Consider the Early Diagnosis of Melanoma in Foot Examinations of Older Adults

To the Editor:

The excellent paper by James et al\(^1\) describing foot examinations of older adults emphasizes the importance of this physical inspection; however, it does not mention the importance of an early diagnosis of melanoma at this particular site. Foot and subungal melanomas have an average 5.03 mm in thickness (the most important index for the prognosis of melanoma) at diagnosis, but at other cutaneous sites, melanomas average is about 0.8 mm in thickness. As a result, both overall and disease-free survival rates are worse for those with melanomas in the foot.\(^2\) Additionally, foot melanomas are found more frequently in older adults than younger ones because they have greater difficulties performing self-examinations. Together with an initial erroneous diagnosis, these circumstances can result in a considerable diagnostic delay.\(^3\) Because melanomas in this location frequently occur in amelanotic form, simulating trivial vulgar warts, subungal hematomas, vascular or diabetic ulcers, or other chronic inflammatory diseases seen in the elderly, accurate diagnosis can be challenging (Figure).\(^4,5\) The literature provides numerous reports of incongruous treatments of these lesions that resulted in considerable diagnostic delays, often leading to patient death. Furthermore, a frequent message in secondary prevention campaigns for the fight against melanoma is aimed precisely at physicians, podiatrists, physiotherapists, and other professionals who for other reasons inspect the feet. Such professionals, if educated and adequately trained, could refer a patient with a suspected foot lesion to a surgeon or dermatologist for confirmatory diagnosis.

We believe that although it is important to diagnose mycoses or diabetic ulcers in older adults, a neglected melanoma not only lowers quality of life for the patient, but it can also lead to death. Consequently, we believe that this topic should not only have been mentioned but also stressed in the review by James et al.

Vincenzo De Giorgi, MD\(^a\)
Flavia Silvestri, MD\(^a\)
Federico Venturi, MD\(^a\)
Federica Scarfi, MD\(^a\)
Luciana Trane, MD\(^b\)
Piero Covarelli, MD\(^c\)

\(^{a}\)Section of Dermatology, Department of Health Sciences, University of Florence, Florence, Italy
\(^{b}\)Cancer Research “Attilia Pofferi” Foundation, Pistoia, Italy
\(^{c}\)Department of Surgery, University of Perugia, Perugia, Italy

https://doi.org/10.1016/j.amjmed.2021.02.009

References