NHS
Royal Devon
University Healthcare
NHS Foundation Trust

Exeter Skin Cancer Service

Malignant Melanoma

(Eastern services)

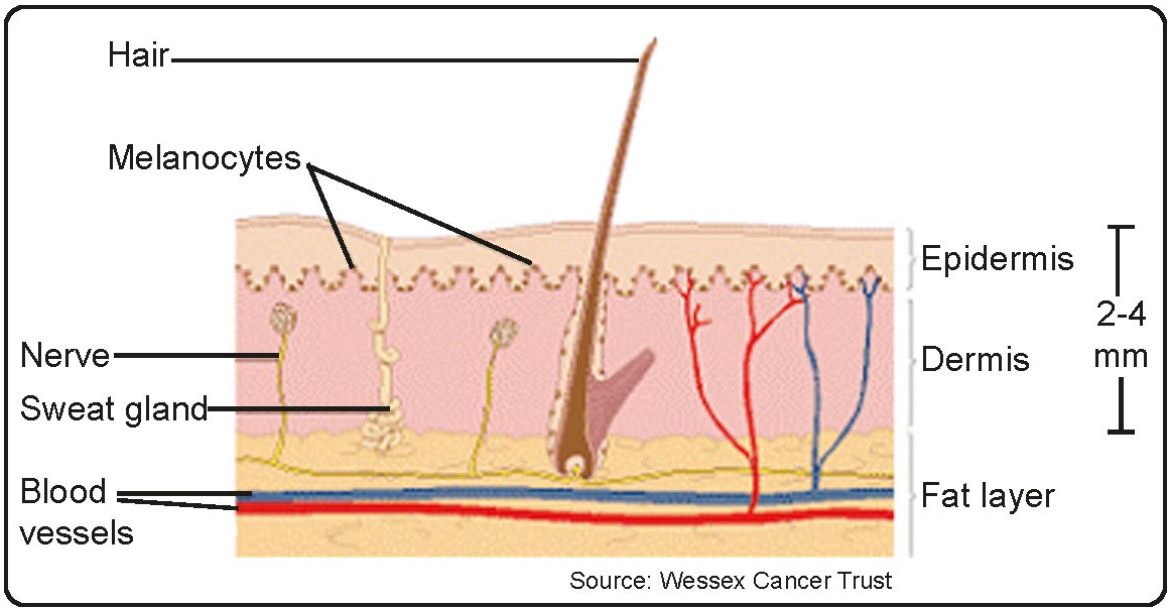
Other formats

If you need this leaflet in another format such as Braille, large print, high contrast, British Sign Language or translated into another language, contact the Patient Advice and Liaison Service:

- 01392 402093 (for Mid Devon, East Devon and Exeter services)
- 01271 314090 (for North Devon services)
- rduh.pals@nhs.net

What is a Malignant Melanoma?

Malignant melanoma (MM) is the rarest, but the most serious, of all skin cancers. Around 17,500 people are diagnosed each year in the UK. The number of people diagnosed has increased over the last few decades (source Cancer Research UK 2025).



Source: Wessex Cancer Trust

It is a cancer of the melanocyte cells, which produce the brown pigmentation in your skin that forms freckles, moles and your suntan. They are found at the base of the epidermis (the top layer of your skin).

MMs appear in normal skin or in changing moles. Suspicious changes include an increase in size or change in shape, deepening in colour, itching, bleeding and surrounding inflammation. They can spread along the skin's surface but they can also penetrate inwards into the deeper layers of the skin. This is when, if left untreated, they may spread to other areas of your body.

If any of the melanoma cells have broken away they can spread to your lymph glands (also called nodes). You have lymph glands all over your body. There are large groups of them in your neck, jaw, axilla (armpit), elbow creases, groins and behind your knees. If the melanoma has spread, it will generally travel to the nearest group of nodes from the original site and if this happens you will need to have all the glands in that area removed; this is known as a "node dissection". See additional leaflets on "node dissections".

What are the causes?

The cause of melanoma is not entirely understood but there is strong evidence to suggest that ultraviolet radiation caused by exposure to high intensity sunshine (causing the skin to burn) is a major factor. People with fair or red complexions are particularly at risk, especially if they have been sunburnt during childhood and early adulthood. A small group of people may have a genetic predisposition to the development of melanoma and the use of sunbeds will increase the risk of developing skin cancer.

How are they treated?

Treatment of malignant melanoma depends largely on the result of your biopsy which usually involves close but complete excision of the mole and will tell us how thick your melanoma is (the Breslow Thickness).

Following your biopsy, you may need to have another operation called a "wide local excision". This is where a margin of healthy tissue is removed from around your biopsy scar. See additional leaflet on "wide local excision".

You may be offered a diagnostic test operation called a "sentinel lymph node biopsy". See additional leaflet on "sentinel lymph node biopsy".

In some cases, you will be asked to have other investigations to find out if there has already been any spread of your melanoma. See additional leaflet on "diagnostic and staging investigations".

You will be given the results of your tests and the outcome of your surgery two to three weeks afterwards in the Outpatients Department.

Lentigo maligna (a form of malignant melanoma in situ) is normally treated with surgery.

Follow-up care

Malignant melanoma is more easily treated if diagnosed early. You will initially need to be seen as an outpatient every three months. At your follow-up appointments your melanoma site will be examined for signs of recurrence and your lymph glands will be examined for signs of enlargement. You will be shown what to look for in your melanoma site and how to examine your own lymph glands by your nurse specialist. See additional leaflet on "self-examination".

Your notes

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern, please contact PALS:

- 01392 402093 (for Mid Devon, East Devon and Exeter services)
- 01271 314090 (for North Devon services)
- rduh.pals@nhs.net

Have your say

Royal Devon University Healthcare NHS Foundation Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

You can also share your feedback on the Care Opinion website at www.careopinion.org.uk or freephone 0800 122 3135.

Scan the QR code to visit the Care Opinion website →

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