I often notice small growths on my patients’ eyelids. When should I be concerned? Do you have any tips for identifying malignancy?

Screening for eyelid skin cancer should be a routine component of the eye exam, and early identification of a skin cancer can make an enormous impact on the lives of our patients. The difference between early and late detection can mean acceptable cosmetic results rather than a disfiguring outcome, saving the eye instead of losing it, or even saving the patient’s life instead of death from metastatic or invasive cancer.

The problem is that early cancers can sometimes look like benign inflammatory or reactive processes such as a chalazion, blepharitis, nevus (mole), or dermatitis. As ophthalmologists, we can take advantage of the biomicroscope. The slit-lamp gives a magnified stereo view that can reveal fantastic details about the anatomy of a skin lesion, and can often allow accurate diagnosis of the skin cancer of the eyelids at a very early stage.

What are the features of skin cancer that can be observed clinically? The answer lies in understanding the biology of cancer. Microscopically, cancer cells grow and replace normal tissue. That replacement of tissue results in destruction of normal architecture. The architecture of the eyelid margin is beautifully complex, and destruction of that architecture can be recognized readily by the trained eye.

When screening for architectural changes, there are several common clues that should be sought.