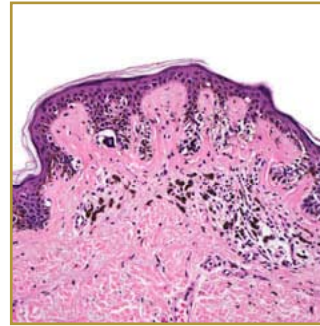


DYSPLASTIC NEVI



EPIDEMIOLOGY: About one of ten individuals has at least one

ETIOLOGY: Hereditary condition or sporadic

PATHOGENESIS: Evolve in stages from flat, dark, junctional to raised, mid-brown, compound to polypoidal skin colored

CLINICAL: Large pigmented lesions and frequently measure 5-15 mm in diameter

HISTOLOGY: Individual atypical melanocytes located in the basal cell layer, nests of melanocytes at the epidermal-dermal junction are irregularly shaped and extend with their long axis parallel to the epidermal surface

DYSPLASTIC NEVI, also known as atypical moles, are unusual (or atypical) and benign. Around one out of ten individuals have at least one unusual mole. The characteristics of a dysplastic nevus consists of large pigmented lesions that frequently measure from 5 – 15 mm in diameter, with irregular borders and colors that range from tan to dark brown to pink. The causes of these atypical moles are hereditary but can also occur sporadically in patients. Patients with one or more dysplastic nevus should have a complete skin examination to detect any changes in the moles at least once a year and avoid excessive sun exposure. Patients that have a family history of melanoma and have dysplastic nevus have a higher risk of developing melanoma; Therefore lesions on patients that are moderately atypical should be monitored closely and severely atypical lesions should be surgically excised.

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