

### 中文摘要

**背景：**非黑色素瘤皮膚癌在皮膚癌中最為常見，其中基底細胞皮膚癌約佔 80%，鱗狀細胞皮膚癌約佔 20%。皮膚癌的治療方式包含：放射治療、冷凍療法、局部化學治療、刮除術、電燒法、傳統手術切除和莫氏顯微手術。治療非黑色素瘤皮膚癌最常使用的方法是手術切除。

**目的及目標：**在我們的醫院裏，我們回顧顏面皮膚癌的病患以及它們的治療癒後。

**材料及方法：**從 2009 年至 2011 年之間，我們分析 31 名顏面皮膚癌病人，包含病人的皮膚癌種類、手術細節及重建方式，並且分析了它們的存活率。

**結果：**在整形外科及皮膚科所有治療顏面腫瘤病患中皮膚癌佔了 1.6% (31/1893)。最常見的是基底細胞皮膚癌(BCC, 67.7%)，其次是鱗狀細胞皮膚癌(SCC, 32.3%)。在手術治療後，有 77.4% 的病人因術後缺損過大需要施行重建手術。經過平均 16.7 個月的追蹤，有二名病患復發(6.5%)。所有病患的存活率是 100%。

**結論：**傳統手術切除腫瘤和立即施行皮瓣重建的治療模式，在可接受的復發率中是一種好的治療模式。

**關鍵字：**非黑色素瘤皮膚癌、鱗狀細胞皮膚癌、基底細胞皮膚癌

## INTRODUCTION

Numerically, skin cancers do not rank among the ten most common cancers [1]. However, over the last several decades, there has been a progressive increase in the incidence of skin cancers, particularly cutaneous melanomas [2]. Besides melanomas, the other two most frequently occurring primary skin cancers are basal cell carcinoma (BCC) and squamous cell carcinoma (SCC). Together, SCC and BCC are referred to as the nonmelanomatous skin cancers (NMSC). NMSC is the most common human malignant tumor in the United States, with over 1.3 million cases diagnosed each year [3-5]. Treatment options for NMSC include both surgical and nonsurgical modalities. However, surgical management of NMSC requires preoperative planning and an in-depth understanding of most common reconstructive techniques, including primary closure, skin grafting, local tissue and distant flaps. The practitioner's decision regarding the meth-

od of treatment of NMSC is highly individualized and depends on patient age, cancer size, histologic subtype, and lesion site. No single therapy or technique can be used for every situation. The goals of treatment include complete removal of the cancer lesion as well as preservation of normal function and cosmesis of the involved region.

In this study, we analyzed the clinical characteristics and treatment outcomes of 31 patients with primary facial skin cancer obtained during a 3-year period at Hsinchu Mackay Memorial Hospital, located in the center of northern Taiwan.

## MATERIALS AND METHODS

The study population consisted of a subset of 31 patients with primary facial nonmelanoma skin cancer. From January 2009 through December 2011, these patients were diagnosed with primary facial nonmelanoma skin cancer by tissue biopsy at the hospital's Department of Dermatology. All 31 patients were treated with conventional surgical excision and immediate reconstruction by a plastic surgeon. Basal cell carcinomas (BCC) were excised and included 5 mm of grossly-normal skin around the lesion, while excision of squamous cell carcinomas (SCC) included at least 5 mm, and usually 10 mm of grossly-normal skin. All

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