Beyond the scalpel: Management options for advanced basal cell carcinoma

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This symposium will offer a practical, case-based approach to the management options available for advanced basal cell carcinoma (BCC) skin lesions of the head and neck region. Discussion will include margin status and reconstructive options. Tumor size, poorly defined margins, the presence of perineural or vascular invasion and failed prior treatments are factors associated with poorer prognosis and a more aggressive phenotype. Increasing rates of immunosuppressive therapies and solid organ transplants confer higher risk of recurrent skin carcinoma. Aggressive or neglected tumor growth is seen in rare but unfortunate patients who may have medical contraindications for surgery or where resection may result in significant morbidity or deformity. Vismodegib is a novel, targeted systemic therapy indicated for advanced, unresectable BCC. An update regarding the hedge-hog signaling inhibition mechanism of action and the efficacy of vismodegib will be provided. Results from the SHH477g and STEVIE trials with vismodegib highlight the tolerable side effect profile and clinical utility for patients with basal cell nevus (Gorlin's) syndrome. Future areas of study in the use of non-surgical options for patients with advanced BCC will be examined.

Biography

Kathryn E Roth is an Assistant Professor with Schulich School of Medicine, Western University, Canada. She has completed OTO-HNS Residency at Western University and Head and Neck Reconstructive Surgery Fellowship from the Sydney Head & Neck Cancer Institute and Sydney Melanoma Unit, Australia in 2010. She is currently pursuing a Masters in Health Professions Education, University of Illinois at Chicago with a research interest in skill retention. She was named Deputy Chair, Cutaneous Oncology; London Regional Cancer Program in 2014 and Co-developed a Canadian National Melanoma database. Her clinical and research focus is in cutaneous oncology with facial reconstruction, melanoma (including sentinel node), thyroid and salivary gland pathology.

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