
Surgical Excision of BCC – Pros and Cons

1. General Advantages of Surgery

Highest cure rate

- About **96–98% cure rate for most BCCs**
- Works well for **most types and depths**

Histology (checking under the microscope)

- **Often** lets us know straight away if we didn't get it all and need to cut more out.
- If the initial biopsy missed a small pocket of an **aggressive type** of BCC it usually can still be called treated once it's been cut out

One treatment

- Usually done **in a single visit**

Tried and True

- Standard treatment well studied used for many years with reliable results

More fun for Dr Coleman

I just love doing surgery

2. General Disadvantages of Surgery

A scar is unavoidable

Healing and wound strength

Even after stitches are removed, the wound is still weak:

- **3–4 weeks:** ~20–30% strength
- **4–6 weeks:** ~30–50% strength
- **3 months:** ~80% strength

→ The wound needs to be **babied for several weeks**

Time and effort

- Usually **2–3 cancers treated per session**
 - If you get frequent skin cancers, this can add up over time – especially operations that have a prolonged recovery period
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Pain

- Surgery is generally **more uncomfortable** than non-surgical options
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Cost

- Gap typically varies from \$200 - \$1000 depending on type of procedure, location on the body and facilities in which the procedure is done
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3. Site-Specific Considerations

Face and Neck (most complex area)

Considerations

- Facial lesions generally have a higher risk of reoccurrence
- When done well facial wounds heal very well and can often be hidden in natural creases on the face
- If the wound heals poorly, it will be more noticeable
- Several important nerves and vessels that need to be avoided
- Often needs more complex repair (flap) → more time and cost

Specific risks

- Eyelid: pulling down (ectropion)
 - Nose: shape change
 - Lip: asymmetry
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Torso (chest, back, abdomen)

Considerations

- Higher tension → wider scars
 - Back particularly prone to:
 - Stretching
 - Hypertrophic scars
 - Physical activity restriction important
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Limbs

Considerations

Lower leg = highest complication risk

- Infection risk
- Dehiscence (wound pulling apart)
- Difficult areas:
 - Shin
 - Ankle
 - Behind knee

→ May need **flap or skin graft** (more time and cost)

4. Demographic Considerations

Mature patients (OLD) 55+

Considerations

- Looser skin → easier to close wounds
- Lower risk of thick/keloid scars
- Slower healing (especially legs)
- Higher risk of:
 - Infection
 - Graft failure

Younger patients (UNLUCKY) 20–55

Considerations

- Faster healing
 - Higher risk of:
 - Thick scars
 - Keloids (especially chest/shoulders)
 - Even with a good repair:
 - Even with an initially perfect closure, scars tend to **stretch more over time**
 - If you are getting BCCs at a young age you are going to have to treat many over the course of your life
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Work and Recovery

Location	Shower*	Stitches Out	Light Activity	Heavy Activity
Face	2–4 days	5–7 days	1–3 days	4+ days
Face (Graft)	7–14 days	5–14 days	2–7 days	7–14 days
Neck	2–4 days	7–12 days	1–3 days	10–14 days
Torso	2–4 days	7–14 days	1–3 days	14–21 days
Arm	2–4 days	7–14 days	1–3 days	10–21 days
Leg	3–4 days	10–14 days	2–3 days	14–28 days
Leg (Graft)	9–16 days	~14 days	3–5 days	21–28 days

*If wound is covered by a water tight dressing you can shower straight away