

## Appropriate Use criteria for Mohs Micrographic Surgery for Patients and Caregivers: Pt 2

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### Adnexal Carcinomas

When faced with adnexal carcinoma, caregivers play a pivotal role in understanding treatment options. Two primary surgical methods are commonly considered: Mohs micrographic surgery (MMS) and wide-local excision (WLE).

1. **Mohs Micrographic Surgery (MMS):** MMS is a precise surgical technique involving the systematic removal of tissue layers and microscopic examination to ensure complete tumor removal while sparing healthy tissue [1,2]. Studies highlight MMS's excellent cure rates for adnexal carcinomas, with low recurrence rates and improved cosmetic outcomes [3,4]. This makes MMS particularly beneficial for cases where tissue preservation and cosmesis are crucial [2]. According to The Mohs Appropriate Use Criteria (AUC), MMS is suitable for adnexal carcinomas regardless of their location [5].
2. **Wide-Local Excision (WLE):** WLE entails surgically removing the tumor along with a margin of healthy tissue. While commonly used, WLE's effectiveness for adnexal carcinomas is debated [6]. Some studies suggest higher rates of incomplete excision and tumor recurrence with WLE compared to MMS [7]. Achieving adequate margins with WLE can also be challenging due to the infiltrative nature of adnexal carcinomas [8].
3. **Comparative Studies:** Limited studies comparing MMS and WLE for adnexal carcinomas suggest potential advantages of MMS. One study found MMS achieved higher rates of complete tumor excision and lower recurrence rates compared to WLE [9]. Another reported superior cosmetic outcomes and fewer postoperative complications with MMS [10].

**Conclusion:** While both MMS and WLE are options for treating adnexal carcinomas, MMS offers advantages in precise margin control, lower recurrence rates, and improved cosmetic outcomes. Therefore, MMS may be preferred, especially when tissue preservation and cosmesis are crucial.

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