

Basal Cell Carcinoma - BCC

■ Management

- Advise that metastases and death are extremely rare. Vast majority cause no major problem, but should be treated
- Without treatment, BCCs persist, enlarge, ulcerate, invade, destroy surrounding structures
- Tx options depend on histological subtype and location:
Liquid nitrogen cryotherapy (requires experience),
curettage & electrodesiccation (most common Tx), excision,
Mohs micrographic surgery, imiquimod cream for superficial subtype, 5-FU, CO2 laser, radiation therapy
- Advise on sun protection

[OCR from images:]