



EUROPEAN ACADEMY OF
DERMATOLOGY AND VENEREOLOGY

Information Leaflet for Patients (and for General Practitioners)

DERMATOPATHOLOGY: SKIN UNDER THE MICROSCOPE

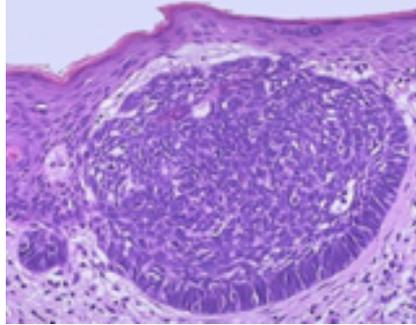
The aim of this leaflet

This leaflet is designed to help you understand more about dermatopathology. It provides information about how a diagnosis is made: by the laboratory testing of small amounts of skin tissue (“samples”) removed from your body. This leaflet also explains what happens to your results after testing has been performed.

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What is dermatopathology?

Dermatopathology (or histopathologic study) is considered the gold standard for the diagnosis of skin lesions, either cancerous or inflammatory.

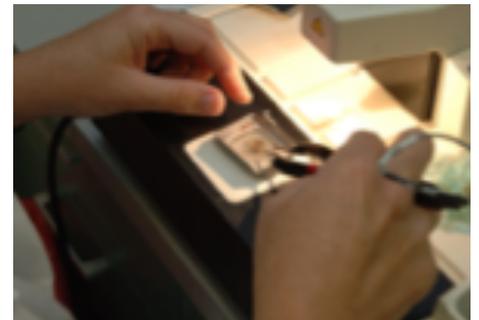


What are the steps involved in histopathologic study?

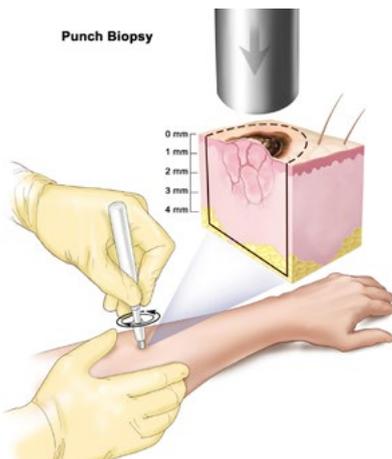
1. Your dermatologist removes a small piece of your skin, called a biopsy, with a small scalpel under local anaesthesia. There are two types of skin biopsies: incisional and excisional.

Removal of the entire lesion (*excisional biopsy*) is indicated in all suspected skin tumours, while removal of part of the lesion (*incisional biopsy*) is indicated in all inflammatory skin rashes or when a skin tumor is too large or located in difficult site. A superficial *shave biopsy* can be done for raised lesions. *Punch biopsies* yield full-thickness (or deeper tissue) samples and can be used for lesions that require dermal or superficial subcutaneous tissue for diagnosis. For deep lesions involving deep subcutaneous fat (such as panniculitis), a scalp biopsy is more suitable rather than punch biopsy

2. The sample is sent to a pathology laboratory for processing.



3. The sample is prepared by embedding it in transparent wax in the form of a small block.



4. A thin “slice” is removed from the block and stained with special dyes. A dermatopathologist then examines the slice with a microscope, which is a real medical interpretation that cannot be performed by a machine.



5. The dermatopathologist makes a diagnosis.



6. The dermatopathologist sends the written results of the sample to your dermatologist, who will then discuss the diagnosis with you and decide on the appropriate treatment and follow-up.

Skin biopsy with histopathologic study is recommended for any doubts in clinical judgment, whether they be diagnostic or

therapeutic. The histopathologic report not only clarifies/confirms the diagnosis and helps in clinical or surgical management, but also represents a crucial and psychological factor in the clinician-patient relationship, enhancing trust in the clinician about the clinical diagnosis and also the patient's trust in its management. ■

