# Article information:

How we treat locoregional melanoma - PubMed  
<https://pubmed.ncbi.nlm.nih.gov/33930656/>

# Article summary:

1. The incidence of cutaneous melanoma has been increasing in the past 30 years and is the most lethal form of skin cancer.

2. In recent years, the management of locoregional disease has changed with the addition of the IIID stage to TNM (tumor-node-metastasis) classification.

3. Immunotherapies and combination treatment of BRAF and MEK inhibitors have improved recurrence-free survival in patients with locally advanced melanoma.

# Article rating:

May be slightly imbalanced: The article presents the information in a generally reliable way, but there are minor points of consideration that could be explored further or claims that are not fully backed by appropriate evidence. Some perspectives may also be omitted, and you are encouraged to use the research topics section to explore the topic further.

# Article analysis:

The article is a review of current treatments for locoregional melanoma, which is a type of skin cancer that can be completely resectable in most cases but carries a high risk of relapse if it is thicker or involves regional lymph nodes. The article provides an overview of recent changes to TNM classification, as well as new treatments such as immunotherapies and combination therapies for BRAF V600E/K-mutated melanoma that have improved recurrence-free survival rates.

The article appears to be reliable and trustworthy, as it cites several sources from reputable journals such as ESMO Open, Recent Results Cancer Res., Curr Treat Options Oncol., Ann Surg Oncol., and Cochrane Database Syst Rev.. Furthermore, it includes a conflict of interest statement that discloses any potential biases from authors who are affiliated with certain pharmaceutical companies. Additionally, the article does not appear to contain any promotional content or partiality towards any particular treatment option; instead, it presents both sides equally by providing an overview of current treatments without advocating for one over another.

The only potential issue with this article is that it does not explore counterarguments or missing points of consideration regarding current treatments for locoregional melanoma. However, this could be due to the fact that it is a review article rather than an original research paper; thus, its purpose is to provide an overview rather than delve into deeper analysis or discussion on potential risks associated with different treatment options.

# Topics for further research:

* Locoregional melanoma prognosis
* Adjuvant therapy for locoregional melanoma
* Side effects of immunotherapy for melanoma
* Combination therapy for BRAF V600E/K-mutated melanoma
* Risk factors for locoregional melanoma recurrence
* Cost-effectiveness of locoregional melanoma treatments

# Report location:

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