

Blue naevus - can have perineural,
vasc, peridnexal extension.

p16 nuclear + cytoplasmic (+).

MIB-1 in Spitz = < 2%.

SSMM -

Recommend complete excision of
dysplastic naevi.

Punch bx - BAPPIG.

Inflam in dysplastic naevus:

- never band like.

- caution in elderly.

Spitz

Reed

Congenital

Genital

Traumatized.

Acral

- upward spread central.

Size: Spitz $< 6\text{mm}$.

Dysplastic 1-2 cm, can be larger
(esp. cell blue naevus 10cm)

Blue naevus - can mitose.

$\approx 1/2\text{cm}^2$

Single cell or confluent naevus

→ melanoma within blue naevus.

Melanoma:

Epidermal reaction - worrying.

Plasma cells in host-response.

Radial growth - invasive (CL 2),
nests < 10 cells. - No met potential.
If CL 3 (+) → vertical.

Radial growth: only 2-3 cells.
If doubtful → vertical.

Breslow thickness: min tumor ~~size~~ ^{NOT} Microsatellite.
Exclude perineural or periductal.

Give BT and distance of micromet

Microsatellit → intralymphatic
0.5mm (AJCC).

