



## Preface

# Head and Neck Cutaneous Cancer



Cecelia E. Schmalbach, MD, MSc, FACS    Kelly M. Malloy, MD, FACS  
*Editors*

Cutaneous cancer is the most commonly diagnosed malignancy in the United States with an estimated 3.5 million cases of nonmelanoma skin cancer diagnosed annually, in addition to 60,000 invasive melanoma cases.<sup>1,2</sup> The incidence is growing at epidemic proportions: there has been a 263% increase in cutaneous squamous cell carcinoma (cSCC) between the time periods of 1976 to 1984 and 2000 to 2010.<sup>1</sup> This exponential growth is attributed to our aging patient population, outdoor lifestyle changes, increased use of tanning beds, sun-worshipping tendencies, advances in solid organ transplantation, and changes to the ozone.<sup>3</sup>

The cost to diagnose and treat this growing patient population of cutaneous cancer patients continues to skyrocket as well. Within the United States, the total annual national cost increased from \$3.6 billion to \$8.1 billion between the time periods of 2002 to 2006 and 2007 to 2011.<sup>1</sup> This 125.2% increase is exorbitant when compared with the 25.1% cost increase reported for all other cancer sites. Consequently, cutaneous cancer is a public health priority with a significant associated economic burden.

The majority of cutaneous cancers occur on the sun-exposed regions of the head and neck. For this reason, we dedicated an entire issue of *Otolaryngologic Clinics of North America* to this important topic. In the following pages, we present a contemporary and comprehensive overview of the most common cancers, such as melanoma, cSCC, basal cell carcinoma (BCC), as well as the rarer tumors that head and neck surgeons may encounter in practice (Merkel cell carcinoma, sarcoma). All treatment modalities are discussed, from surgical therapies and innovations, to radiation therapy, systemic treatment options, and injectables. Challenges faced in treating both the immunosuppressed and the geriatric patient population are also highlighted.

The field of cutaneous cancer has experienced exciting changes over the past decade. From the diagnostic standpoint, sentinel node biopsy has become standard of care for localized melanoma<sup>4,5</sup> and Merkel cell carcinoma.<sup>4,5</sup> Impactful modifications have been made to the American Joint Committee on Cancer staging for both

melanoma<sup>2</sup> and cSCC,<sup>6</sup> allowing for better risk stratification and counseling of our patients. Alternative treatment options are finally available for patients with resectable and often unresectable skin cancers, from hedgehog inhibitors for advanced BCC and programmed cell death inhibitors-1 in advanced cSCC,<sup>7</sup> to biologic therapies in melanoma.<sup>4</sup> We have witnessed the first significant impact in melanoma survival rates since 1968, thanks to these developments in targeted therapy and immunotherapies.<sup>8</sup>

Building a comprehensive issue on a diverse and rapidly changing field would not be possible without a cadre of talented and dedicated surgical, medical, and radiation oncologists. We would like to thank our authors for sharing their time, passion, and expertise in their respective areas of head and neck cutaneous malignancy. They are truly the leading experts in the field.

Cecelia E. Schmalbach, MD, MSc, FACS  
3440 North Broad Street  
Kresge West, 3rd Floor, 309  
Philadelphia, PA 19140, USA

Kelly M. Malloy, MD, FACS  
1500 East Medical Center Drive  
#1904 TC Spc 5312  
Ann Arbor, MI 48109, USA

*E-mail addresses:*

Cecelia.Schmalbach@tuhs.temple.edu (C.E. Schmalbach)  
kellymal@med.umich.edu (K.M. Malloy)

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