

About Merkel cell carcinoma

This provides general information about Merkel cell carcinoma – please ask us any questions you have.

What is Merkel cell carcinoma?

Merkel cell carcinoma (MCC) is a rare type of skin cancer. It is sometimes called by other names, including primary small cell carcinoma of the skin. The tumour originates from Merkel cells, which are stimulated by the nervous system to release hormones into the blood. This is why the tumour is sometimes also called a neuroendocrine tumour. Although it is rare, an increasing number of cases are being diagnosed worldwide.

What does it look like?

An MCC tends to appear as a firm, painless lump on the skin. It can be red, pink or violet in colour. It is usually less than 2cm in diameter but can be larger. MCCs tend to grow rapidly and this change in size may be what causes it to be noticed. MCCs are usually found on areas that are exposed to sunlight, especially head, neck, arms and legs. If we find a lump that might be a sign of MCC, we then do a biopsy (removing a sample from the lump to examine microscopically).

What causes Merkel cell carcinoma and who is most at risk of developing it?

Like most skin cancers, exposure to the sun increases the chance of developing an MCC. People with MCC who have been over-exposed to sunlight should have their skin checked by a dermatology doctor to ensure that they have not developed other kinds of skin cancer. Prevention of skin cancers involves protection of the skin from the sun. This includes wearing protective clothing, avoiding the sun completely from 11am till 3pm and wearing hats and sun cream with a high SPF (sun protection factor).

Research has also shown that people with certain medical conditions are more likely to develop MCCs. These include people with cancers of the blood (leukaemia), people on medicines that suppress their immune system and people with HIV infection. Research is also investigating whether a virus called Merkel cell polyomavirus contributes to the development of MCCs.

What happens once Merkel cell carcinoma is diagnosed?

If the biopsy confirms a diagnosis of MCC, the next step is to find out whether the cancer has spread elsewhere in the body as this will help determine which treatment options are suitable. This will involve doing a CT scan of the chest, abdomen and pelvis. If the skin cancer was found on the head or neck then a CT of the head and neck will also be done.

Treatment

A cancer specialist will discuss the risks and benefits of the treatment options with you, and help you decide which is the best choice for you. There are various treatments depending on the size of the MCC skin cancer, where on the body it is and whether it has spread to other parts of the body. If the cancer has been found before it has had a chance to spread, surgery to remove the skin tumour offers the best chance of cure.

During the surgery, the surgeons may also take a biopsy of the closest lymph node to which the cancer is likely to have spread. This is called a sentinel lymph node biopsy and is done by injecting a special dye and watching to see which lymph node it flows to. This can be a helpful way to check whether all the cancer has been removed during the surgery. If cancer

is found in the sentinel lymph node another operation may be needed to remove all the neighbouring lymph nodes.

Once surgery has been completed, patients may be offered radiotherapy to the areas where the tumour has been removed to reduce the risk of the cancer coming back. Radiotherapy is treatment with X-rays that can kill off cancer cells but may cause some side effects, such as redness and tenderness of the skin. We will discuss these with you.

If the cancer has spread to other parts of the body, then other treatments (such as with drugs) may help to control the disease.

What happens after the treatment?

It is important for patients who have had MCC to be monitored closely, and generally we see patients in the out-patient clinic every three months for the first three years. Regular scans (including chest X-rays and CT scans) help determine whether the treatment has been successful or if the cancer has recurred. If the cancer does come back, patients themselves are usually the first to notice it, and are encouraged to return to clinic early if they are concerned.

Several different specialists will be involved in the care of patients with MCC, including a dermatologist, oncologist, plastic surgeon and a cancer nurse specialist who is normally the main point of contact for patients.

Support services

Coping with MCC can be difficult and some people find it helpful to talk about how it is affecting their day-to-day life. There is a skin cancer nurse specialist who can provide information and support to patients and their families in addition to a Macmillan Information Centre in the oncology out-patient clinic. There are counsellors available for those who require further support.

- Macmillan Cancerline www.macmillan.org.uk 0808 808 2020
- Cancer BACKUP www.cancerbackup.org.uk 0808 800 1234
- National Skin Information www.nlcn.nhs.uk

If you would like a large print or audio version of this information, please ask a member of staff.



Royal Free Hampstead **NHS**
NHS Trust



 The Information Standard	This organisation has been certified as a producer of reliable health and social care information.
Certified member	www.theinformationstandard.org