





Mainly coiled vessels  
Some scale







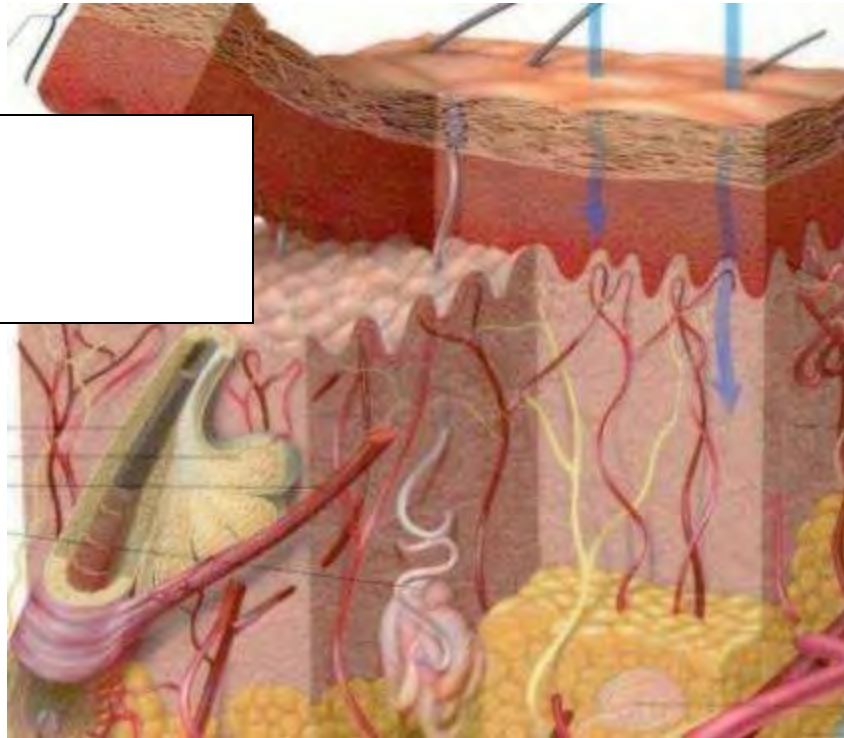
# Invasive SCC





## Dermis:

- SCC



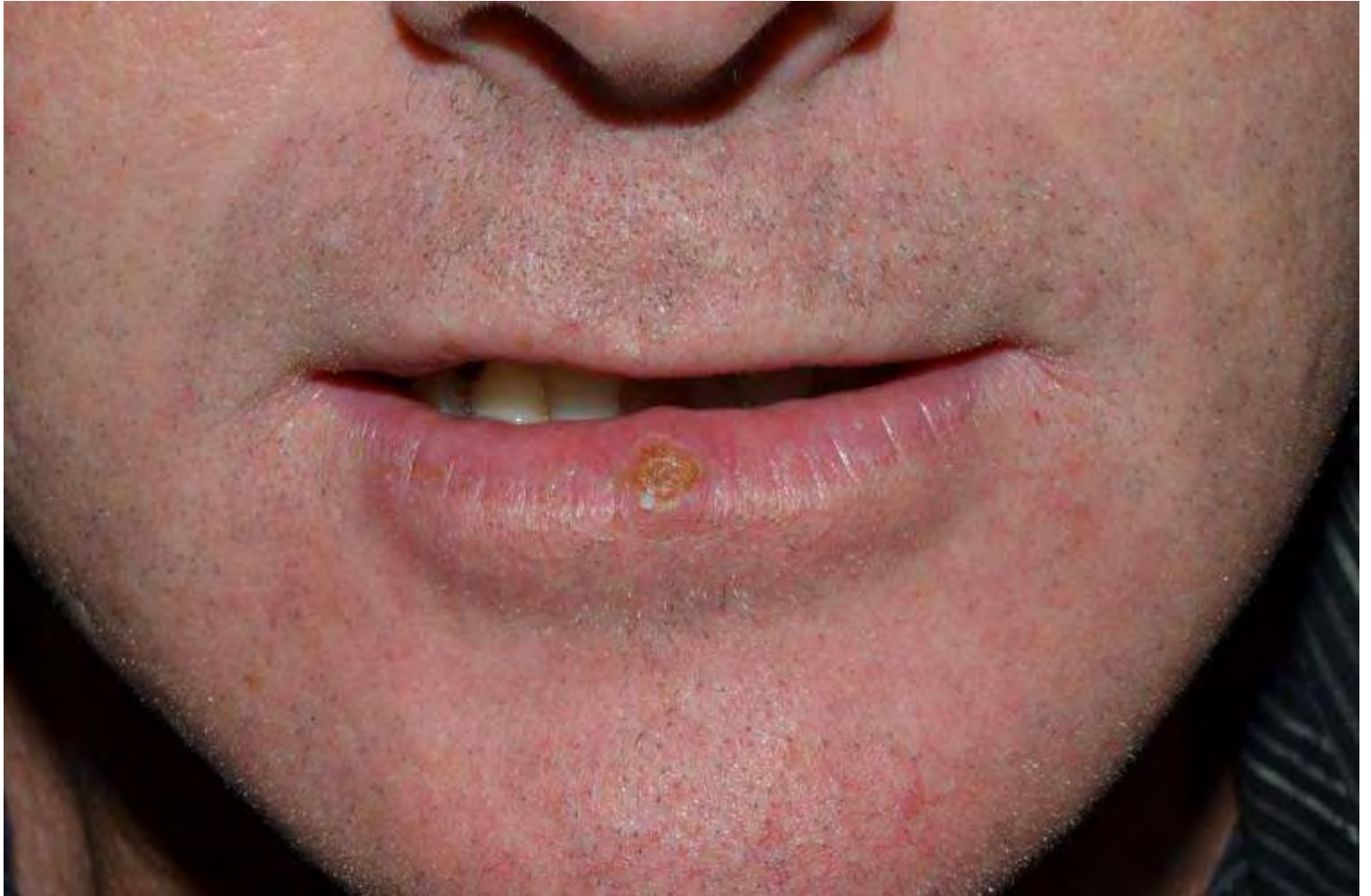
# Squamous Cell Carcinoma (SCC)

- Most SCC's arise from **sun** damage
- Due to **chronic** sun exposure
- **HPV** role in induction but not maintenance
- Mainly affect sun **exposed skin**
- **Sun screen** use decreases risk of SCC



# SCC's – can metastasize

- High risk sites
  - Lip
  - Nose
  - Ear
  - Scalp

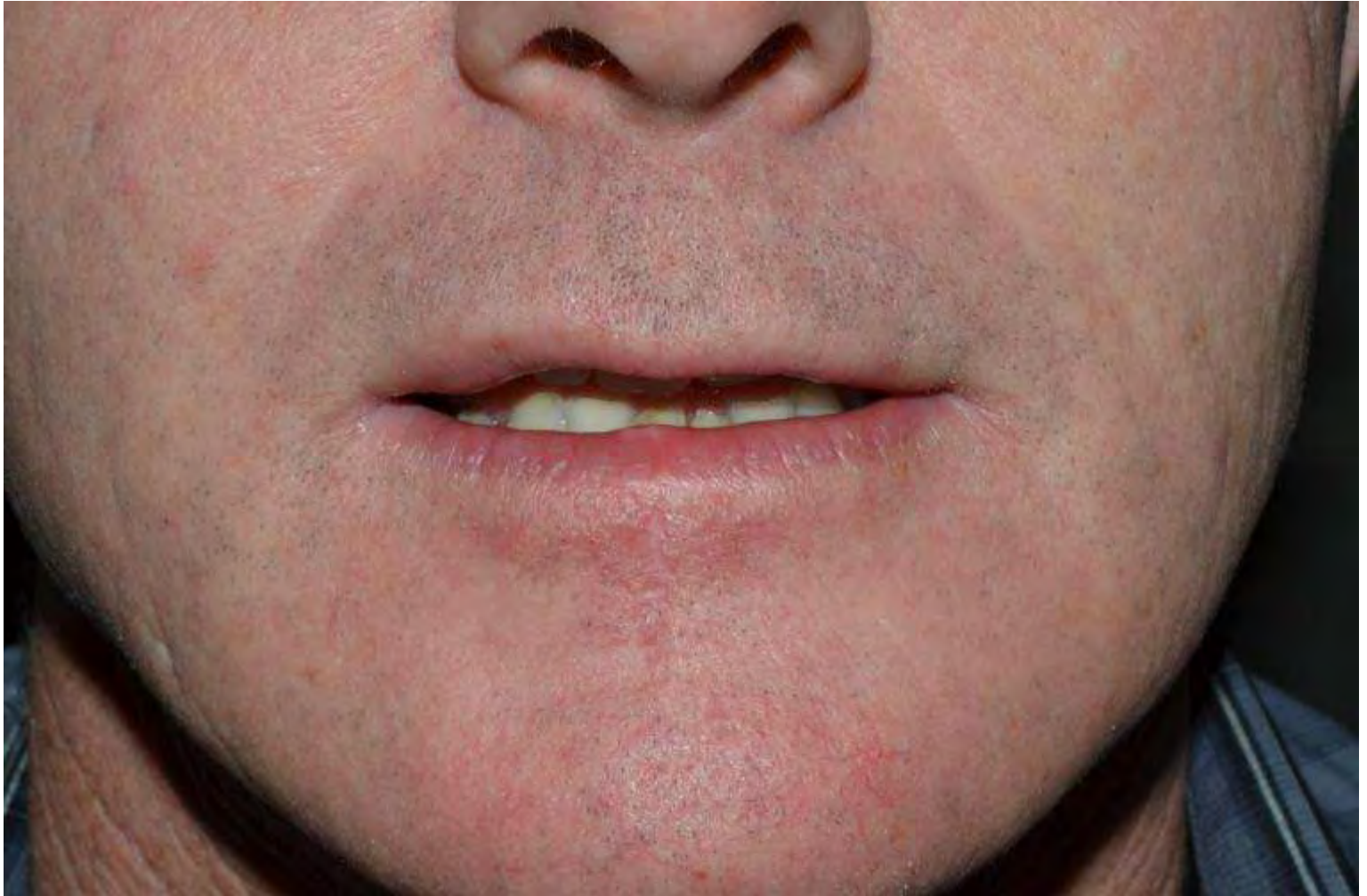








6 weeks post op









# mdSCC

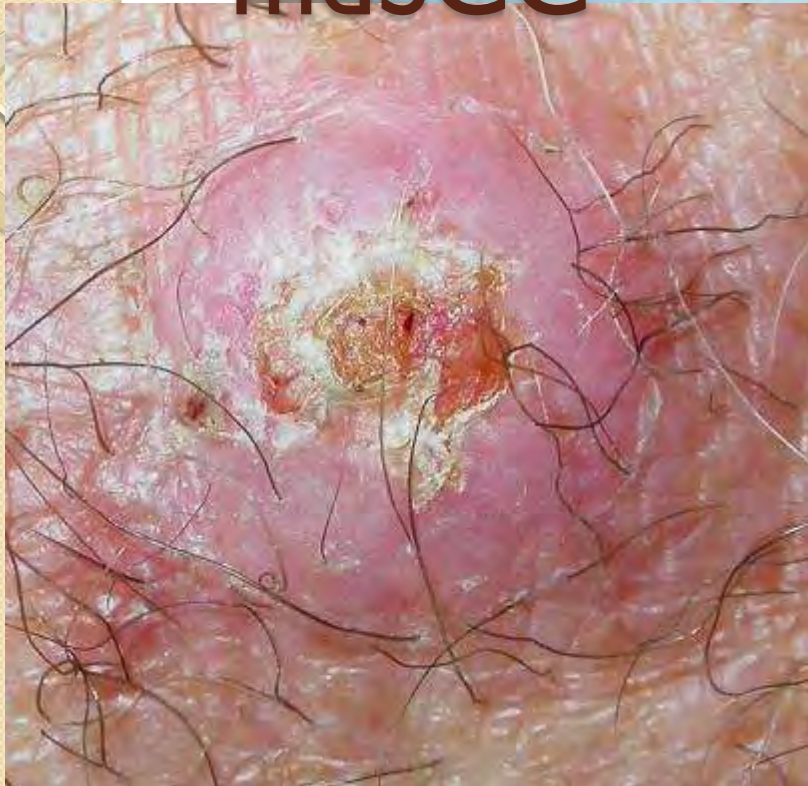






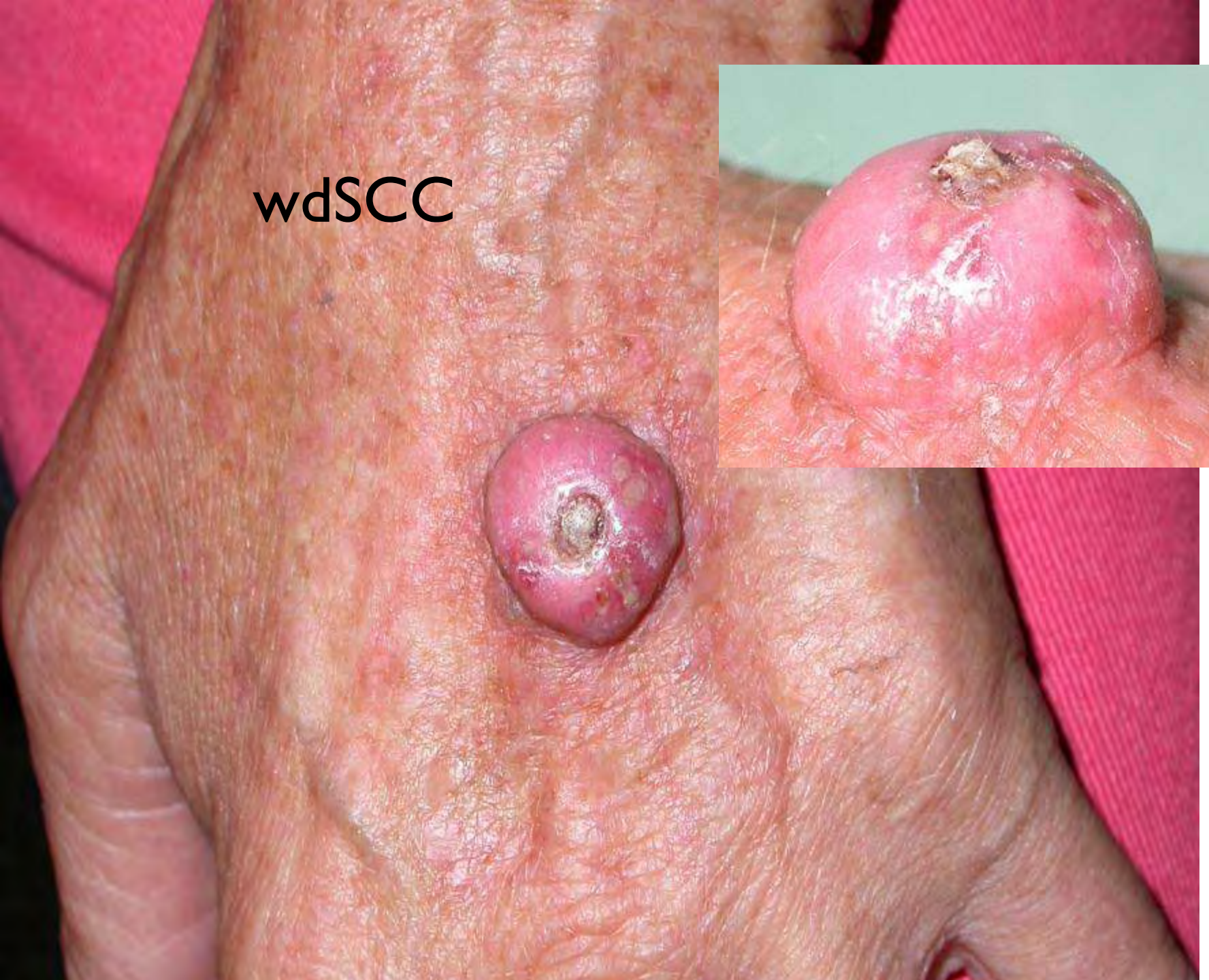


mdSCC





wdSCC





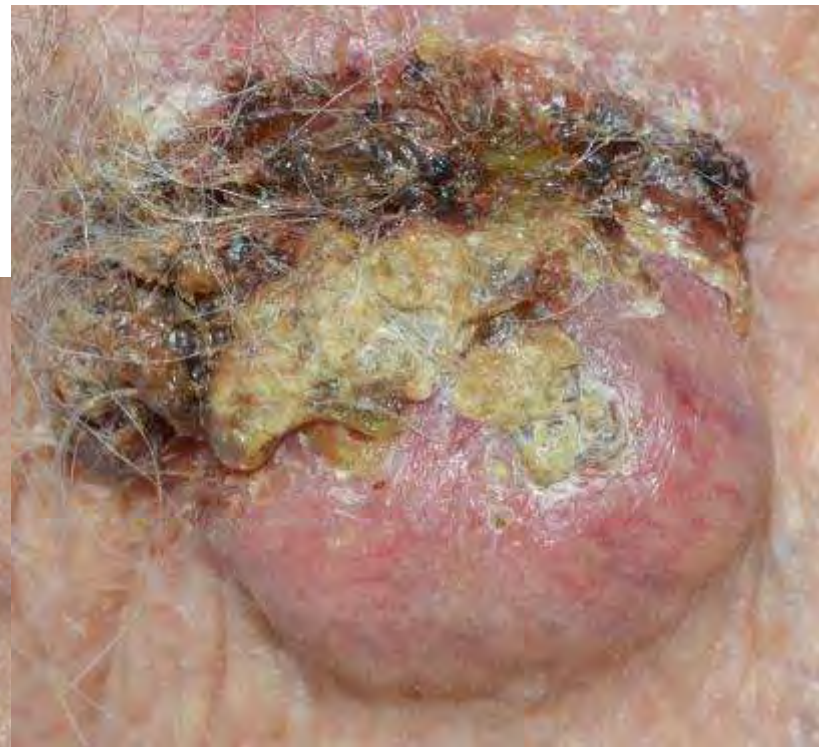


# mdSCC





# mdSCC



# Non healing sore..

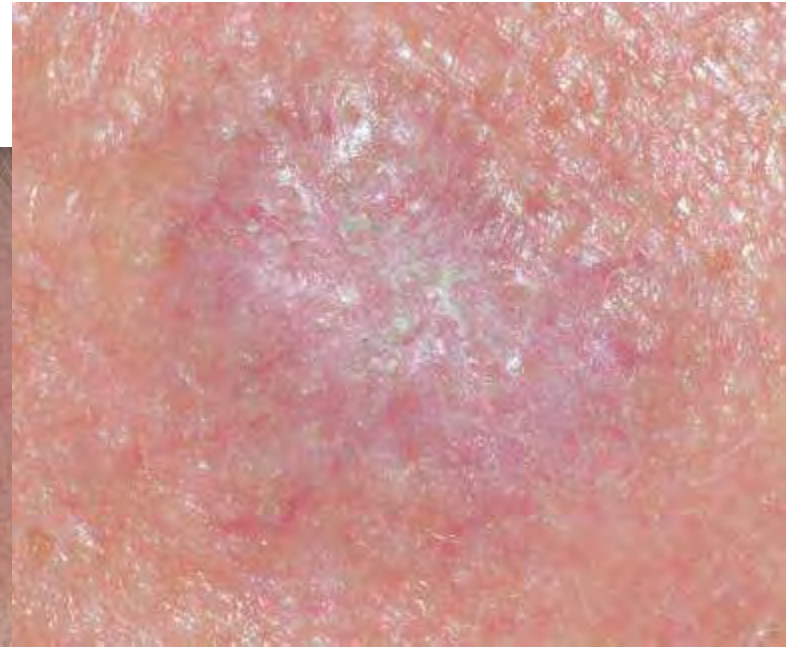




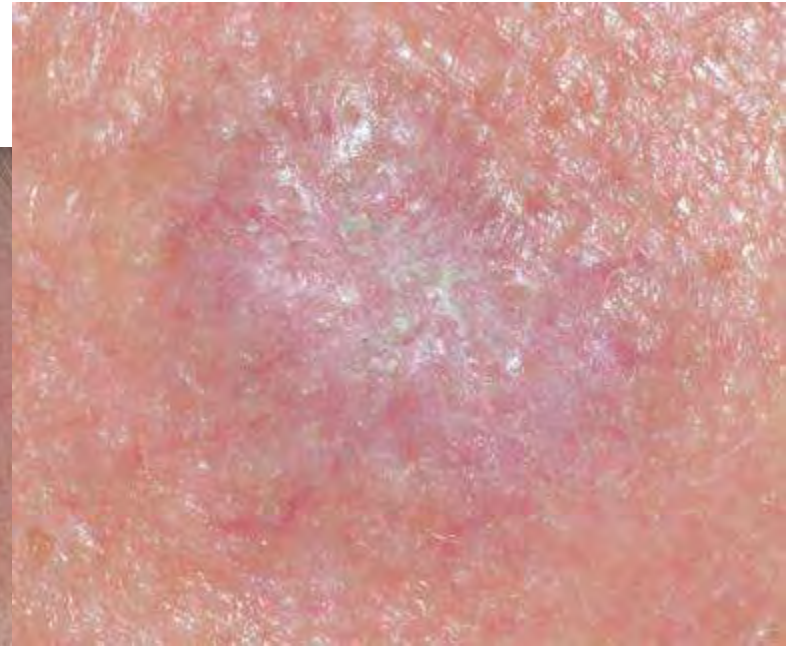
# Poorly differentiated SCC







# Pd SCC







## Basal Cell Carcinoma

- Superficial
- Nodular
- Aggressive
  - Micronodular
  - Sclerosing
  - Infiltrating



# Basal Cell Carcinoma

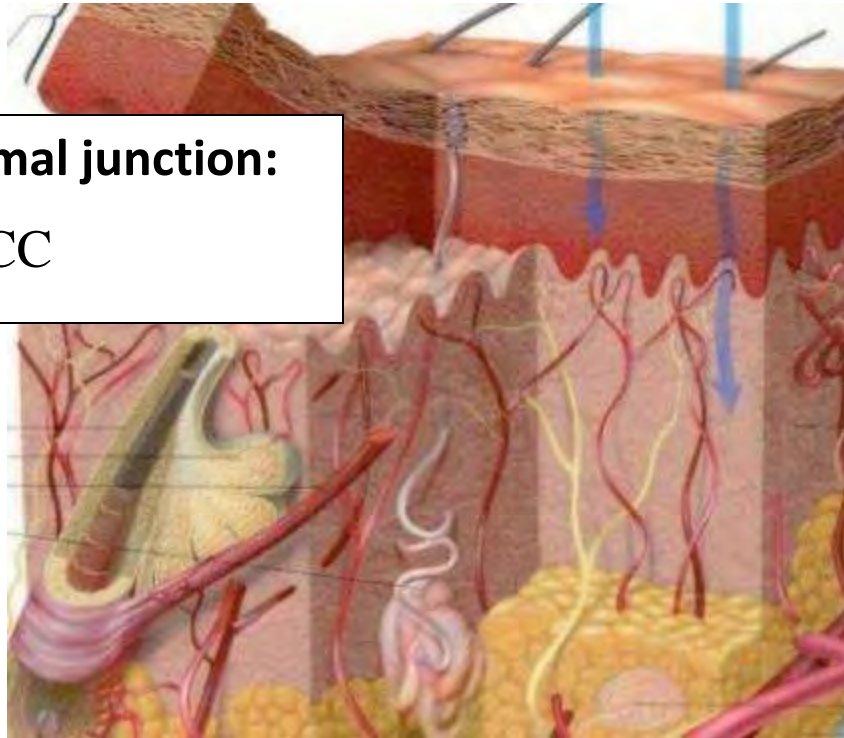
- **Most common** cancer in humans
- Most lesions are related to excess **ultraviolet exposure** – they are multifactorial in origin.
- **Fair skin**, burn easily, do not tan most at risk.
- If neglected or inappropriately managed can cause **significant** morbidity and even death.





## **Epidermal dermal junction:**

- Superficial BCC

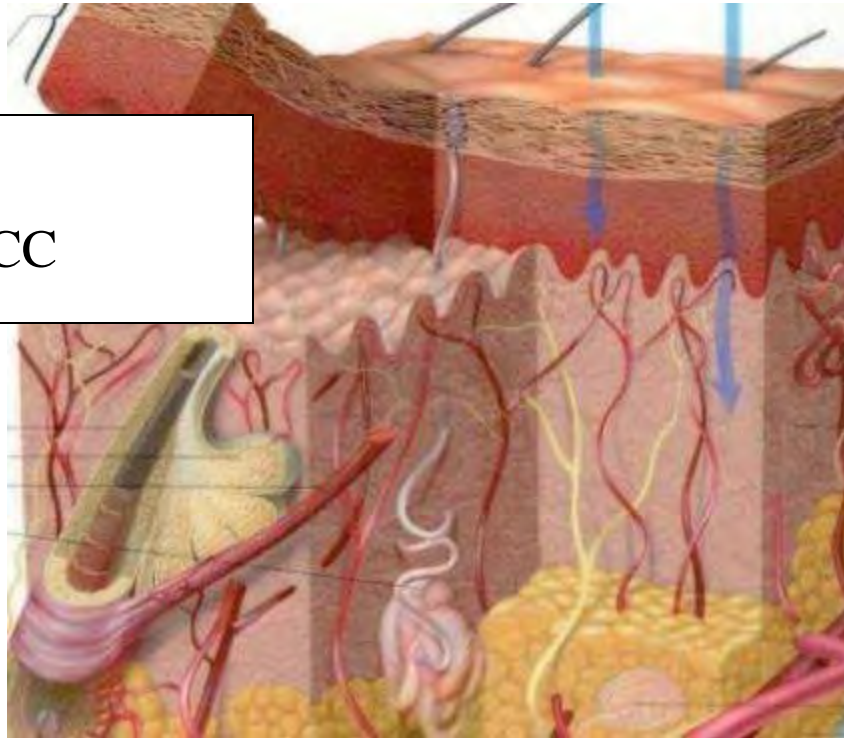






## **Dermis:**

- Nodular BCC

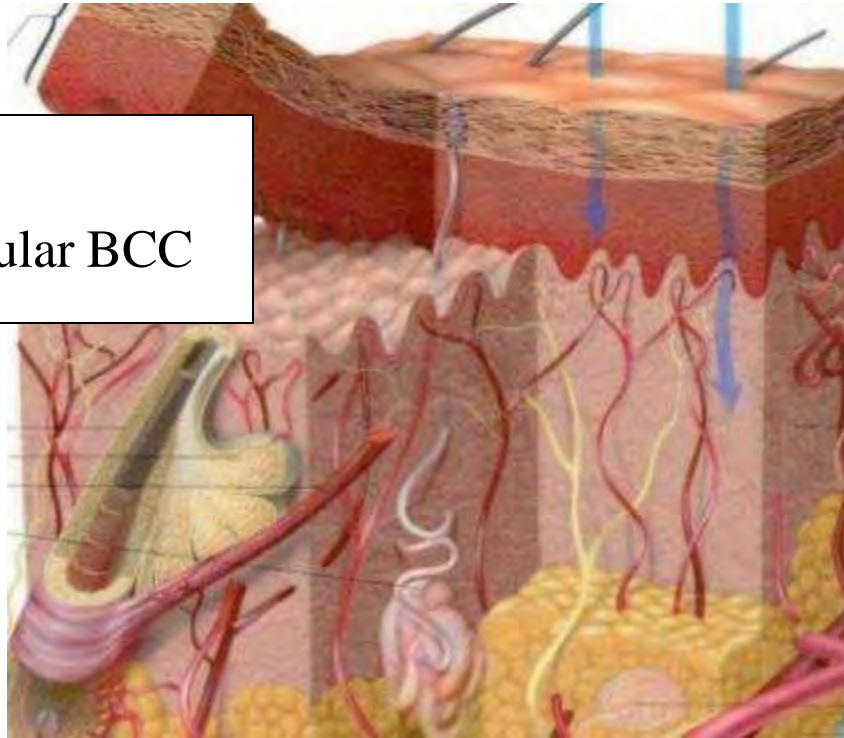






## Dermis:

- Micro-nodular BCC

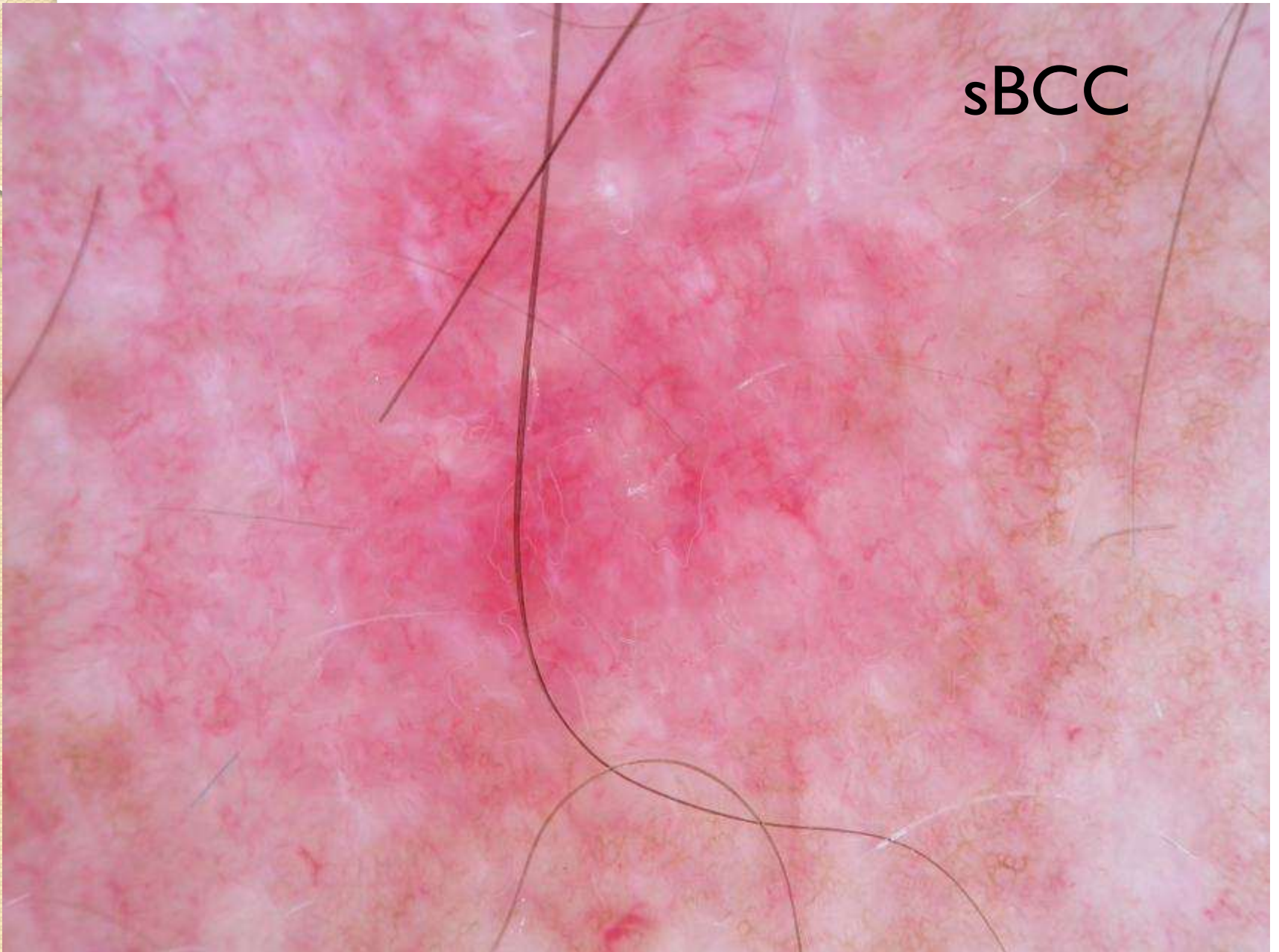








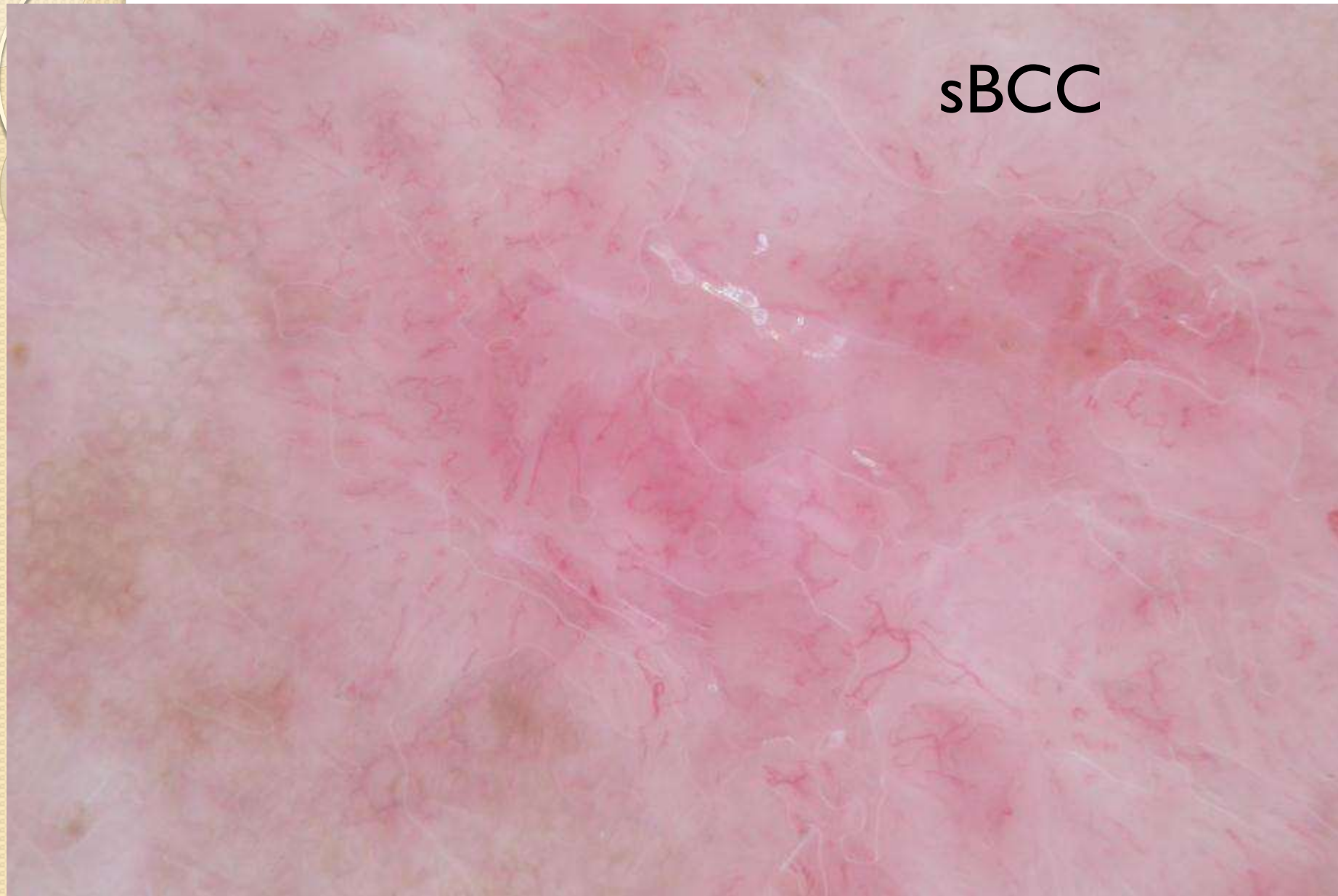
sBCC







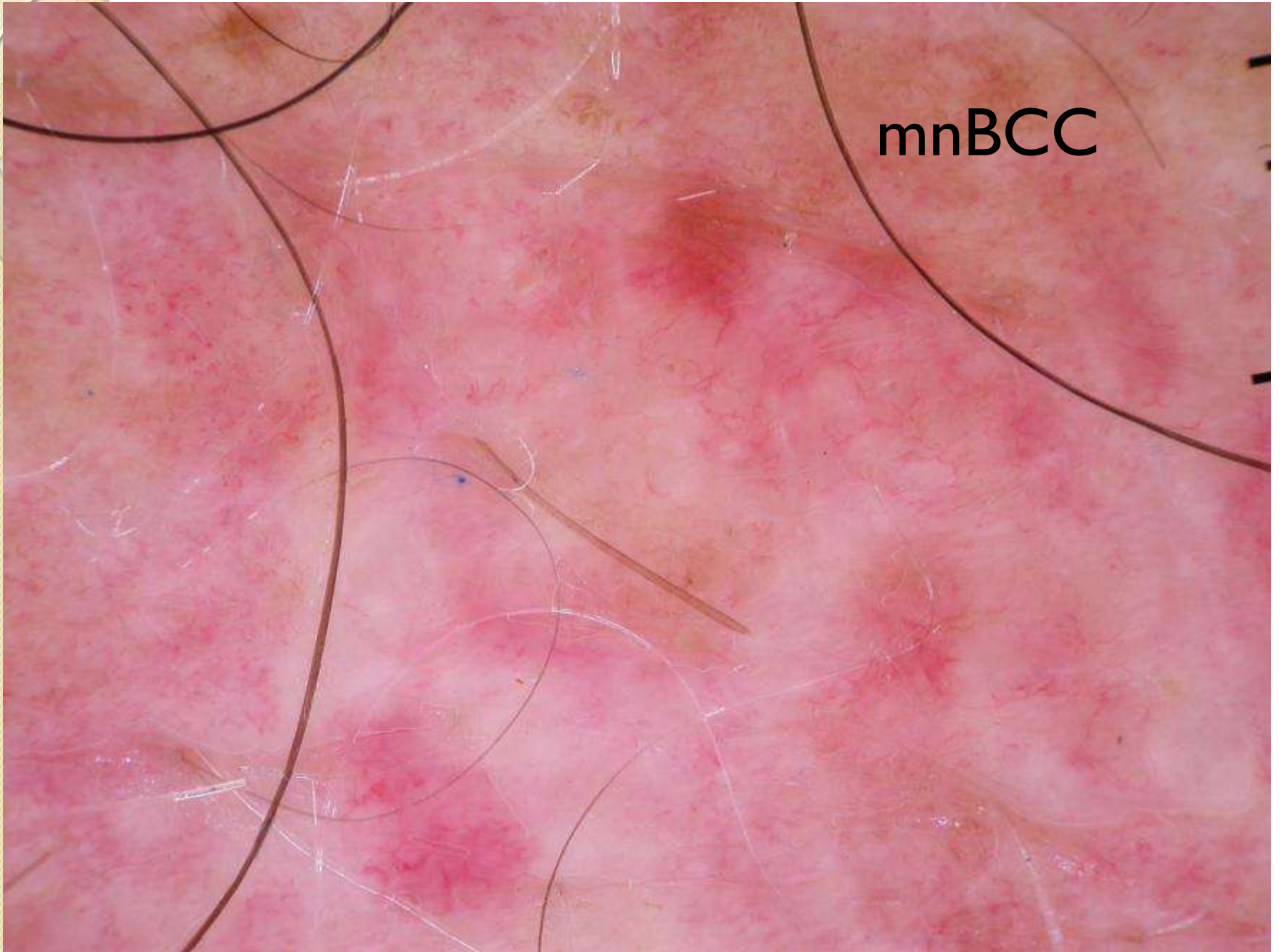
sBCC







mnBCC





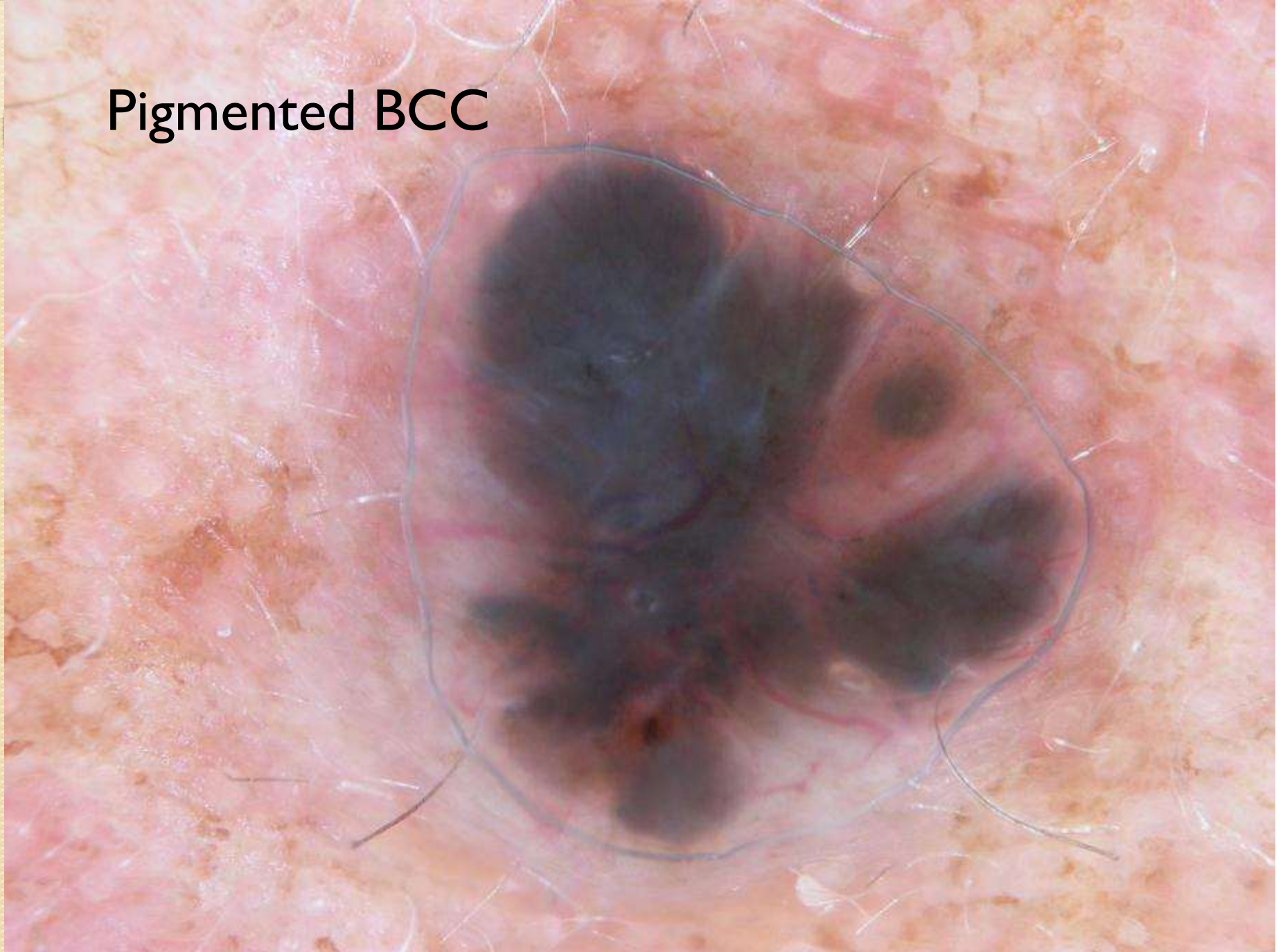








**Pigmented BCC**





# Damage from BCC can be underestimated



