

Computed tomography useful for staging head, neck melanoma

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"Considering CT as part of the staging process for patients with head and neck [melanoma](#) is currently standard in our department, and may be relevant for other treatment centers to consider," the authors write.

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(HealthDay)—Patients with head and neck melanoma benefit from the introduction of initial staging using computed tomography (CT), according to research published online Aug. 21 in *Head & Neck*.

Anna Hafström, M.D., Ph.D., from Skane University Hospital in Lund, Sweden, and colleagues retrospectively reviewed medical charts for 198 consecutive patients with primary T1b-T4b head and neck melanoma who were clinically asymptomatic for [metastatic disease](#) and were referred for sentinel lymph node biopsy (SLNB) procedures between 2004 and 2014.

The researchers found that initial CT identified clinically occult melanoma metastases in 8.1 percent and advanced second primary tumors in 3.5 percent of patients. One percent of patients had CT findings that were false-negative, while 6 percent had false-positive findings. For patients with true-positive CT findings, overall survival was lower than for the other patients (P

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