

**Report to Annual General Meeting of BAPRAS: December 2019****Report from: Skin Special Interest Group****Name of Representative: Rowan Pritchard Jones****Report**

It has been a practice changing year for melanoma surgery with significant changes in clinical practice that are being rapidly embedded by the surgical community far in advance of any direct guidance from NICE. Moreover, in contrast to the more usual state of affairs where surgeons push to operate more, we are in fact pulling back from radical dissection surgery following sentinel node biopsy. This has consequences for training and now the most common dissection is the more challenging surgery required for nodal failure.

Sentinel node biopsy is a fully established technique nationally, not least as it allows access to adjuvant therapies for patients found to have microscopic disease.

TIG Fellowships in skin cancer thrive and Mohs training for plastic surgeons continues to progress.

We face a sudden drop in the surgical trials opportunities for skin cancer patients as EAGLE FM is concluding as has RATIONALE MCC. MelMart-2 has not successfully attracted funding yet to move from pilot to full trial leaving only MiniTub still recruiting.

There continue to be innovative opportunities with ElectroChemoTherapy with new technology becoming available and new centres joining the Inspect Group.

There sadly remains a paucity of research options for patients with SCC or BCC, although immunotherapy is now becoming an increasingly important option.

Close working with Oncology remains essential and SSMDT reform therefore crucial to allow discussion of increasingly complex patients.

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<b>Actions</b>