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# Skin lesions

New Zealand Wound Care Society 9th  
National Conference 2019

**“CHOICES, CHANGES AND CHALLENGES”**

NZWCS 9th Biennial Conference

Dunedin Centre, Dunedin

May 23 - 25, 2019



**DermNet NZ**  
All about the skin



THE UNIVERSITY OF  
**AUCKLAND**  
Te Whare Wānanga o Tāmaki Makaurau  
NEW ZEALAND

**Waikato**  
District Health Board





# Conflict of interest

I am a consultant and on the Medical Advisory Board for MoleMap New Zealand

# Outline

Melanocytic +  
keratinocytic +  
other

Benign + malignant

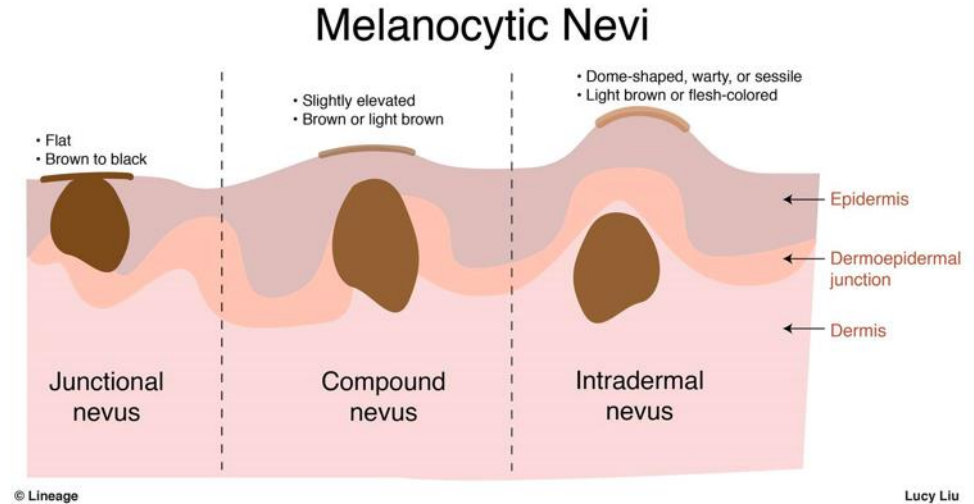
# Melanocytic naevi

Congenital naevi

Childhood naevi

Acquired naevi

- Junctional naevi
- Compound naevi
- Dermal naevi
- Blue naevi



# Congenital melanocytic naevus

Large distinctive  
pigmented lesion  
present at birth

Various types –  
often hair-bearing

# Congenital MN

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# Childhood

Nearly everyone has several to many naevi

Dermal naevi > compound naevi

Any site – not really related to sun exposure

< 10 years (most) < 20 years (some) < 20 years (a few)

Pink (white skin) to brown (most) to black (dark skin)

Most are oval, some odd shapes

Symmetrical colours, structures

# Naevi in children

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# Adult

More naevi upper back > upper arms > elsewhere

Dermal naevi become more elevated

Each person has own pattern(s) of naevi

Dermoscopy fading border, symmetrical colours and structures

- Reticular pattern, clod pattern, structureless pattern

# Dermal naevus

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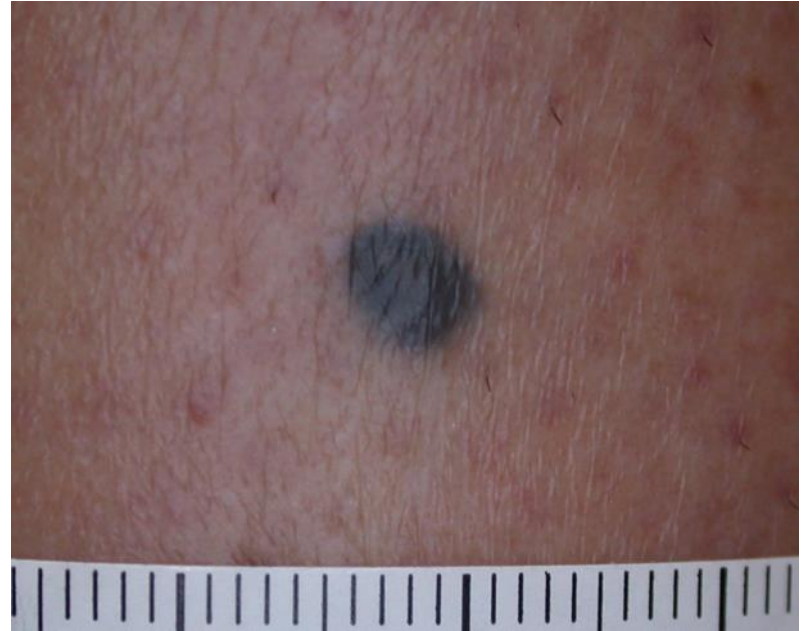
# Papillomatous dermal naevus

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# Blue naevus

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# Junctional naevus

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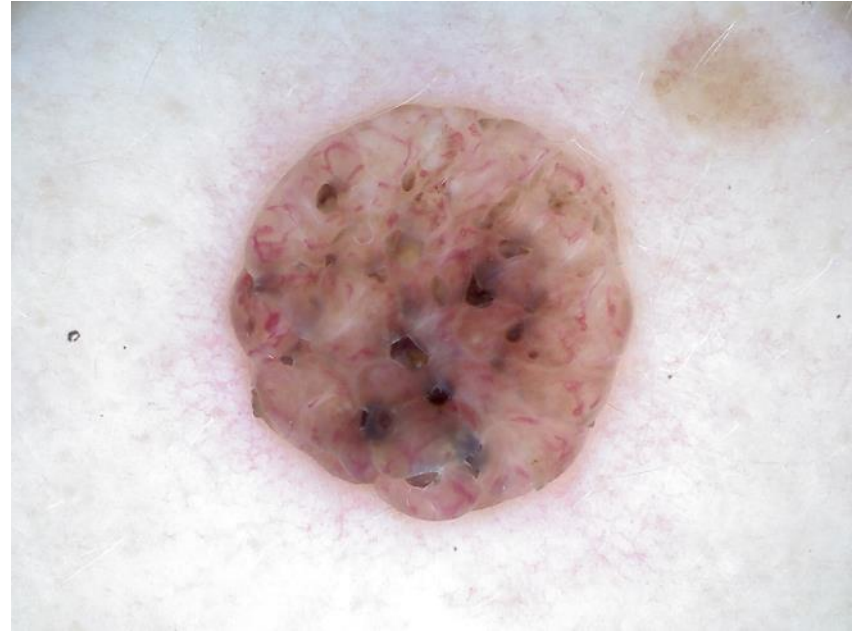
# Compound naevus

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# Dermal naevus

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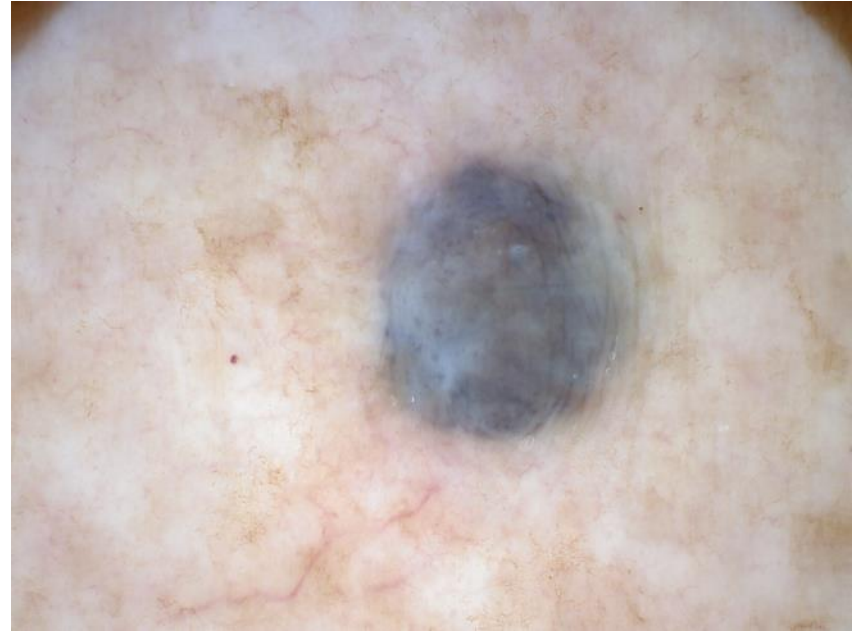


Dermoscopy



# Blue naevus

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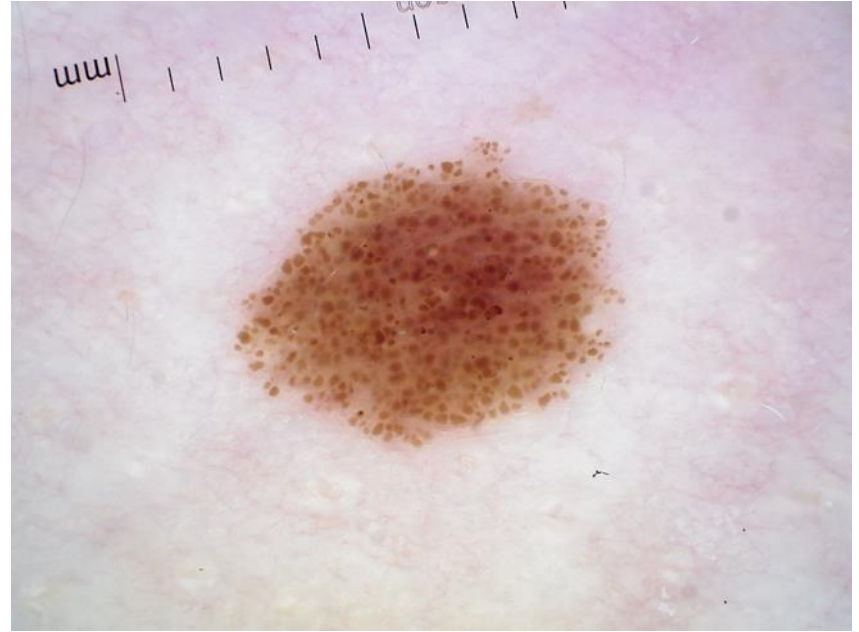


Dermoscopy



# Globular pattern

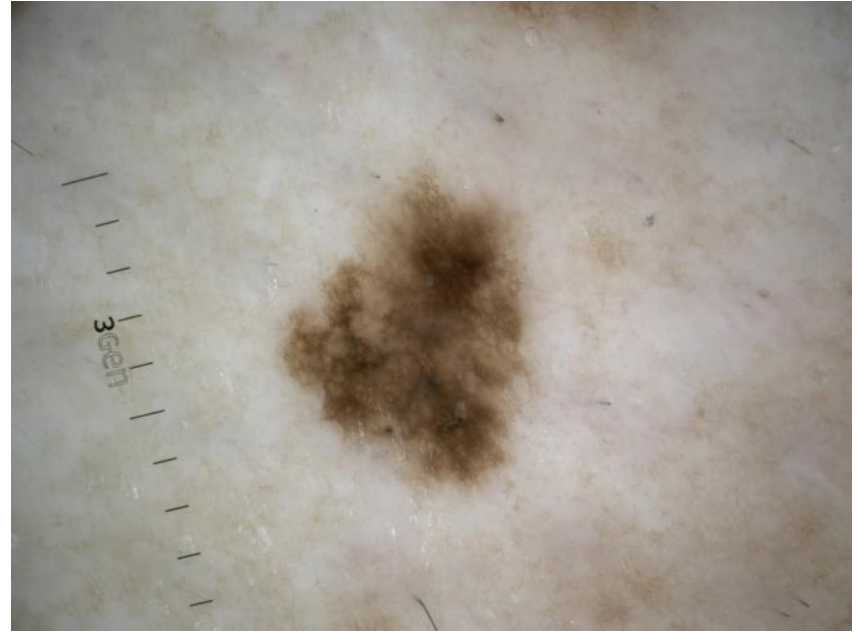
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Dermoscopy

# Reticular pattern

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Dermoscopy

# Structureless pattern

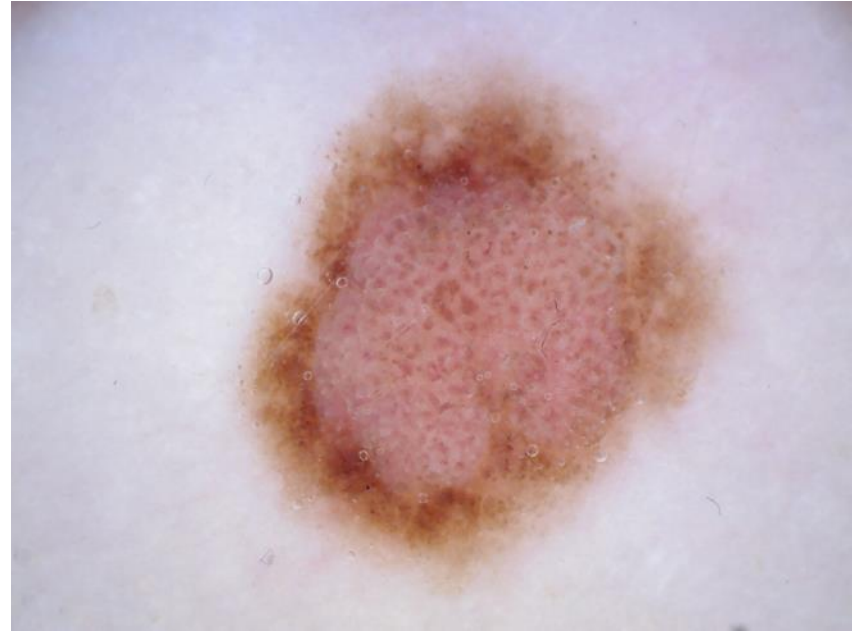
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Dermoscopy

# Compound naevus

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Dermoscopy



# Facial pseudonetwork

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Dermoscopy

# Palms/soles parallel furrow

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Dermoscopy

# Melanoma

Superficial spreading melanoma

Lentigo maligna melanoma

Nodular melanoma

Other

Melanoma in situ

# Flat melanoma

ABCD: Asymmetrical, Border, Colours, Different

In situ phase for years prior to invasion

Slowly growing, irregular pigmented lesion

Asymmetrical in shape, structure, colour

Variable, multiple colours

Dermoscopy – lack of pattern (chaos) + clues

- Focal grey, thick lines, eccentric structureless zones, peripheral black dots or radial streaming, polygons, white lines, parallel ridge (palms/soles)



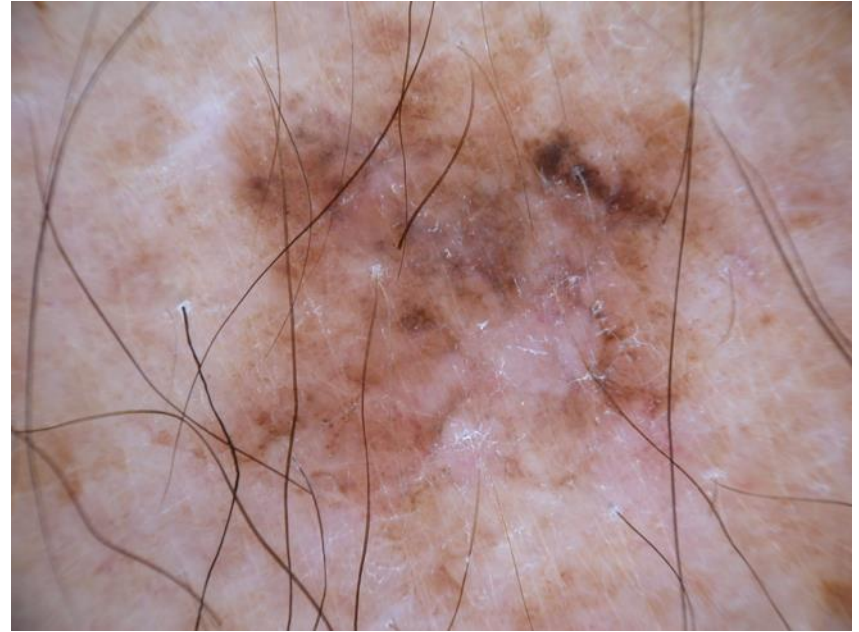
# Superficial spreading MM

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# SSM

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Dermoscopy

# Lentigo maligna melanoma

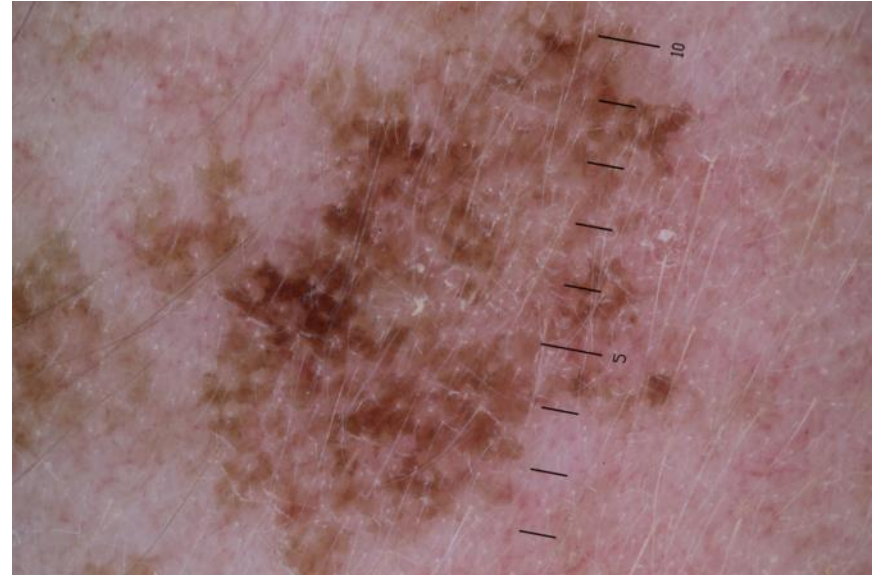
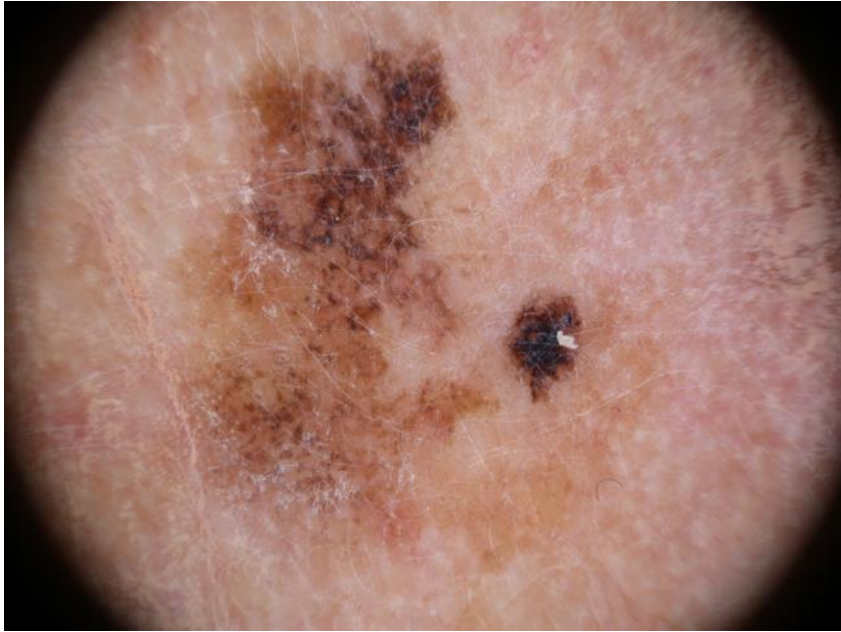
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# Lentigo maligna

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# Thick melanoma

EFG: Elevated Firm Growing

Fast growing – weeks to months

Red, black, blue

May be round or oval nodules

Dermoscopy – lack of pattern (chaos) + clues

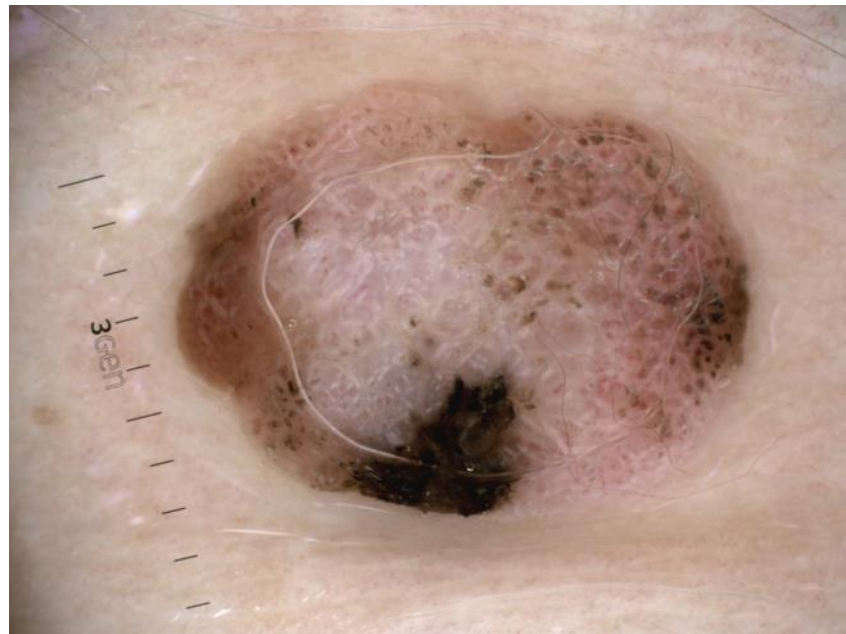
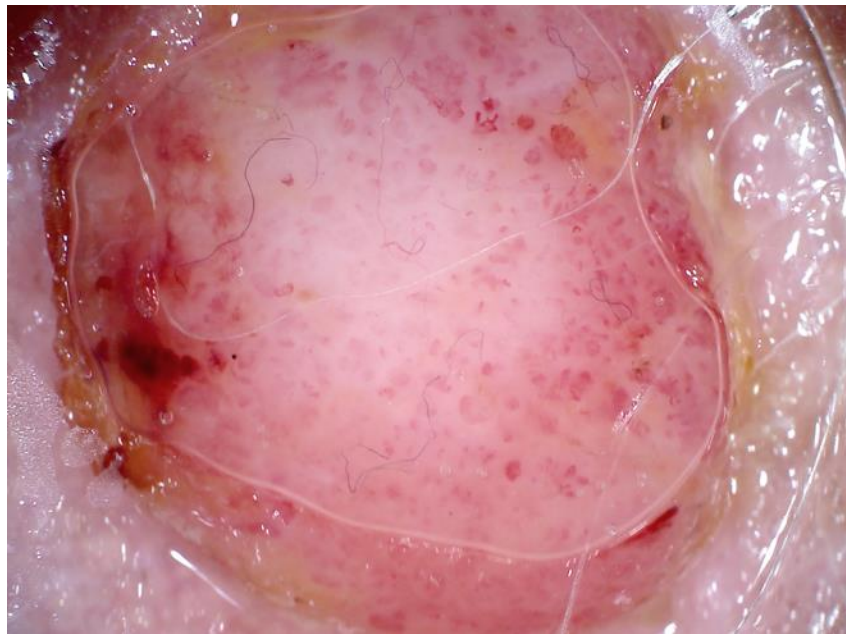
- Focal grey, eccentric structureless zones, peripheral superficial features, white lines, polymorphous blood vessels

# Nodular melanoma

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# Nodular melanoma



Dermoscopy

# Benign keratinocyte lesions

Keratinocyte → scale

Epidermal → sit on skin surface

Viral warts – HPV

Seborrhoeic keratoses

Solar lentigines



# Viral wart

> HPV subtypes

Children or anyone

Fingers, feet, knees or anywhere

Irregular distribution, often linear or grouped

Rough surface

Dermoscopy shows capillary surrounded by keratin

# Viral wart

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# Viral wart

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Dermoscopy

# Seborrhoeic keratosis

Adult or anyone

Almost everyone: few to many

Location – any hair-bearing site (not palms, soles, mucosal sites)

White to black, often multicoloured

'Stuck on' – sharp border

Dermoscopy orange clods, white clods, thick curved lines (polarised best)

# Seborrheic keratosis

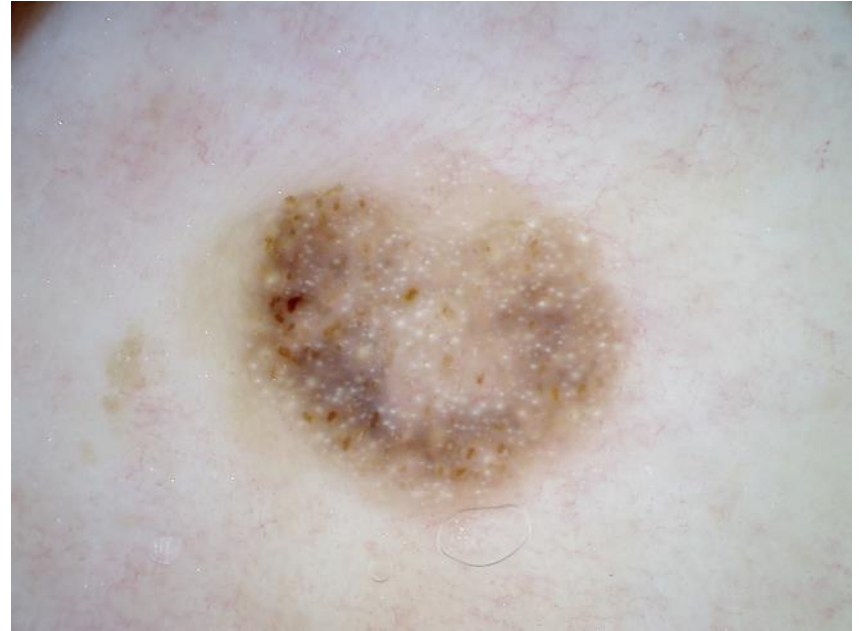
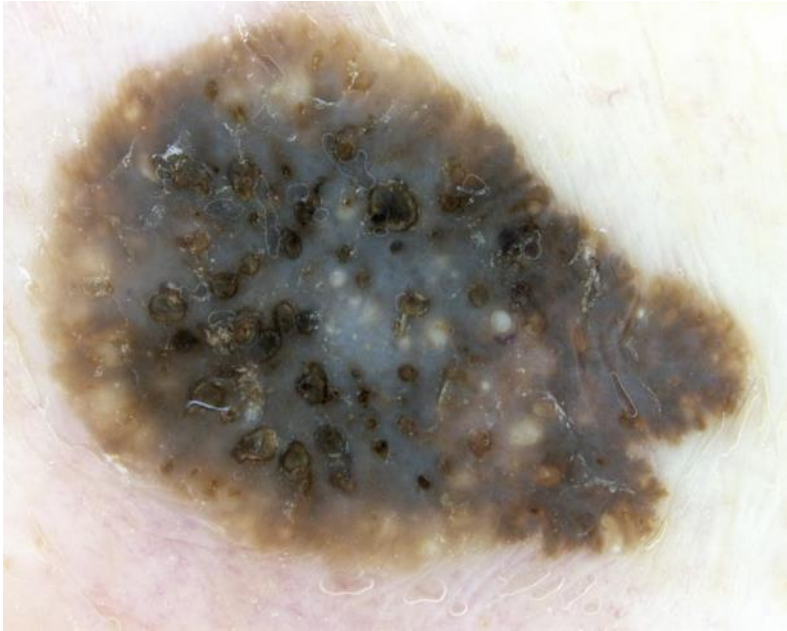
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# Seborrheic keratosis

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Dermoscopy

# Solar lentigo

Adults, any skin colour

Sun-exposed sites → few to many

Mainly light or dark brown, greyish/yellowish

Inflammatory reaction: purple → grey → disappear

- Lichen planus like keratosis

Seborrhoeic keratosis can develop within them

Sharp border, scalloped edge

Dermoscopy structureless or fingerprinting, face pseudonetwork

# Solar lentigo

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# Solar lentigo

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Dermoscopy

# Keratinocyte cancers

Actinic keratosis

Squamous cell carcinoma in  
situ

Squamous cell carcinoma

Basal cell carcinoma



# Actinic keratosis

Adults especially older outdoor workers

Fair skin > tanned skin >> dark skin

Hands, bald scalp, ears, nose, face,  
forearms, lower legs

Ill-defined, tender, adherent scale,  
erythematous

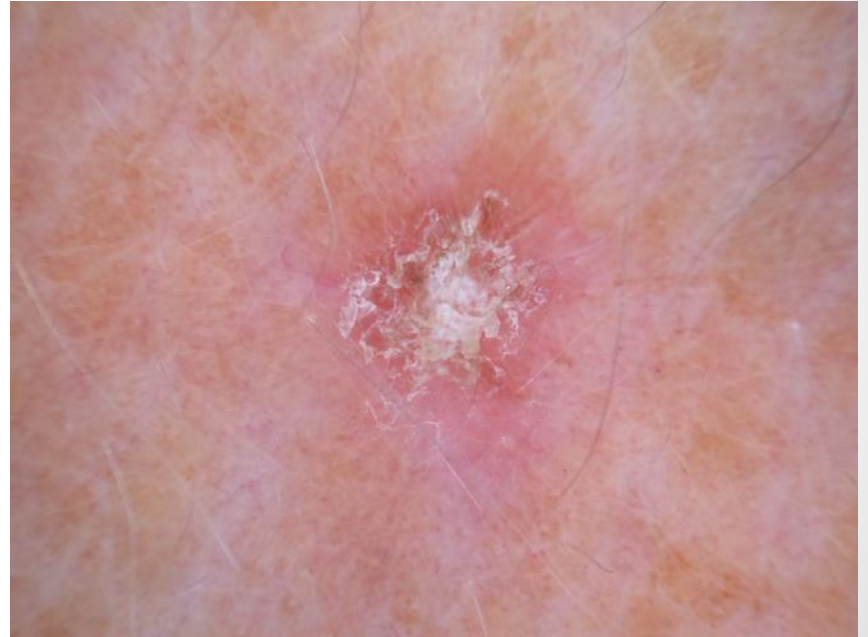
Dermoscopy on face: red  
pseudonetwork, prominent follicles

# Actinic keratosis

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# Actinic keratosis



Dermoscopy

# SCC in situ

Adults, especially older adults

Lesions often multiple

Sun-exposed sites or anywhere

Irregular shape, irregular adherent scale, orange red to pigmented

Dermoscopy crops of rounded, irregular vessels

# SCC in situ

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# SCC in situ

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Dermoscopy

# Cutaneous SCC

Older people, immune suppressed

Sun-exposed sites: scalp, ears, lips, face, hands, legs

- Often within actinic keratosis or SCC in situ
- In darker skin, in chronic wound or scar

Painful, fast-growing nodules

Dermoscopy central keratin/ulcer, peripheral white

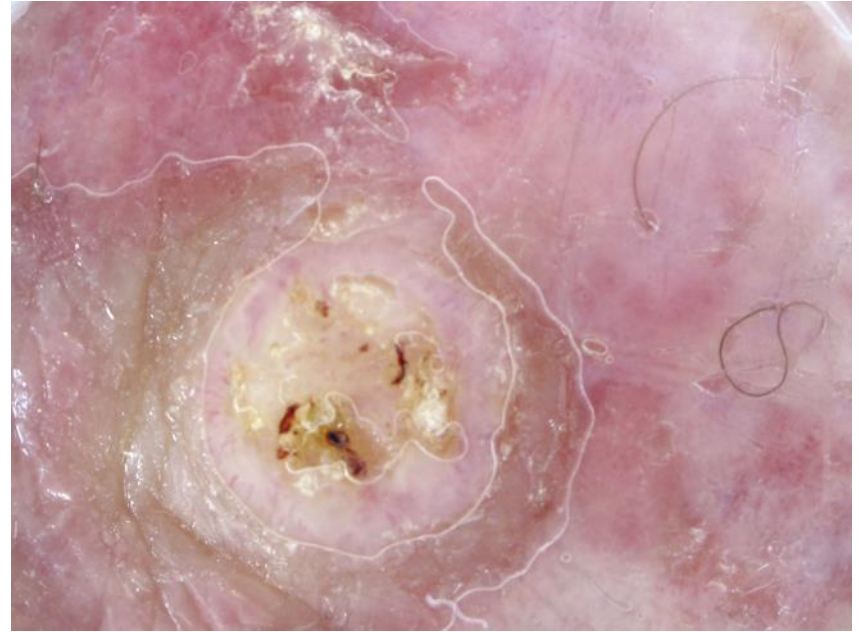
# cSCC

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# cSCC

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Dermoscopy

# Nodular BCC

The most common cancer

Head and neck > other sites

Increasing prevalence with age

Bleed, ulcerate early

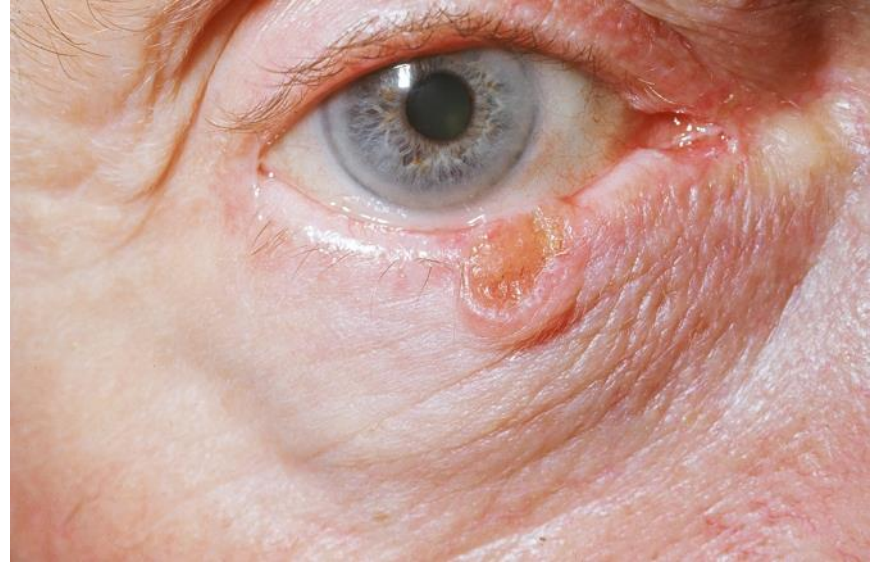
Pigmented or not pigmented

Dermoscopy irregular pigmented structures on white/pink/grey stroma, linear branched blood vessels, short white lines (polarised only)



# nBCC

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# nBCC

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# nBCC

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Dermoscopy

# Superficial BCC

Very common, often unnoticed

Trunk, limbs > face, acral sites

Slow-growing, usually pink, irregular plaque – not much scale

May bleed

Dermoscopy microerosions, short red lines, white lines (polarised only)



# sBCC

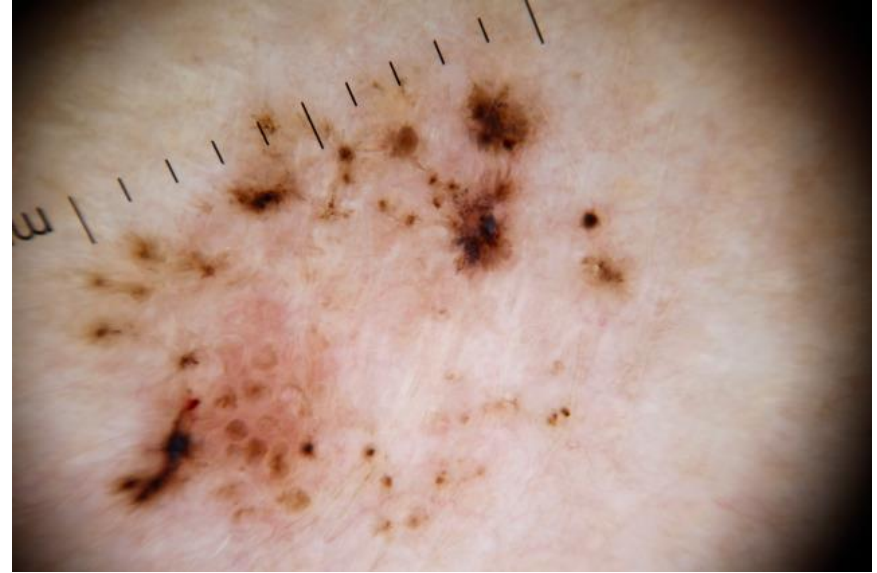
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# sBCC

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Dermoscopy

Dermatofibroma



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graph TD; A[Dermatofibroma] --> B[Vascular lesions]; B --> C[Other]
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Vascular lesions

Other

# Dermatofibroma

Single or multiple fibrous lesions

Legs > arms > trunk

Firm papules that dimple on lateral pressure

Pink to brown

Dermoscopy central white area, peripheral fine network or light pigment or radial vessels

# Dermatofibroma

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# Dermatofibroma

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Dermoscopy



# Vascular lesions

Pink, red, purple, blue

Proliferation (angioma) – round papule

Dermoscopy clods separated by fibrous bands

Dilatation (ectasia) – squashable linear lesion

Dermoscopy structureless

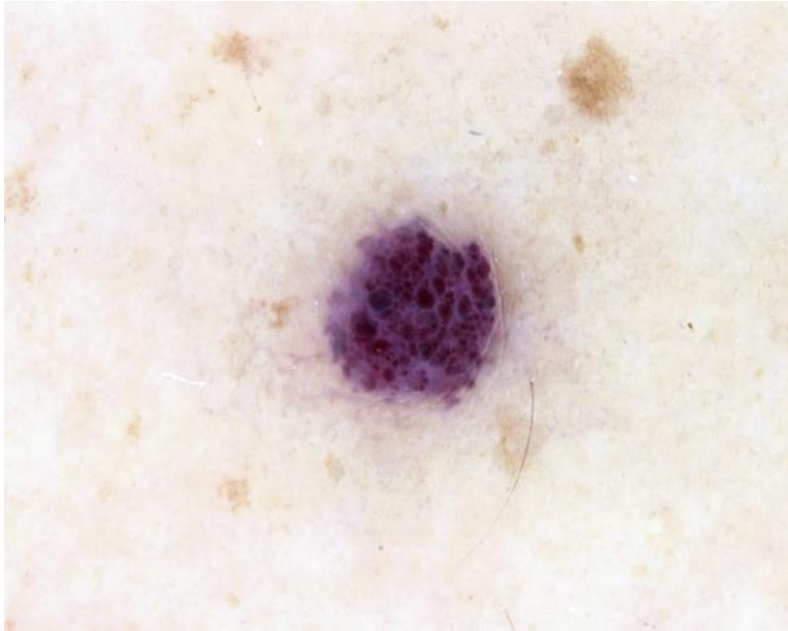
# Angioma

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# Angioma

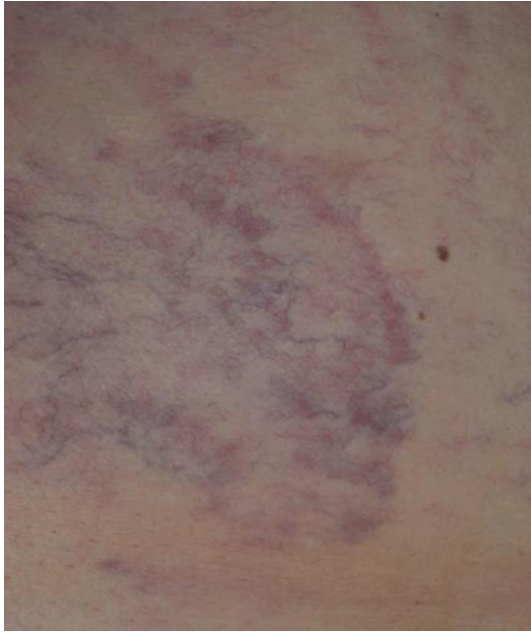
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Dermoscopy

# Ectasia

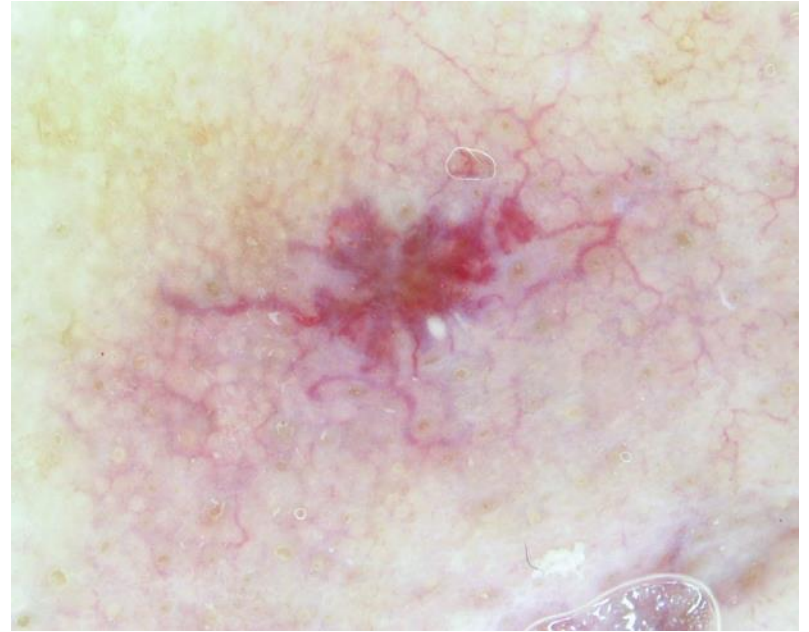
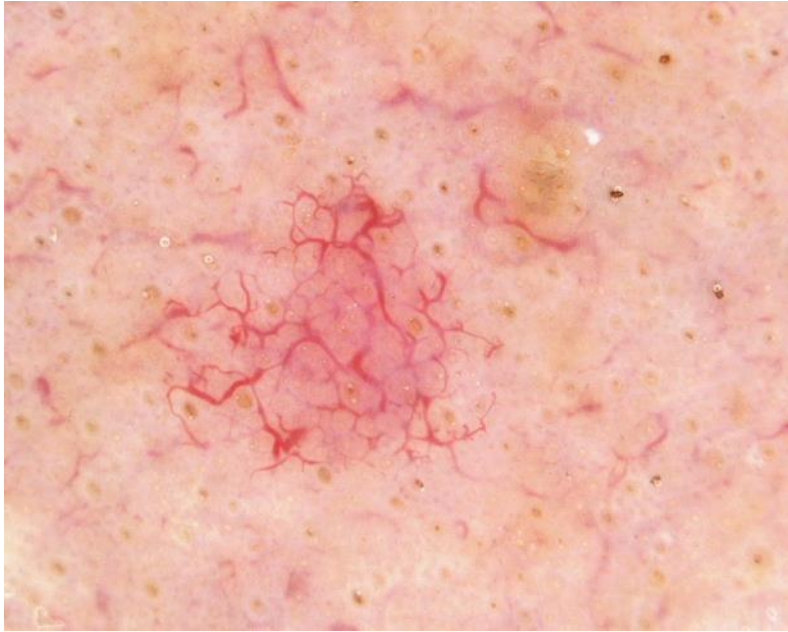
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# Ectasia

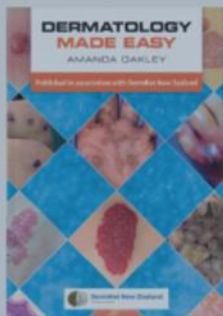
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Dermoscopy



## Dermatology Made Easy Book



"This book is truly  
a tour de force!"



"A superb book"



## DermNet NZ



# DermNet NZ

All about the skin

World Immunisation Week, last week in April.

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