Mohs Surgery
(Mohs micrographic surgery)

A quick overview

www.mohsclinics.com
What is Mohs surgery?

Surgical technique to remove skin cancer with ad hoc histologically controlled margins
Procedure:

During the procedure of Mohs micrographic surgery, the skin cancer is removed a thin layer at a time with a small margin of healthy skin surrounding it, under local anesthesia.

Each layer is immediately checked under the microscope by either the dermatological surgeon. The layer of skin is examined in horizontal sections.

A further layer is taken from any areas in which the tumour remains until all of the skin cancer has been fully removed.

The advantage of removing the skin layer by layer in this way is that as little healthy skin around the skin cancer is removed, which keeps the wound as small as possible. Secondly, your dermatological surgeon can be almost certain that the skin cancer is fully removed on the day of the procedure.

(http://www.bad.org.uk)
Principle of Mohs surgery and of conventional (simple) excision

A. Mohs surgery

I

II

III

B. Conventional excision

I

I a

I b

I c

6
5
4
3
2
1

Visible tumour

Unvisible tumour
Benefits:

- 100% margin control
- Tissue sparing
- Cosmetical and functional outcome is best
- Highest cure rates: the cure rate for Mohs micrographic surgery is high for both primary (new) tumours (up to 99%) and recurrent tumours (up to 95%). This compares to a cure rate of approximately 90% for a primary tumour removed by the traditional surgical methods
- Tumour-free and wound closed in one day
Indications:

- Recurring or previously incompletely removed basal cell carcinomas or squamous cell carcinomas.

- Infiltrative basal cell carcinomas / squamous cell carcinomas (where the edges of the skin cancer can be difficult to see so traditional methods risk incomplete removal).

- Basal cell carcinomas / squamous cell carcinomas in areas where it is cosmetically better to remove as little healthy skin as possible e.g. eyelids, nose, ears, lips.

- Basal cell carcinoma / squamous cell carcinomas at the site of previous surgery or radiotherapy.

- Very large tumours (where removing as little healthy skin as possible can help minimise the size of the wound).
Mohs Clinics:

- Leading Mohs surgery clinic in Europe, based in the Netherlands
- >1700 Mohs surgeries / year
- Low complication and infection rate (<1%)
- High patient-satisfaction score (>8/10)
- Minimal waiting list
- UK patients are welcomed via Operations Abroad Worldwide

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Some pictures...

! Open wounds en cosmetic outcomes are shown
Basal cell carcinoma

Cancer-free defect after 3 surgery rounds
Basal cell carcinoma

Cancer-free defect after 2 surgery rounds

Final cosmetic outcome
Basal cell carcinoma

Cancer-free defect after 3 surgery rounds

Final cosmetic outcome
Thank You!
Please visit

www.mohsclinics.com

www.mohsklinieken.nl