

22. CRYOTHERAPY IN THE TREATMENT OF SUPERFICIAL FORMS OF SKIN CANCER

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Introduction. Basal cell carcinoma is a malignancy of non-melanocytic skin that arises from the basal cells of the epidermis or from follicular structures. The European Dermatology Forum, the European Dermato-Oncology Association and the European Organization for Research and Treatment of Cancer recommend as a first-line treatment for low-risk superficial basal cell carcinoma - topical treatment and destructive approaches (cryotherapy, laser ablation) with a rate of 94-99% recuperation, and complete surgery for high-risk basal cell cancers. Post-treatment patient monitoring is very important because the risk of recurrence at 5 years is 41%.

Case presentation. The patient X, 80 years old, was diagnosed with multiple basal cell carcinoma of the frontal, retroauricular and thoracic regions, stage II, T3N0M0. Cryosurgical treatment of the tumor was performed within the limits of oncological safety 3 times every 5 minutes. After 5 years the patient addresses repeatedly with a formation on the posterior skin of the left hemithorax and in the left temporo-mandibular region. He was hospitalized at the Oncological Institute of the Republic of Moldova in the section "Head and neck tumors" where he was diagnosed with a giant ulcerated basal cell carcinoma of the skin of the back of the left hemithorax T2N0M0 and basal cell carcinoma of the skin of temporo-mandibular left region with concretion in cellulo-adipose tissue, muscles and perineural- T3N0M0. The patient underwent surgical treatment in full volume, in 2 phases: electroexcision of the tumor of the face with plasty with mandibular flap and excision of the skin and tissue lesions. The postoperative period was satisfactory, the wound regenerated for the first time.

Discussion. The purpose of the discussions is to describe and interpret the data of the clinical case in relation to the already known specialized data. According to the results of the present study, one or two cryotherapy sessions should be effective and safe for the tumors of the skin.

Conclusion. Patients with multiple basal cell carcinomas are prone to both previous tumor recurrence and the development of new basal cell carcinomas. The literature is quite variable in relation to the recurrence rates of basal cell carcinomas, reporting rates between 10% and 67%. The latency period between surgery and recurrence can vary from two months to two years, occurring frequently in the first six months.