individuals xxi
 - Māori xxxvi, 174
 - mucosal melanoma xxxiv, 138
 - non-Caucasians xxxvi, 171
 - Pacific peoples in New Zealand xxxvi, 176
 - primary melanoma xxvii–xxviii, 75–6
 - regional lymph nodes xxix, 84

- risk factors 18
 - histopathological reporting 41–52
- genetics 19–20
- glossary 210–16
- good practice points
 - biopsy xxiii, 38
 - clinical diagnosis xxii, 29
 - clinical trials xxxiii, 128
 - congenital melanocytic naevi patients xxv, 66
 - high-risk individuals xxi, 18
 - Māori xxxvi, 174
 - mucosal melanoma xxxiv, 138
 - non-Caucasians xxxvi, 171
 - Pacific peoples in New Zealand xxxvi, 176
 - primary melanoma xxvii–xxviii, 75–6
 - regional lymph nodes xxix, 84
- growth
 - dermal growth pattern 45
 - histological growth pattern 43
 - phase 43
- guidelines development process 182–9
 - development of method handbook 183
 - dissemination and implementation 188
 - public consultation 187–8
 - review of chapters 187
 - steps in preparing 183–9
 - writing chapters 187
- hapū 212
- head and neck
 - desmoplastic melanoma 129
 - lentigo maligna (LM) 69–71
 - mucosal melanoma 134–5
- Health Sponsorship Council of New Zealand 2
- high-risk patients
 - adjuvant systematic therapy 93
 - follow-up 123
 - good practice points xxi, 18
 - management of 18
 - risk factors 15–17
- histological growth pattern 43
- histology 212
- histopathological reporting 41
 - comments on 42–4
 - component of 41
 - evidence summary 49, 51
 - examples 48
 - format of report 47
 - lymph node dissection 51–2
 - non-sentinel lymph nodes 50–1
 - recommendations xxiii–xxiv, 49–50, 51
 - request forms 44
 - sentinel lymph nodes 50–1
 - terminology 46
- histopathologist 212
- histopathology 212
- hormone replacement therapy 153
- Hutchinson's melanotic freckle 46, 203
 - see *also* lentigo maligna (LM)
- immunohistochemistry 43–4
- implementation of guidelines 188
- in situ* 212
- in situ* melanoma 7, 25, 39, 42, 46, 70, 73, 203
 - follow-up 122
- in-transit metastasis 25, 42, 49, 88–90
- incidence rates xiii–xiv
 - in Indigenous communities 170
 - Māori 173
 - in non-Caucasians 169
 - Pacific peoples in New Zealand 175
- Indigenous communities 170
- inflammation 45
- interferon 93–4, 95, 165–6
 - and children 147
- invasion, level of 42
- invasive melanoma 7, 42, 46, 70, 74, 76, 79, 203
 - follow-up 122
- investigations following diagnosis
 - locoregional cutaneous melanoma 58–8
 - metastatic melanoma 59–60
 - primary melanoma 55–6
- isolated limb infusion 88–9, 212
- isolated limb perfusion 88–9, 213
- iwi 212
- kaitiaki 213
- kaupapa Māori 213
- laser therapy 213
- lentigo maligna (LM) 28, 46, 69–71, 203, 213

- evidence summary 70
- and mapped serial excision 42
- recommendations xxvi, 71
- lentigo maligna melanoma (LMM) 28, 46, 203
 - and mapped serial excision 42
- lesion thickness see Breslow thickness
- lesions 213
 - associated benign melanocytic 43
- linea nigra 151
- local metastasis 42, 88–90, 213
 - evidence summary 88, 89
 - histological features 45
 - recommendations 88, 89, 90
- local recurrence 213
- locoregional cutaneous melanoma
 - evidence summary 58
 - investigations following diagnosis 57–8
 - recommendations xxiv, 58
- locoregionally recurrent melanoma 87–91
 - evidence summary 87, 88, 89, 90
 - recommendations xxix–xxx, 87, 88, 89, 90, 91
- lymph nodes
 - dissection 51–2
 - regional 79–84
 - sentinel lymph node biopsy (SLNB) 79–81, 146–7, 216
- lymphadenectomy 133
- lymphadenopathy 213
- lymphovascular invasion
 - and prognosis 157–8
- macroscopic descriptions 41
- magnetic resonance imaging (MRI) 213
- male genito-urinary tract, mucosal melanoma 135–6
- malignant 213
- malignant blue naevus 46, 203
- mana 213
- management
 - of anorectal melanoma (ARM) 132–4
 - of congenital melanocytic naevi patients 64–6
 - of high-risk patients 18
 - regional lymph nodes 79–84
- Māori 173–4
 - good practice points xxxvi, 174
 - guiding principles 173
 - health perspectives 173
 - incidence rates 173
- margin 213
- maxillofacial 213
- medical oncology 213
- medico-legal considerations
 - Australia 180–1
 - New Zealand 181
- melanocyte stimulating hormone 213
- melanocytic naevi 16
- melanoma 213
 - in children 145–7
 - and congenital melanocytic naevi patients 46, 203
 - and pregnancy 152
 - previous, risk factors 16
 - terminology and synonyms 46, 203
 - thickness detected 7–8
 - unclassified 46, 203
 - uncommon variants 46, 203
- melphalan 88–9
- menstruation 153
- meta-analysis 213
- metachronous 213
- metastases 214
- metastatic melanoma
 - evidence summary 60
 - investigations following diagnosis 59–60
 - and lymph nodes 79
 - versus primary melanoma 44
 - and prognosis 157–8
 - recommendations xxiv, 60
- microsatellites 42, 49
- minimum dataset 214
- microscopic descriptions 41
- mitotic rate 42, 45
 - and prognosis 158
- mohs surgery 214
- morbidity 8, 214
- mortality xvi, 214
 - rates xv–xvi, 9
- mucosal melanoma 131
 - anorectal region 131–4
 - evidence summary 133, 135
 - good practice points xxxiv, 138
 - head and neck 134–5
 - male genito-urinary tract 135–6
 - oesophagus 135
 - and radiotherapy 133, 135

- recommendations xxxiii–xxxiv, 133, 135
 - survival 133, 135
 - vagina 137
 - vulval 136–7
- multidisciplinary care 119
 - evidence summary 119
 - and lymph node metastases 82, 84
 - and palliative care 113
 - recommendations xxxii, 119
- naevi
 - associated 45
 - and pregnancy 151
- nasal melanoma 134
- neoplasm 214
- neurotropism 43, 49, 129
- New Zealand
 - incidence rates xiii–xiv
 - medico-legal considerations 181
 - mortality rates xv–xvi
- New Zealand Guidelines Group 183
- New Zealand Palliative Care: A Working Definition* 204–7
- New Zealanders 173–7
- noa 214
- nodular melanoma (NM) 7, 27, 46, 136, 203
- non-Caucasians 169–71
 - good practice points xxxvi, 171
- non-sentinel lymph nodes 81
 - histopathological reporting 50–1
- occult melanoma 141
 - evidence summary 141
 - recommendations xxxiv, 141
- occupational therapist 214
- ocular melanoma 143
 - evidence summary 143
 - recommendations xxxiv, 143
- oculoplastic surgeon 214
- odds ratio 214
- oesophagus, mucosal melanoma 135
- oncologist 214
- oncology 214
- oral melanoma 134
- Pacific peoples in New Zealand
 - good practice points xxxvi, 176
 - health perspectives 175–6
- palliative 214
- palliative care 113–16, 214
 - definition 113, 204–6
 - evidence summary 114, 116
 - generalist 114, 206–7
 - and multidisciplinary care 113
 - New Zealand definition 204–7
 - recommendations xxxii, 114, 115, 116
 - referral timing 114–15
 - referral to specialist 114–15
 - specialist 115–16, 207
- pathologists 214
- pathology reports
 - lymph node dissection 51–2
 - non-sentinel lymph nodes 50–1
 - sentinel lymph nodes 50–1
- pathology request forms 44
- patients
 - communication with 105–6
 - and complementary and alternative medicine (CAM) 164–5
 - detection of melanoma 27
 - high-risk
 - adjuvant systematic therapy 94
 - follow-up 123
 - good practice points xxi, 18
 - management of 18
 - risk factors 15–17
 - and psychosocial interventions 101–9
 - and specialist palliative care 115–16
- perineural 214
- periocular melanoma 143
- persistent melanoma 87
 - evidence summary 87
 - histological features 45
 - recommendations xxiii, 87
- physiotherapist 214
- PICO (populations, interventions, comparisons, outcomes) 215
- pigmented lesions 19
- plastic surgeon 215
- populations
 - Māori 173–4
 - non-Caucasians 149–50
 - Pacific peoples in New Zealand 175–6
- positron emission tomography (PET) 215
- precancerous 215
- pregnancy
 - after diagnosis 152

- evidence summary 151, 152
- and melanoma 152
- and naevi 151
- recommendations xxxv, 151, 152, 153
- transplacental transmission 145
- treatment during 152–3
- prevention 1–3
 - evidence summary 3
 - recommendations xxi, 3
- primary dermal melanoma 46, 203
- primary melanoma
 - evidence summary 56, 74
 - good practice points xxvii–xxviii, 75–6
 - investigations following diagnosis 55–6
 - versus metastatic melanoma 44
 - recommendations xxi, xxvi, 56, 75
 - treatment 73–6
- prognosis 157–8, 215
 - and age 158
 - body site of occurrence 157–8
 - and Breslow thickness 157–8
 - and Clark's level of invasion 157–8
 - and distant metastases 157–8
 - and gender 158
 - and lymphovascular invasion 157–8
 - and metastatic melanoma 157–8
 - and mitotic rate 158
 - and pregnancy 152
 - and psychosocial factors 106–8
 - and psychosocial interventions 108–9
 - and regression 157–8
 - and serum LDH 158
 - and TNM classification 157–8
 - and ulceration 157–8
- prognostic factors 157–8, 215
- prophylactic removal 18, 64
- protocol 215
- psycho-education 105
- psychosocial 215
- psychosocial factors
 - evidence summary 108
 - and prognosis 106–8
 - recommendations xxxi, 108
 - and survival 106–8
- psychosocial interventions
 - effect of 101–5
 - evidence summary 105, 109
 - and prognosis 108–9
 - recommendations xxxi, 105, 109
 - studies in other cancers 104
- psychosocial issues 101
- public consultation 187–8
- punch biopsy 35, 38
- radiologist 215
- radiology 215
- radiotherapy 95, 215
 - anorectal melanoma (ARM) 133
 - disseminated melanoma 95
 - lentigo maligna (LM) 69–70
 - and mucosal melanoma 133, 135
- randomised controlled trial (RCT) 127–8, 215
- recommendations
 - adjuvant systematic therapy xxx, 94
 - anorectal melanoma (ARM) xxxiii, 133
 - biopsy xxiii, 38
 - childhood melanoma xxxiv, 146, 147
 - classification and staging xxii
 - clinical diagnosis xxii, 31
 - clinical trials xxxii, 128
 - communication xxxi, 106
 - complementary and alternative medicine (CAM) xxxv, 165, 166, 167
 - congenital melanocytic naevi patients xxxv, 65
 - desmoplastic melanoma xxxiii, 129
 - disseminated melanoma xxxi, 97
 - follow-up xxxii, 122, 124
 - histopathological reporting xxiii–xxiv, 49–50, 51
 - lentigo maligna (LM) xxvi, 71
 - local metastasis 88, 89, 90
 - locoregional cutaneous melanoma xxiv, 58
 - locoregional recurrent melanoma xxix–xxx, 87, 88, 89, 90, 91
 - metastatic melanoma xxiv, 60
 - mucosal melanoma xxxiii–xxxiv, 133, 135
 - multidisciplinary care xxxii, 119
 - occult melanoma xxxiv, 141
 - ocular melanoma xxxiv, 143
 - palliative care xxxii, 114
 - persistent melanoma xxiii, 87
 - pregnancy xxxv, 151, 152, 153
 - prevention xxi, 3
 - primary melanoma xxi, xxvi, 56, 75
 - psychosocial factors xxxi, 108
 - psychosocial interventions xxxi, 105, 109

- regional lymph nodes xxiii, xxviii, 84, 90
- risk factors xxi–xxii, 18, 20
- sentinel lymph node biopsy (SLNB) xxiii, 82
- skin screening, whole-body xxi, 10
- staging 24
- summary of clinical practice
 - recommendations xix–xxxvi
 - vulval melanoma xxxiv, 137
- recurrence, local 44
- recurrent melanoma 39, 87–91, 137
- referral
 - to palliative care 114–15
 - to specialist 37, 79
- regional lymph nodes 79–84, 90–1
 - evidence summary 84, 90
 - good practice points xxix, 84
 - and metastatic melanoma 79
 - recommendations xxiii, xxviii, 84, 91
 - therapeutic dissection 82–4
- regression 42–3
 - and prognosis 157–8
- relative risks
 - sunbeds 1
- risk factors
 - age 15, 145, 153
 - congenital melanocytic naevi patients 63–4
 - ethnic origin 169–70
 - evidence summary 18, 20
 - family history 17
 - gender 15
 - genetic 19–20
 - melanocytic naevi 16
 - menstruation 153
 - and metastasis to lymph nodes 79
 - and pregnancy 151
 - previous melanoma 15
 - recommendations xxi–xxii, 18, 20
 - skin colour 16, 19
 - sun exposure 16
- Royal Australian College of General Practitioners
 - skin screening, whole-body 5
- satellitosis 88–90
- saucerisation 33
- scaring 45
- scintigraphy 215
- self-examination 27, 122
- sensitivity 215
- sentinel lymph node biopsy (SLNB) 79–82, 216
 - and children 146–7
 - evidence summary 82
 - recommendations xxiii, 82
- sentinel lymph nodes
 - histopathological reporting 50–1
- sequential digital imaging 30
- serum LDH
 - and prognosis 158
- skin colour
 - risk factors 16, 19
- skin pigmentation
 - and pregnancy 151
 - risk factors 16, 19
- skin screening, whole-body 5
 - accuracy of detection 6–7
 - cost-effectiveness 8
 - evidence summary 6, 7, 8, 9
 - melanoma thickness detected 7–8
 - proportion undergoing 5–6
 - recommendations xxi, 10
 - and reducing mortality 9
 - screening intervals 18
- solar elastosis 43
- solaria 1, 210
- specificity 216
- sphincter preservation 132, 134
- staging 23–6
 - cutaneous melanoma (CM) 26
 - evidence summary 24
 - recommendations 24
- submissions received 194–5
- subtypes 28
- subungual melanoma 28, 75
- summary of clinical practice
 - recommendations xix–xxxvi
- sun exposure 1, 2, 16–17
- sun protection 2
- sun protection factor (SPF) 2
- sunscreen use 2–3
- superficial spreading melanoma *in situ* 46, 203
- superficial spreading melanoma (SSM) 7, 27, 46, 171, 203
- supportive care 216
- surgical oncologist 216
- surgical treatment

- and children 146–7
 - of desmoplastic melanoma 129
 - vulval melanoma 136–7
- survival xvi, 159
 - anorectal melanoma (ARM) 133
 - childhood melanoma 146–7
 - desmoplastic melanoma 43
 - and follow-up 124
 - mucosal melanoma 133, 135
 - and psychosocial factors 106–8
 - rates 159
 - trends xvi
- synonyms 46, 203
- synoptic reports 47–8
- systemic therapy 216
 - see *also* adjuvant systematic therapy

- tamoxifen 95
- tapu 216
- temozolomide 95
- terminology 46, 203
- therapeutic radiographer 216
- TNM classification 23–6
 - and prognosis 157–8
 - and survival rates 159
- topical therapy 216
- total body photography (TBP) 30
- transplacental transmission 145
- treatment
 - childhood melanoma 146–7
 - desmoplastic melanoma 129
 - lentigo maligna (LM) 69–71
 - during pregnancy 152–3
 - primary melanoma 73–6
- tumour 216
- tumour-infiltrating lymphocytes (TIL) 42

- ulceration 25, 42
 - and prognosis 157–8
- ultrasonography 122–3
- unclassified melanoma 46, 203
- UV radiation 1
- UVB radiation 1
- uveal melanoma 143

- vagina, mucosal melanoma 137
- vascular invasion 42, 45
- vitamin D 1–2
- vulval melanoma 136–7
 - evidence summary 137
 - management of 136–7
 - recommendations xxxiv, 137

- whānau 216
- whānau ora 216
- wide local excision 38, 73–4, 79, 80, 132, 134, 137
- Working Party Membership 190–3
- World Health Organization, palliative care
 - definition 113, 204–5