

Merkel Cell Cancer

Information for patients, relatives and carers

 For more information, please contact: Macmillan skin cancer clinical nurse specialist
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Merkel cell cancers are a rare type of skin cancer. They develop in merkel cells which are in the top layer of the skin.

These cells are near the nerve endings and they help us respond to touch. Merkel cell cancers are a rare type of neuroendocrine tumour.

The causes of merkel cell cancer

As with other types of skin cancer long term exposure to sunlight increases your risk of getting merkel cell cancer.

Other factors that can increase your risk include:

- Ultraviolet light treatment, PUVA (psoralen ultra violet treatment), for skin conditions such as psoriasis.
- Conditions or treatments that can weaken your immune system, including people who have had an organ transplant.

The symptoms of merkel cell cancer

Merkel cell cancer usually appears as a lump on the skin. The lumps are usually bluish red in colour and about 1 to 5 cm across, although they are sometimes larger. The skin over them is not usually broken (ulcerated). They are most often found in the areas of the body that get the most direct sun – the head, neck, arms and legs. Merkel cell cancer tends to grow quickly and can spread to other areas of the body.

Tests and staging for merkel cell cancer

Most people who are diagnosed with merkel cell carcinoma will need to have further tests to see if the cancer has spread.

You may be asked to have a:

- Chest X-ray
- Ultrasound scan
- CT scan, PET-CT scan or MRI scan.

Treatment for merkel cell cancer

If merkel cell cancer is only in the surface layers of skin, the main treatments are either radiotherapy and/or surgery. This is a rare cancer so treatment will be discussed at a specialist skin cancer meeting in Leeds or Hull and the treatment will be carried out either in a specialist centre or locally.

The team of doctors should include a:

- A Skin Cancer Specialist (Dermatologist)
- A Surgeon (Plastic or Maxillofacial)
- Clinical Oncologist

If there is a decision to proceed with surgery the aim will be to remove all of the cancer cells; you may hear the term 'clear margins'. This means that all the signs of the cancer have been removed. To make sure of this, the surgeon will send the tissue that they have removed to the laboratory. A specialist will examine it very closely to make sure there is a clear margin of healthy tissue around all the cancerous tissue that has been removed. Your doctor will also be able to explain whether or not you need to have any lymph nodes removed and whether you will need any further treatment or scans afterwards.

It is quite common for specialists to recommend radiotherapy after surgery. The aim of the radiotherapy is to kill off any cancer cells that may have been left behind, which are too small to be seen.

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Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Macmillan skin cancer nurse specialist, The York Hospital, Wigginton Road, York, YO31 8HE, telephone 01904 721719 or email Macskinmail@york.nhs.uk

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

Please telephone or email if you require this information in a different language or format, for example Braille, large print or audio.

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OwnerMacmillan skin cancer nurse specialistDate first issuedJuly 2018Review DateJanuary 2025Version2 (issued January 2023)Approved bySkin Cancer MDTDocument ReferencePIL 1212 v2© 2023 York and Scarborough Teaching Hospitals NHS Foundation Trust.All Rights reserved.

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