

## **Slow Moh's Surgery**

### **What is micrographic surgery?**

This is a specialised form of surgery to remove certain skin cancers (tumours) and is also called Moh's surgery, after the doctor who developed it.

Your surgeon removes the visible portion of your tumour and then removes further tissue that may contain cancer cells, one layer at a time. This tissue is then examined under a microscope. If it contains cancer cells, another layer of tissue is removed and examined. This is repeated until all the cancer cells have been removed.

### **Why should I have Moh's surgery?**

Mohs surgery maximises the chance of your tumour being completely removed, while minimising the amount of surrounding normal skin that needs to be taken away. This will ensure only the cancerous tissue is removed. The size of the wound left behind depends on the number of layers that need to be removed. We do not know until we complete the surgery how large or small the wound may be, or what type of reconstruction may be necessary.

### **When is Slow Moh's used?**

- For removal of dermatofibrosarcoma protuberans (DFSP)
- For removal of Lentigo maligna and lentigo maligna melanoma
- For removal of Squamous Cell Carcinoma (SCC)
- Also for patients known to have an infectious disease such as hepatitis or HIV.

### **What is Slow Moh's?**

Slow Mohs involves a layer of skin being removed using the micrographic technique explained above, and a secure dressing placed over the wound on completion of surgery. The tissue is looked at using a special substance and the results are usually available around 5-7 days later. You will go home after your surgery and return to the hospital roughly a week later if further treatment is necessary. We will phone you with the results and arrange a suitable date and time to return for further surgery or reconstruction (repairing the area treated). The procedure is repeated until the tumour is completely removed, this process may take a few visits.

### **What happens on the day of surgery?**

This procedure is usually completed under local anaesthetic (LA), but occasionally a general anaesthetic (GA) is required. We recommend that you do not drive yourself or use public transport in case you feel unwell when going home after the procedure. You may eat and drink as normal if you are having a local anaesthetic unless you have been told otherwise by the Consultant whose care you are under. You will be advised by Pre Op assessment on eating and drinking if you have a general anaesthetic. You may bring a family member or friend with you, but please be aware if space is limited, we may have to ask them to leave the department.

The doctor will inject the area where your tumour is with a local anaesthetic. This numbs the area, so you will not feel any pain during surgery and you will remain awake throughout the procedure. If you are particularly anxious, we may give you a mild sedative to help you relax.

Once the anaesthetic has taken effect, the visible ('clinically evident') part of the tumour is removed, along with a small margin of normal skin tissue. This tissue is taken to the laboratory where it will be looked at under a microscope to check for cancer cells. The results may take up to a week to be returned to the surgeon. Because of this you will be discharged home with a dressing on the treated area as previously discussed. This process will be repeated until all the tumour cells have been removed.

You will be discharged home the same day with a dressing on the wound. Advice on care of the wound, showering, pain relief and emergency contacts will be given to you by the nurse caring for you.

### **Reconstruction (repair) of the wound**

This will be discussed with you at your outpatient appointment. Occasionally the choices may change due to the extent of your surgery. We may need to refer you to a Plastic Surgeon for reconstruction. This may be done at the Norfolk & Norwich University Hospital or we may refer you to a Plastic Surgeon closer to home for this. If appropriate your reconstruction may be completed by the Doctor who completed the Moh's procedure. These options will be discussed with you as soon as possible.

### **What are the possible problems to look out for?**

There are potential complications with any operation. Fortunately these are rare. However it is important that you are aware of them and have the opportunity to discuss them with your surgeon/ Specialist Nurse.

- **Bleeding** at wound site
- **Pain** after local anaesthetic has worn off.
- **Nerve damage:** occasionally nerves may be involved in your surgery and this may leave the area feeling numb for a few weeks to several months after surgery as a result of bruising to the nerves. This is usually only temporary but rarely for some patients this sensation may never return to normal.
- **Infection:** It is important that you get treatment quickly if you think you may have an infection. If you notice increasing redness of your wound or it is painful, or you have flu like symptoms and a high temperature, tell a doctor or contact us on the details given at the end of this information sheet. It is important to contact us as soon as possible because infections caught early are easier to treat.
- **Scarring:** You will have a scar following completion of your surgery.

Any reconstruction that may be necessary following complete removal of the tumour will be discussed with you.

**Work:** The Doctor/Surgeon will advise you on time off work. A fit note can be provided by the hospital. Once you are discharged, speak to your GP who will give you a fit note to cover until you are fit to go back to work.

### **Follow up after surgery**

Once the results are available we will call you and if necessary arrange another appointment for further treatment or you may be given an appointment to return for reconstruction of the wound if the results are clear. Once your surgery is complete you will be given advice on wound care and follow up appointment for wound check and / or removal of stitches. This may be arranged closer to home if possible with your GP/Practice Nurse or local hospital.

We usually review you a week after surgery and then 3 months thereafter.

### **Useful contacts**

Should you experience any problems following discharge listed in this leaflet please contact us on one of the numbers below:

**Dermatology Day Treatment Clinic, 8.30am- 5pm Mon-Fri: 01603 288386**  
(Dermatology patients only)

**Skin Cancer Clinical Nurse Specialists, 8 am- 5pm Mon- Fri: 01603 288365**

**Plastics Dressing Clinic, 8am-5pm Mon-Fri: 01603 288014** (Plastic Surgery patients only)

**EAUS (Emergency Assessment Unit- Surgical), Out of hours/ weekends/ bank holidays: 01603 286424** (Plastic surgery patients only)

**Emergency Out Of Hours Advice: Call NHS 111** (Non plastics patients)



