

Removal of Facial Skin Lesion

Patient information leaflet

Removal of Facial Skin Lesion

This leaflet has been designed to give more understanding of the forthcoming treatment to patients undergoing removal of a skin lesion on the face or neck.

How is it done?

The procedure can be carried out under:

1. Local anaesthetic - an injection will be used to numb the area and the further procedure is meant to be painless.
2. Local anaesthetic and sedation - in addition to a local anaesthetic injection you can be given an injection into your arm. This makes you feel relaxed and less aware of the procedure.
3. General anaesthetic – in some cases patients are put to sleep completely for the procedure.

Which method is best for you will be discussed with you before you sign any consent form for your operation. The amount of time that the removal takes obviously varies depending on the size of the area involved.

The Procedure

The area will be cleaned with an antiseptic solution and special ink used to mark out the piece of skin to be removed. After the lesion is removed depending on the size the defect can be closed in different ways:

- If the area is small the surrounding skin can be gently pulled together and closed with stitches. Some of these stitches may be dissolvable but often stitches on the skin need removal after a week.
- A neighbouring area of skin can be used being lifted and moved round to close the defect. Once again a combination of dissolvable and removable stitches is often used. If it is necessary to raise a flap this does leave a larger scar but wherever possible the flap will be designed such that the scar lies in natural skin creases.
- Sometimes it is necessary to repair the wound with a piece of skin ('graft') taken from elsewhere usually behind the ear or just above the collarbone. These sites are chosen because they already have an excess of skin. Stitches are used again and dressing is placed for around 10 days.

What to expect afterwards?

- Pain - after a few hours when the local anaesthetic wears off - painkillers might be required (Paracetamol, Neurofen) are usually enough.
- Swelling/bruising – some swelling and bruising is expected and tends to be worse for the first few days after surgery but usually settles after one or two weeks.
- Bleeding - this is an unlikely problem if the wound is stitched. If it occurs it can usually be stopped by applying pressure over the area for at least 10 minutes with a gauze or a handkerchief. If the bleeding does not stop please contact the department.
- Infection - you will be instructed on wound care post operatively and it is important that you follow them carefully in order to prevent infection.
- Going back to work? - in most of the cases you will be going home the same day. If local anaesthetic only used you can drive to and from the hospital. Going back to work depends on the type of work you do and it may be best to take the rest of the day off.

- If sedation or general anaesthetic used you may well not be able to drive (24 hours after intravenous sedation and for 48 hours after a general anaesthetic). In those cases you will need to bring somebody with you.

- Another appointment - arrangements will be made prior to leaving the hospital if dressings or stitches need to be removed. You will also be given review appointments and if indicated biopsy results will be discussed with you at one of those appointments.