



Not Just Another Day at the Beach

Decision-making and the Treatment of Malignant Melanoma

by

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Part I—What?!

Sitting in the waiting room at the dermatologist's office, Bill couldn't believe what he had just heard. How could this be happening to him? Sure, he sunburned easily and his hair was red, but he was an accountant! How could he have skin **cancer**?

When he had developed the sore on his chest a month ago, he had thought nothing of it. It looked kind of ugly, but it didn't hurt and it was small, so he just ignored it. His wife, Betty, however, was a bit concerned, given how easily he sunburned. After watching the "thing," as she referred to it, get larger over a period of a few weeks she pressured him to get it looked at.

He made an appointment with a dermatologist who ordered a **biopsy**, but told him not to worry, the test was just a precaution. That was two weeks ago. Today the doctor had told him that he had a **tumor**. He had just been diagnosed with **malignant melanoma**, a form of skin cancer.

All he could think was, "What am I going to do?"

Questions

Using the Internet, your textbook, or any other source you wish, complete the following tasks. Please *type* your definitions and questions and list your sources. Keep in mind what makes an Internet source valid.

1. Define in your own words each of the four terms displayed above in boldface.
2. List and briefly describe the stages of cancer.
3. List the risk factors for melanoma.
4. List five questions that our patient should ask his doctor before deciding on a treatment option. List five questions that the doctor should ask the patient. These questions should be your own.

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Part II—Two weeks later...

Two weeks later, Bill found himself in the same waiting room again. Dozens of questions ran through his mind. Why hadn't he thought of any of them when he was first diagnosed? He had called and asked about treatment options so he could make some kind of decision about what to do. He had lots of answers but the choices just weren't clear to him or Betty. If he did nothing at all, the cancer would kill him, but how could he figure out what treatment option would work the best? Would any of them work at all?

He still had one question, one that nobody could answer for sure: *What should he do?*

Questions

Now that you have had your questions answered and have a bit more information about melanoma, use the Internet, your textbook, or any other sources to answer the big question: *What should Bill do?*

To do that, you can start by answering these “smaller” questions:

1. What are the possible treatments for cancer? How do those treatments kill cancer cells? Which work well for melanoma?
2. Given what you now know about melanoma, what do *you* think Bill should do?

You must make a decision; no waffling. Write at least one page (typed) exploring Bill's options and explaining your reasons for deciding on a treatment. Make sure to explain why you arrived at your decision by discussing the treatment options available. Include a list of sources you consulted.

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Part III—Three years later...

“How? Why?” Bill thought. The doctor had just told him the biopsy was positive! It was unbelievable that the cancer could be back after three years. He thought he was cured! The swelling in his jaw hadn’t worried him at all. He had figured that it was just an infected salivary gland. He had one of those before. He went to the doctor and started on a 10-day course of antibiotics, but the antibiotics didn’t work. The swelling got worse while he was taking the drugs. He went back to the doctor, figuring he would just get another type of drug. To Bill’s surprise the doctor ordered a biopsy.

A biopsy! Why? He had done everything the doctor told him to do. He had surgery to remove the tumor and extensive skin, fat, and muscle from around the tumor. He didn’t have chemotherapy or radiation, as his lymph nodes seemed normal and no sign of cancer was found anywhere else. Given the 80 percent, five-year survival rate for his type of tumor, he had relaxed and thought no more about it except during his frequent trips to the doctor for screenings. He thought everything was fine. But he was wrong.

His submandibular lymph nodes had been invaded by melanoma.

Questions

Now that you know what course of treatment Bill chose and how it turned out, using the Internet, your textbook, or any other source you wish, answer the question: *Now what?*

Given what you now know about melanoma, what do you think Bill should do? What were his options? Did he have any? His case took place in the late 1980s. Would other options be available to him today? If he were diagnosed today, what should he do?

Write at least one page (typed) explaining what you think the patient should do given his diagnosis. List any sources you consulted.

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Part IV—Conclusion

The case we have been working on is a real case. The patient was diagnosed with stage II melanoma in December 1986 at the age of 53. He had the tumor and some skin removed. He continued to be seen regularly by a dermatologist. He was in good health during this time and suffered no problems related to the cancer.

In December 1989, his submandibular lymph glands tested positive for melanoma. He was diagnosed with late stage III melanoma. Because this type of cancer doesn't respond to conventional chemotherapy, he was enrolled in a clinical trial testing the effects of the cytokine Interleukin-2 on advanced melanoma. His lymph glands were removed and the tumors kept alive for later use. The plan was to wait for another tumor to appear and then use the old tumor to train his immune system to fight the new tumor. He recovered well from the surgery and suffered very mild symptoms of numbness and some facial paralysis, but was otherwise healthy and pain-free.

In March 1991 another tumor was discovered in his liver. He had progressed to stage IV. Unfortunately, the cancer cells the doctors had tried to keep alive had died. So the liver tumor was removed and kept alive while the doctors waited for further metastasis. Again, he recovered well from the surgery and continued to be symptom-free.

In June 1991 a tumor was discovered in his lung. Plans were made for treatment, but again technical difficulties prevented the patient from undergoing treatment. By August 1991 he had eight separate metastases to his intestines, heart, bones and abdominal lymph glands and was too sick to undergo the experimental treatment. He had radiation and interferon treatment in an unsuccessful attempt to alleviate some of his pain.

He died in April 1992 at age 58, five years and four months after the initial diagnosis of stage II melanoma.

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