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## **Total Body Photography and Dermatoscopic Monitoring of Skin Lesions**

Examination for skin cancer and melanoma relies on history-taking (information which you provide) and physical examination, including with a dermatoscope, to discover clues to malignancy. This process discovers about 90% of the melanomas we detect. However, it is known that approximately 10% of melanomas are featureless<sup>1</sup> which means that they do not have clues to melanoma and cannot even be recognised with a dermatoscope. This concurs with our experience with 99 of 989 melanomas over the last 16 years being detected by photographic interval monitoring. Detection of such melanomas requires side-by-side examination of photographs taken at different times.<sup>1</sup>

**Total Body Photography (TBP):** This involves the use of a semi-automated Fotofinder™ camera which takes pictures of your skin. This takes about 15-minutes, is performed by a nurse skin-cancerdiagnostician and costs \$100. There is no Medicare rebate for this service.

**TBP is offered** to all patients at our practice who choose to have regular skin checks and is very valuable as a base-line resource. It means that when you have a skin check in the future, we can refer to these photographs to see if a suspect spot is new or has changed.

**TBP is recommended** for patients at high-risk for melanoma (previous melanoma, strong family history of melanoma or patients with multiple moles)

**For high-risk patients**, we also offer **TBP with Detection**. That is **TBP** repeated after an interval of time (usually 1 or 2 years), with the photographs taken at those different times compared both manually by the nurse skin-cancer-diagnostician and using the detection software. The nurse sorts through lesions flagged by the software, discards those due to artefact like hair or other fibre, inflammatory lesions, obviously harmless spots like age-warts, and takes dermatoscopic images of the others. This process is called **TBP with Detection**. It takes approximately one to one and a half hours and costs \$200. There is no Medicare rebate for this service.

**Dermatoscopic Monitoring of Skin Lesions:** TBP with Detection is followed by an appointment with the doctor (charged at normal rates with normally eligibility for Medicare rebates). At this skin-check appointment the doctor assesses the lesions discovered by **TBP with Detection** and if action is appropriate either schedules them for excision, or for **Dermatoscopic Monitoring** (repeating and comparing the dermatoscopic photograph) at a following appointment. For subsequent appointments with the doctor, in which skin lesions are monitored by the nurse skincancer-diagnostician, there is a consultation surcharge of \$15 for which no Medicare rebate is claimable.

*Every melanoma starts its life as a minute lesion, too small to detect, and while no method can guarantee not to miss a melanoma, we believe that the method described above gives the best chance of detecting featureless melanomas, before they become invasive and life-threatening.*

**References** 1. Babino, Lallas, A., Agozzino, M., Alfano, R., Apalla, Z., Brancaccio, G., Giorgio, C. M., Fulgione, E., Kittler, H., Kyrgidis, A., Papageorgiou, C., & Argenziano, G. (2021). Melanoma diagnosed on digital dermoscopy monitoring: A side-by-side image comparison is needed to improve early detection. *Journal of the American Academy of Dermatology*, 85(3), 619–625