Appropriate Use criteria for Mohs Micrographic Surgery for Patients and Caregivers: Pt 3

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Extramammary Paget's Disease

As a caregiver, it is important to understand the available treatment options for Extramammary Paget's Disease (EMPD). Two primary surgical methods, Mohs micrographic surgery (MMS) and wide-local excision (WLE), are commonly considered.

- 1. Mohs Micrographic Surgery (MMS): Mohs Micrographic Surgery is a precise surgical technique that involves removing layers of tissue and examining them under a microscope to ensure complete tumor removal while preserving healthy tissue [1,2]. Studies have shown that MMS effectively treats EMPD with high cure rates and good cosmetic outcomes [3,4]. This makes MMS particularly beneficial when tissue preservation and achieving a good appearance are important [2]. According to The Mohs Appropriate Use Criteria (AUC), MMS is suitable for EMPD regardless of its location [5].
- 2. Wide-Local Excision (WLE): Wide-Local Excision involves surgically removing the tumor along with a margin of healthy tissue. While commonly used, WLE's effectiveness for EMPD remains uncertain [6]. Some studies suggest that WLE may lead to higher rates of incomplete removal and tumor recurrence compared to MMS [7]. Additionally, achieving adequate margins with WLE can be challenging due to the vague borders of EMPD lesions [8].
- 3. **Comparative Studies**: Limited studies comparing MMS and WLE for EMPD suggest potential advantages of MMS. One study found that MMS resulted in higher rates of complete tumor removal and lower recurrence rates compared to WLE [9]. Another study reported better cosmetic outcomes and fewer complications with MMS [10].

Conclusion: While both MMS and WLE are options for treating EMPD, MMS offers advantages in precise margin control, lower recurrence rates, and improved cosmetic outcomes. Therefore, MMS may be preferred, especially when tissue preservation and achieving a good appearance are important.

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