Color Change Can Be Earliest Sign of Melanoma

BY TIMOTHY F. KIRN
Sacramento Bureau

VANCOUVER, B.C. — Color change, in addition to color variegation, often heralds melanoma, thus bolstering the need for adding an E to the ABCD mnemonic for melanoma detection, Dr. Robert J. Friedman said at the Sixth World Congress on Melanoma.

The color change appears to occur often before a melanoma exhibits a change in diameter, meaning it can signal a melanoma long before its diameter reaches 6 mm, said Dr. Friedman, an originator of the ABCD mnemonic for melanoma detection.

Dr. Friedman said he recently followed 24 very small lesions (2.3-5.7 mm in diameter) that, when removed after a period of observation, were found to be melanomas.

In 17 of the 24 lesions, color was the first change noted, followed by a change in diameter, and then the appearance of asymmetry.

Only two of the lesions were invasive; both had a diameter greater than 4 mm. This is consistent with previous observations that melanomas can begin to become invasive when they reach a size of 4 mm in diameter and start to form nests of melanocytes, said Dr. Friedman of New York University, New York.

The fact that melanomas can become invasive at 4 mm in diameter, and before they reach a diameter of 6 mm underscores the importance of early detection, he added.

"Melanoma may undergo transformation from an in situ lesion to an invasive lesion, even when it is relatively small," Dr. Friedman said.

The ABCD criteria for melanoma detection are: A for asymmetry; B for irregular borders; C for multiple colors; and D for a diameter greater than 6 mm.

Dr. Friedman and his group proposed adding the E, for evolution or any change in a nevus, in 2004, in part to improve the criteria for detecting melanomas with a diameter less than 6 mm, for detecting nodular melanomas, and for detecting the 10% of melanomas that do not meet A, B, C, or D. ■

Statins to Prevent Melanoma? No Clear Answer Yet

The jury is still out, but for now there is no clear evidence that statins or fibrates can decrease the risk of melanoma, according to a new review of studies conducted by The Cochrane Collaboration.

Investigators for the international organization, which conducts systematic reviews and issues evidence-based conclusions about medical practice, identified 16 qualifying randomized controlled trials (7 on statins, 9 on fibrates), 13 of which provided data on incident melanomas. Investigators also requested unpublished melanoma outcomes data from study authors.

The outcomes data '[do] not exclude the possibility that these drugs prevent melanoma.'

There were 66 reported melanomas in patients receiving the experimental drug and 86 in patients receiving placebo and other control therapies in the trials, which included more than 62,000 patients, according to the Cochrane review.

The outcomes data "[do] not exclude the possibility that these drugs prevent melanoma," since there was a 10% and 42% reduction in melanoma for patients taking statins and fibrates, respectively, the investigators say in the review, which was led by Dr. Robert Dellavalle of Denver Veterans Affairs Medical Center.

The results were not statistically significant, however, and trials of cancer and statins should continue in order to further address suggestions raised by case-control, in vitro, and animal model studies.

The trials included in the review all involved random allocation of study participants, the use of statins or fibrates in isolation in the studies' experimental groups, and the administration of therapy for at least 4 years.

—Christine Kilgore