

Outcomes across nonmelanoma skin cancer treatments similar

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percent. BT had better "good" cosmesis than EBRT, but was similar to CE and MMS. There were no significant differences seen for "fair" or "poor" cosmesis. Overall, one-year recurrence rates were low (0.8, 0.2, 2.0, and 0 percent for CE, MMS, EBRT, and BT, respectively).

"For T1-T2N0 [skin](#) cancers, BT and MMS have improved cosmesis over EBRT and CE," the authors write. "It is unclear whether this is because of treatment superiority or selection and reporting bias."

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(HealthDay)—Outcomes for nonmelanoma skin cancers are similar at one year, regardless of treatment type, although cosmetic results vary, according to a review published in the Oct. 15 issue of *Cancer*.

Charles T. Lee, Pharm.D., M.D., from the Fox Chase Cancer Center in Philadelphia, and colleagues conducted a systematic literature review to compare the cosmesis and recurrence rates of conventional excision (CE), Mohs micrographic surgery (MMS), external-beam radiation therapy (EBRT), or brachytherapy (BT) for [basal cell carcinoma](#) and squamous cell carcinoma of the skin.

The researchers identified 24 CE, 13 MMS, 19 EBRT, and seven BT studies that included a total of 21,371 patients. For CE, EBRT, and BT, respectively, the summary effect size for "good" cosmesis was 81.0, 74.6, and 97.6 percent, respectively. Only one MMS study reported cosmesis, which had a "good" classification of 96.0

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