

The Georgia ENTertainer

Summer 2018 Issue

IN THIS ISSUE...

President's Message

AAO-HNS BOG Report

Membership Information

Augusta University Update

Emory University Update

Case Report

President's Message

by: Malaika Witter Hewitt, MD
Partner - ENT of Atlanta / ENT of Georgia

Dear Friends and Colleagues,

The Georgia Society of Otolaryngology / Head & Neck Surgery has had an outstanding year of achievement and honor. It began with our Model Society award, which I accepted at the AAO-HNSF annual Board of Governors assembly on 9/11/2017. The Model Society Award recognizes outstanding local/state/regional societies that exhibit effective leadership.



The year 2017 ended with a very successful fall GSO-HNS meeting in Lake Oconee. We welcomed Dr. Dave Tunkel, the Director of Pediatric Otolaryngology at Johns Hopkins University. He gave outstanding talks, along with our esteemed faculty at Augusta University and Emory University School of Medicine.

In January 2018, the GSO-HNS was invited by Dr. Sanjay Parikh (Chair, AAO-HNS BOG) to participate in the 2nd annual State OTO Society Roundtable in conjunction with the AAO-HNSF 2018 Leadership Forum and Board of Governors Spring Meeting. We approved our Executive Director, Tara Morrison, to represent our society at the meeting which was held March 9-12, 2018.

We Look forward to our Annual Summer Meeting starting this weekend, July 19-22, 2018 at the Loews Royal Pacific Resort at Universal Studios. We are highly anticipating the keynote speakers this year. Dr. Greg Randolph, Chair and Professor of OTO-HNS at Harvard Medical School, will convey to us his experience and thoughts on thyroid and parathyroid disorders. Dr. Roy Casiano from the University of Miami will raise the difficult questions in the field of rhinology and sinus surgery. Both keynote speakers will have lively panel discussions to compliment their topics. We also have several other guest speakers who will enhance our

continuing education series greatly.

This year, we have the great honor of hosting the AAO-HNSF Annual Meeting and OTO Experience on October 7-10, 2018, right here in Atlanta. We hope to see as many otolaryngologists as possible from the GSO-HNS there!



We have agreed to support the AAO-HNSF humanitarian effort here in Atlanta this year, after hearing from past GSO-HNS president and past BOG president Dr. Pablo Stolovitzky, who is heading up this effort on behalf of the AAO-HNSF. Please refer to the information below to participate in this donation drive of medical supplies for Medshare:



JOIN THE AAO-HNSF HUMANITARIAN EFFORT BY DONATING MEDICAL SUPPLIES AND INSTRUMENTS TODAY!

The AAO-HNSF is spearheading a medical supplies and instrument donation drive in conjunction with the AAO-HNSF 2018 Annual Meeting & OTO Experience. This humanitarian effort, which runs from now through December 31, 2018, is being done in collaboration with MedShare, a 501c(3) humanitarian aid organization headquartered in Atlanta, Georgia,

dedicated to improving the "quality of life of people, communities and our planet" by sourcing and directly delivering surplus medical supplies and equipment to communities in need around the world.

The AAO-HNSF Otolaryngology United for Global Patient Care initiative encourages members to contribute to this donation drive effort, which is crucial to supplying much-needed medical equipment and supplies to underserved communities around the world. Please review the following information to consider your donation. If you have any questions, please contact humanitarian@entnet.org.

Finally, I would like to thank the Board of Directors and the administrative team, headed by Tara Morrison, who have locked arms with me during my time of service as your president this past year. Together we have been able to run our meetings seamlessly, and I cannot thank Drs. Peter Abramson, Jimmy Brown and Stil Kountakis enough for their guidance and input during the process of speaker selection and outreach. It has truly been a great privilege to serve this esteemed and prestigious society over the past few years, and I certainly look forward to continuing the efforts to maintain the standard of excellence we now hold.

Malaika Witter Hewitt, MD

Advocacy News from the AAO-HNS

Information from the American Academy of Otolaryngology - Head and Neck Surgery

Virtual Lobby Week Success!

Thank you to all who participated in the AAO-HNS 2018 Virtual Lobby Week (June 11-15)! Using a detailed tool kit, AAO-HNS members made their voices heard by calling, emailing, and tweeting their Members of Congress in opposition to the direct access/physician status bill supported by the Academy of Doctors of Audiology (H.R. 2276/S. 2575). Your efforts truly made a difference. Several Capitol Hill offices advised their decision to not support or co-sponsor the legislation was because they heard directly from YOU--the otolaryngologists in their districts and states. Despite ADA's efforts to garner support for H.R. 2276 and S. 2575 during their Capitol Hill visits, no new co-sponsors were added!

Your ENT Dollars at Work

Voluntary contributions to ENT PAC from AAO-HNS members make it possible for the Academy to financially support Members of Congress who champion legislative priorities impacting the specialty. In the month of June, ENT PAC participated in political events for U.S. Representatives Eliot Engel (D-NY), Bill Flores (R-TX), Raul Ruiz, MD (D-CA), Markwayne Mullin (R-OK), U.S. Senator Debbie Stabenow (D-MI), and the Democratic Congressional Campaign Committee. To help ensure the strength of the Academy's political programs make or increase your 2018 ENT PAC contribution TODAY!*

Listen Now: The Academy's Policymaking Process Podcast

Curious how ENT PAC makes decisions about which candidates to support or how the Academy's legislative priorities are determined? Access the YPS podcast to learn more about the Academy's advocacy decision-making process. The podcast, moderated by William C. Yao, MD, YPS Governing Council Secretary, features three guests from the Academy: Susan R. Cordes, MD, Chair, BOG Legislative Affairs Committee; R. Peter Manes, MD, Coordinator for Health Policy; and Joy L. Trimmer, JD, Senior Director of Advocacy.

PROJECT 535 Volunteers Needed

As evidenced by the success of the AAO-HNS 2018 Virtual Lobby Week in June, advocating on behalf of the specialty can make a difference. Volunteers are still needed for PROJECT 535 - a key contact program that connects each federal lawmaker with an otolaryngologist in their district or state. Sign up today to be a PROJECT 535 key contact and help reinforce the specialty's message on Capitol Hill. For more information, contact legfederal@entnet.org.

AAO-HNS Representation at the AMA House of Delegates

The AAO-HNS was well-represented at the Annual Meeting of the AMA House of Delegates held June 9-13 in Lead Story Action Requested Legislative & Political Reports Chicago, IL. Your Academy was represented by Robert Puchalski, MD, Chair of the Delegation and Otolaryngology Section Council; Douglas Myers, MD, Delegate; Craig Derkay, MD, Delegate; and James C. Denny, III, MD, AAO-HNS EVP/CEO, as Alternate Delegate. Key topics of discussion at this policymaking forum were scope of practice concerns, opioid legislative proposals, payer denials, regulatory burdens, and physician wellness.

Health Net Joins Anthem in Rescinding Modifier 25 Policy

In response to coordinated advocacy efforts led by the California Medical Association and including the AAO-HNS, Health Net has agreed to rescind its planned Modifier 25 policy. This proposal would have reduced reimbursement of an E/M service with Modifier 25 by 50 percent when billed with a minor surgical procedure or a preventive visit.

QPP Update: 2017 MIPS Performance Feedback and Final Score Now Available

Providers who submitted 2017 Merit-based Incentive Payment System (MIPS) data through the Quality Payment Program (QPP) website can now access feedback on their performance and MIPS final score. Members can access this information by logging onto the QPP website using their Enterprise Identity Management (EIDM) credentials. Stay tuned for more information on how to review feedback and submit questions to CMS!

AAO-HNS Comments on FY19 IPPS Proposed Rule

The AAO-HNS joined with other members of the Physician Clinical Registry Coalition to submit comments to CMS on the Fiscal Year 2019 IPPS Proposed Rule. The coalition's comments communicated concern about the agency's plans to remove the Public Health and Clinical Data Exchange objective by 2022.

2018 AAO-HNS Election Results

Congratulations to our GSO/HNS members Dr. David Terris and Dr. Lisa C. Perry-Gilkes for winning seats on the AAO/HNS BOG.

OFFICIAL RECORD OF THE 2018 AAO-HNS ANNUAL ELECTION RESULTS*

President-Elect - Duane J. Taylor, MD

Director-at-Large (Academic) - Valerie A. Flanary, MD

Director-at-Large (Private Practice) - William R. Blythe, MD

Audit Committee - Selena E. Briggs, MD, MBA, PhD

Nominating Committee (Academic)

Amber U. Luong, MD, PhD

David J. Terris, MD

Nominating Committee (Private Practice)

Lisa C. Perry-Gilkes, MD

ENTCONNECT

ENGAGE NETWORK TRANSFORM

Membership Information

**PAY YOUR
2018 GSO/HNS
DUES**

If you have not done so already, Its time to
pay your 2018 dues.

[CLICK HERE TO PAY NOW!](#)

**Not A Member?
JOIN TODAY!**

Become a GSO/HNS Member today!

[CLICK HERE TO ENROLL](#)

We hope to see you this weekend at the
2018 GSO/HNS ANNUAL SUMMER MEETING
THURSDAY, JULY 19 - SUNDAY, JULY 22, 2018
LOEWS ROYAL PACIFIC | ORLANDO, FL

It is not to late to join us for the GSO/HNS Annual Summer Meeting!

Meeting information & Registration on www.gsohns.org



Augusta University Update

by: Stil Kountakis, MD, PhD

Edward S. Porubsky, MD Distinguished Chair in Otolaryngology

Professor and Chairman

Department of Otolaryngology-Head & Neck Surgery

Dear Fellow Otolaryngologists,

I hope you are doing well and are ready for the summer. With the rains we had during the last month I thought summer would never come, but in academic medicine, we have the graduating activities and end of the year symposia to remind us. After 5 years of intensive training our residents (and fellows) are ready to move on, with many of them becoming the next generation of leaders in otolaryngology. It is a bitter-sweet moment for us, as after all these years, it feels like we are sending our children away. The road is long with many sacrifices, rules are enforced and bars are reset, but at the end we hope that the best possible otolaryngologists leave us to take care of their own patients. We expect they will be better than us otherwise we will be devolving and not evolving. We also expect they will be better than us as they will take care of us before long.



Stil Kountakis, MD

I wish you a great summer and hope to see you at the Summer GSO-HNS meeting in Orlando.

Stil Kountakis, MD, PhD

Welcome New Residents and Fellows

We are pleased to announce the results of this year's very successful residency match which will allow Jeffrey Falco, Trevor Getz and Lindsey Megow to join the department July 1st. Jeffrey joins us from Texas A&M Health Science Center, Trevor from the University of Central Florida and Lindsey is from our very own Medical College of Georgia. All three of these individuals will be excellent additions to our residency program and we are excited to begin working with them.

In addition to the new residents starting July 1st, we have three superb individuals that will begin their fellowships with us in July. Ahmad Elteley from Cairo University is the 11th Endocrine/Head & Neck Surgery fellow, Stephanie Teng from New York University is the 10th Laryngology fellow and Ike Unsal from Rowan University is the 16th Rhinology - Sinus and Skull Base Surgery fellow.

We look forward to working with these individuals and wish them a warm welcome to our department.

Faculty Honors and Awards



Stil Kountakis, MD

Dr. Stil Kountakis was an oral examiner for the American Board of Otolaryngology and an invited speaker at the UVA Fitz-Hugh Symposium in Charlottesville, VA.

Dr. J. Drew Prosser was an invited speaker at the Georgia Society of Otolaryngology Fall Meeting and received AU-MCG Exemplary Teaching Awards for undergraduate and graduate medical education. Dr. Prosser was appointed Chief of Pediatric Otolaryngology at MCG-AU effective May 1, 2018.



J Drew Prosser, MD

World Voice Day 2018 - Gregory N. Postma, MD



On April 14th at the Maxwell Theater, Augusta University celebrated this year's World Voice Day. There were a number of short singing performances and lectures given. Lauren Enloe, the Senior Voice/Speech-Language Pathologist at the Medical College of Georgia gave a talk on "The Who, What, When, and Why" of speech therapy and voice teaching. In addition, there was a fascinating talk on nutrition-fuel for the athletic voice by Pam Brisky. Dr. Postma then gave the keynote lecture on "The Professional Voice". The finale was a live laryngoscopy of Ms. Jovania Colman performing Alone and Yet Alive from THE MIKADO written by Gilbert and Sullivan.

Overall this was a wonderful time together highlighting the importance of the voice in both our social and professional lives and helping our voice students and lay people to understand various voice related symptoms and the various problems that can cause them.

Head and Neck Cancer Screening 2018 - Heather Bentley, NP

April is Oral, Head and Neck Cancer Awareness Month, and in efforts to provide education and raise awareness in the community, the Head and Neck Surgery team at Augusta University hosted their second annual free Head and Neck Cancer Screening on April 27, 2018. Under the leadership of Heather Bentley, Head and Neck Nurse Practitioner, the screening event was coordinated with the Division of Communications and Marketing at Augusta University to launch educational pieces and advertisements utilizing a social media platform and printed materials.

Seventy-five participants were examined and educated on the risks of developing head and neck cancers. Of the seventy-five participants, sixteen were recommended to follow up for further evaluation. Engaging with people face to face and educating them on risk factors, concerning symptoms, and when to seek help offers us hope that cancer patients would benefit from an increased community awareness and seek early detection and treatment.



Together, the Head and Neck Surgery team, Otolaryngology residents, and Otolaryngology clinical staff made this event successful, and we look forward to continuing this event in the future.

Welcome William Carroll, Mingsi Li and Greer Albergotti

We are excited to welcome to the department three new members. William W. Carroll, MD will join the department as Assistant Professor of Pediatric Otolaryngology and Mingsi Li, MD will join as Assistant Professor of Rhinology - Sinus and Skull Base Surgery and General Otolaryngology on July 1, 2018. W. Greer Albergotti, III, MD will join the department as Assistant Professor of Head and Neck Surgery on August 1, 2018. Dr. Albergotti will also serve as Chief of Otolaryngology at the Charlie Norwood VAMC.



Dr. Carroll earned his undergraduate degree at Davidson College in Davidson, North Carolina. He earned his medical degree and completed his residency in Otolaryngology-Head and Neck Surgery at the Medical University of South Carolina. He completed a one-year fellowship in Pediatric Otolaryngology and Facial Plastic Surgery at Children's Hospital and Clinics of Minnesota in Minneapolis. Dr. Carroll is trained in all aspects of Pediatric Otolaryngology and specializes in craniofacial and cleft lip/cleft palate surgery. His research interests are pediatric head and neck tumors, and craniofacial reconstruction.



Dr. Li earned his undergraduate degree at the University of Pennsylvania and his medical degree at Case Western Reserve University. He completed his residency in Otolaryngology-Head and Neck Surgery at the Cleveland Clinic, and a one-year fellowship in Rhinology and Sinus-Skull Base Surgery at the Medical College of Georgia at Augusta University. Dr. Li is trained in all aspects of Otolaryngology and specializes in rhinology, general otolaryngology, facial trauma, facial plastic and reconstructive surgery, and sleep apnea disorders. His research interests include improving treatment outcomes in patients with inflammatory sinus diseases, and benign and malignant skull base tumors.



Dr. Albergotti earned his undergraduate degree at Washington and Lee University in Lexington, Virginia, and his medical degree at the Medical University of South Carolina in Charleston. He completed his residency in Otolaryngology-Head and Neck Surgery at the University of Pittsburgh, and a one-year fellowship in Head and Neck and Reconstructive Surgery at the Medical University of South Carolina. Dr. Albergotti is trained in all aspects of Otolaryngology and specializes in head and neck ablative surgery and microvascular reconstructive surgery. His research interests are quality of life in head and neck cancer patients, transoral robotic surgery, and HPV+ oropharyngeal squamous cell carcinoma.

Available Faculty Positions

We are recruiting a full-time fellowship-trained Otolaryngologist-Neurotologist at the Assistant or Associate Professor level in the Department of Otolaryngology at MCG-AU. Interested individuals are asked to send a cover letter and curriculum vitae to Dr. Stil Kountakis at skountakis@augusta.edu.

2018 Visiting Professor Series

Otolaryngologists in the Georgia/South Carolina area are invited to attend our monthly visiting professor series. Our currently scheduled speakers are:

September 4, 2018

Carsten Schroeder, MD, PhD

Associate Professor of Surgery, Director, GA Cancer Center Thoracic Oncology Surgery Service
Department of Surgery, Augusta University, Augusta, GA

October 2, 2018

L. Renee Hilton, MD
Assistant Professor of Surgery, Director, Center of Obesity and Metabolism
Augusta University, Augusta, GA

November 6, 2018

Milan R. Amin, MD

Associate Professor, Department of Otolaryngology, Director, NYU Voice Center
NYU Langone Medical Center, New York, NY

December 4, 2018

Jastin L. Antisdel, MD

Chairman and Associate Professor, Department of Otolaryngology, Director, Rhinology and Sinus Surgery
St. Louis University School of Medicine, St. Louis, MO

Educational Events

April 11-13, 2019

Southern States Rhinology Symposium
Kiawah Island, South Carolina
southernstatesrhinology.org

June 14-15, 2019

Seventeenth Annual Porubsky Symposium and Alumni Event
Augusta, Georgia
aoefdtm.org/Porubsky

Emory University Update

by: Douglas E. Mattox, MD

Professor and William Chester Warren Jr., M.D. Chair
Department of Otolaryngology - Head & Neck Surgery



Emory University Update

All of us in the Department of Otolaryngology - Head and Neck Surgery at Emory University hope you are having a wonderful 2018. Our department continues to thrive, delivering cutting-edge care at seven facilities throughout the Atlanta area.

Emory University Hospital Midtown Campus continues to serve as our academic and clinical centerpiece. Faculty also practice at Emory University Hospital, Children's Healthcare of Atlanta's Egleston Hospital, Grady Memorial Hospital, the Atlanta VA Medical Center, the Emory Sleep Center, and the Emory Aesthetic Center.

Please find the below updates from our department:

Residency and Fellowship Training

Under the guidance of Residency Director Sarah Wise, we are pleased to announce another successful residency match. Next year we will welcome four interns to our program and will maintain a full complement of 20 residents.

Spencer Cope will be joining us from The University of Texas School of Medicine at San

Antonio. His medical school career includes being honored as one of 15 medical students in the nation selected as a FASPE International Medical Ethics Fellow in 2017. Daniel Lee completed medical school this year at the Florida State University College of Medicine - Sarasota. He was selected to the Alpha Omega Alpha Medical Society in 2017 and is also a member of the Gold Humanism Honor Society. Meredith Lilly spent 2013 to 2014 in Dresden, Germany on a Fulbright Scholarship investigating hematologic malignancies before enrolling in the Georgetown University School of Medicine. She has served as a Spanish medical interpreter in the Chicago area during college and also speaks French and German. Finally, Melissa Oh will be staying in Atlanta to continue her medical training here at Emory. She spent a research year with our department examining palate growth formation signaling with Dr. Steven Goudy between her second and third years of medical school.

We will also continue to offer fellowship training in Head & Neck Oncologic Surgery, Laryngology, Rhinology, Sleep Medicine and Sleep Surgery, as well as Pediatric Otolaryngology.

Combined Otolaryngology Spring Meetings

Emory had another strong showing at the recent combined meetings in the D.C. area. Attending physicians, fellows, residents, and medical students were involved as instructors, moderators, podium presenters, and poster presenters. In total, 25 members of our department had research delivered at the meetings of the American Head and Neck Society, the American Otologic Society, the American Laryngologic Society, the American Broncho-Esophological Association, the Triologic Society, the American Society of Pediatric Otolaryngology, and the American Rhinologic Society.

Additionally, Dr. Josh Levy was also recognized with both the 2018 American Rhinologic Society New Investigator Award and the 2018 Triological Society Career Development Award. On the alumni front, Dr. Sigsbee Duck (residency class of 1986) serves as the President of the Triological Society for this year.

Skull Base Surgery

Our faculty continues to offer cutting edge treatment for approaches to both the anterior and lateral skull base. Our rhinology division includes Drs. John DelGaudio, Sarah Wise, Clementino Solares, and Joshua Levy while our Otology/Neuro-otology division includes Drs. Douglas Mattox, Malcolm Graham, and Esther Vivas. We are lucky to have excellent advance practice providers in both divisions and an ever-expanding compliment of audiologists under the direction of Dr. Jorge Gonzalez to improve access for our patients.

Multi-disciplinary Approach to H&N Cancer treatment:

To offer the most cutting edge care to our patients, physicians from six specialties collaborate every Tuesday morning in our multi-disciplinary head and neck cancer tumor board. Each patient is discussed with the group to develop a personalized care plan to optimize chance for cure. We offer clinical trials for multiple treatment modalities and will soon be able to offer patient's access to new treatments when the Emory Proton Therapy Center comes online in late 2018.

Mark your calendars for the upcoming education opportunities:

- 1) Temporal Bone Surgical Dissection Course - October 1-5, 2018
- 2) AAO-HNSF Academy Meeting in Atlanta - October 7-12, 2018
- 3) Laryngeal Dissection, Videostroboscopy and FEES Workshop - February 7-9, 2019

Faculty Milestones:

We have a number of promotions coming up officially on September, 2018:

Steve Goudy, MD, Director of Pediatric Otolaryngology will be promoted to Professor.

Adam Klein, MD, Director of the Laryngology, will be promoted to Professor

Sarah Wise, MD, Residency Director, will be promote to Professor.

Esther Vivas, MD, will be promoted to Associate Professor.

Charles Moore, MD received the prestigious Thomas Jefferson Award at Emory University Commencement. The Jefferson Award is the highest honor the University can accord in recognition of service contributions to the University and the community at large. Of the 52 previous recipients of the Award, only 8 have come from the School of Medicine. Dr. Moore was recognized for his efforts to build safety net health care facilities for Atlanta's underprivileged. His HEALing Community Center is a multidisciplinary federally funded facility on Atlanta's west side serving the most economically disadvantaged.

Best wishes to all and please feel free to reach out if we can be of any assistance.

Douglas E. Mattox, MD
Professor and William Chester Warren Jr., M.D. Chair
Department of Otolaryngology - Head & Neck Surgery

Case Report

A Case Report of Malignant Mucosal Melanoma

by: Jacline V. Griffeth, MS1

Okechukwu Nwogbo, MD2

Nikhil Patel, MD2

J. Kenneth Byrd, MD FACS1

1 Department of Otolaryngology, Medical College of Georgia at Augusta University

2 Department of Pathology, Medical College of Georgia at Augusta University

Case Report:

A 68-year-old woman with chronic sinusitis underwent endoscopic sinus surgery of bilateral maxillary, ethmoid, sphenoid, and frontal sinuses. During surgery, it was noted that she had greater polyposis on the left compared to the right, but no grossly abnormal tissue. The surgery proceeded without complication. Histopathologic analysis of the pooled sinus contents revealed mucosal melanoma. The patient was then referred to the Georgia Cancer Center for further evaluation and management.

On in-office rigid endoscopy, there was no obvious tumor visible, although edema of the turbinates limited the examination. Contrasted magnetic resonance imaging (MRI) demonstrated post-surgical edema throughout, but prominent tissue in the left posterior ethmoid and sphenoid sinuses; there was no evidence of intracranial disease (Figure 1). Computerized tomography (CT) also demonstrated increased soft tissue in the posterior ethmoid and sphenoid on the left, with some demineralization of the anterior skull base and lamina papyracea (Figure 2). Positron emission tomography revealed hypermetabolic activity (SUV 7.7) corresponding to the MRI and CT findings (Figure 3), as well as a subcentimeter left level II lymph node with increased FDG avidity (SUV 3.2), and no evidence of distant metastatic disease.

The patient was presented at the Head and Neck Multidisciplinary Tumor Board, and surgery was recommended. The patient was taken for image-guided endoscopic resection of the tumor. During surgery, abnormal polyps were noted in the left sphenoethmoidal recess, extending into the sphenoid sinus, posterior maxillary sinus, and onto the posterior nasal septum; frozen section biopsy confirmed mucosal melanoma. The tumor was debulked to expose areas of attachment on the posterior septum, sphenoid rostrum, posterior ethmoid

skull base, and lamina papyracea, and a diamond burr was used to remove the bone in these areas. The pterygopalatine fossa, dura, and periorbital were normal in appearance. Due to the insidious nature of melanoma, circumferential margins, including the anterior skull base dura and periorbital, were taken and sent for permanent pathology to allow for melanoma-specific staining. Figure 4 demonstrates microscissor technique for removal of the periorbital in the area of tumor attachment. Superiorly, the anterior fossa dura was exposed after drilling the posterior ethmoid skull base.

A small, low-flow cerebrospinal fluid leak was present due to the dural biopsy. Consequently, a contralateral nasoseptal flap was raised and secured with gelfoam and a merocel sponge after frozen section ruled out the presence of melanoma, anticipating that the patient would require postoperative radiation to the area. After surgery, permanent pathology revealed a positive margin at the superior septum. The patient returned to the operating room for a planned staged left level II-IV neck dissection and re-resection of margins, which revealed final negative margins and no positive lymph nodes. Figure 5 demonstrates the characteristic appearance of mucosal melanoma, which stained positive for SOX-10, S100, and Melan-A. Additional staining for BRAF, NRAS, and c-kit was negative.

The patient had an uneventful postoperative course, requiring saline nasal irrigations and serial debridements per standard protocol. She was then scheduled for consultations with radiation oncology and medical oncology, who recommended concurrent Nivolumab and intensity modulated radiation (IMRT) to the sinonasal cavity and skull base. She is currently undergoing adjuvant therapy.

Discussion:

Mucosal melanoma is a rare form of melanoma that accounts for roughly 1% of all melanomas and <0.3% of all cancers [1]. Mucosal melanomas differ from their more common cutaneous counterparts in that they are more aggressive, have no relationship with UV radiation exposure, and have a poorer prognosis. Of mucosal melanomas, roughly 55% arise in the head and neck region, and anorectal and vulvovaginal mucosal melanomas account for the majority of the rest. The nose, paranasal sinuses, oral cavity, pharynx, and larynx are the most commonly involved areas for head and neck mucosal melanomas [3]. The most common presenting symptoms of nasopharyngeal mucosal melanoma are unilateral nasal obstruction, mass lesion, or epistaxis [4], and they can be amelanotic or pigmented [2]. Prognosis is poor overall for mucosal melanoma, with a 15-45% five-year survival rate [5]; paranasal sinus involvement has an even poorer clinical outcome with 0-31% five-year survival [6]. Specifically, infiltration into the skull base, orbit, or facial soft tissue is associated with treatment failure [7]. Delayed diagnosis, local recurrence and high rates of metastasis contribute to this poor survivability of mucosal melanoma [3].

Because of the rarity of mucosal melanoma, randomized clinical trials have not been possible, and data are often extrapolated from cutaneous melanoma. Because of its poor prognosis, any mucosal melanoma of the head and neck is Stage III or IV at diagnosis. Surgical excision is the treatment of choice when the disease is resectable, and neck dissection is recommended in the presence of clinically suspicious nodes [11]. The most common causes of treatment failure are distant metastasis, local, and regional recurrence [8]. Local recurrence occurs in about 50% of patients [3] and suggests a more aggressive disease associated with decreased survival [7]. Radiation is recommended to improve local control and appears to improve survival. Currently, systemic therapy is recommended for metastatic or unresectable disease, but clinical trials are underway to elucidate its role prior to the development of distant metastases. For cutaneous melanoma, dacarbazine, vinblastine, cisplatin, IL-2, and interferon may be used to treat high-risk disease. The recent approval of immunotherapy has sparked interest in use for cutaneous and mucosal melanoma; pembrolizumab, nivolumab, and ipilimumab are category 1 for the treatment of metastatic melanoma. Targeted therapy against c-KIT or BRAF V600 may also be considered, however, a very low percentage of mucosal melanomas have the BRAF mutation [11]. Our patient underwent endoscopic resection with clear surgical margins and a negative neck dissection and is now undergoing IMRT to the tumor bed to improve local control. Based on results from the Checkmate 238 clinical trial, which showed a benefit in recurrence-free

survival, she is also being treated with adjuvant nivolumab to decrease the likelihood of recurrence, despite the absence of measurable distant disease [12].

In conclusion, mucosal melanoma is a rare and aggressive disease that arises from melanocytes in mucosal membranes. Mucosal melanoma has an unpredictable course, and non-specific presenting symptoms in the paranasal sinuses often results in late presentation. There are no modifiable risk factors determined in current literature. Overall five-year survival of head and neck mucosal melanoma is very poor due to distant metastases and locoregional recurrence. Treatment of head and neck mucosal melanoma includes surgery with adjuvant radiation therapy, and exploratory roles of targeted therapies and immunotherapy are currently being evaluated. Early detection and complete surgical removal with close surveillance of distant metastasis provide the best chance for survival [10].

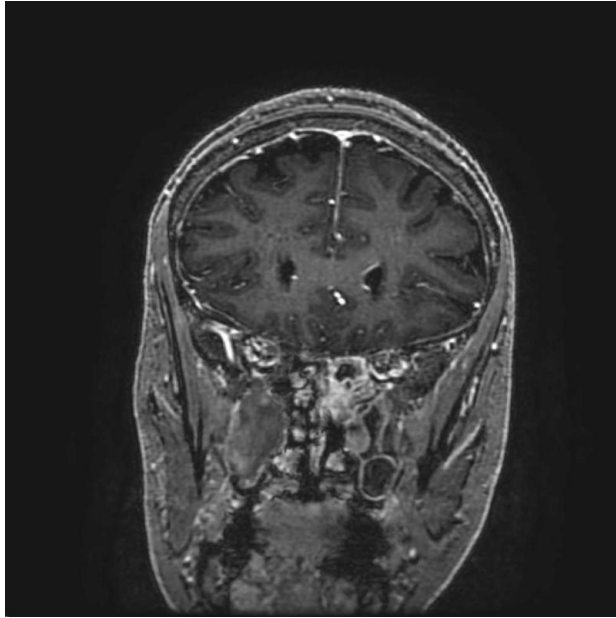


Figure 1: Contrasted MRI revealing increased enhancement of the left posterior ethmoid and sphenoid sinuses.



Figure 2: Noncontrasted coronal CT, demonstrating left posterior skull base dehiscence

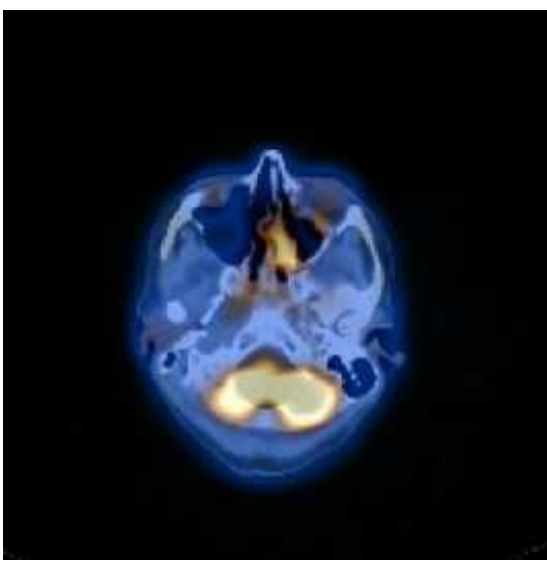


Figure 3: PET/CT revealing FDG avidity corresponding with MRI and CT findings

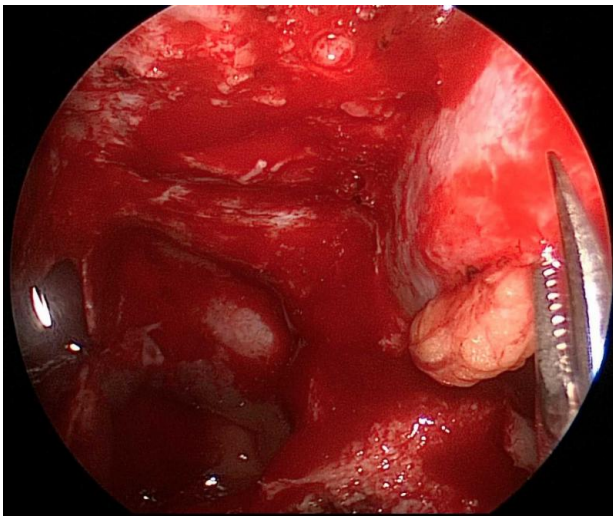


Figure 4: Intraoperative microscissor technique for removal of normal-appearing left medial periorbital in the area of tumor attachment.

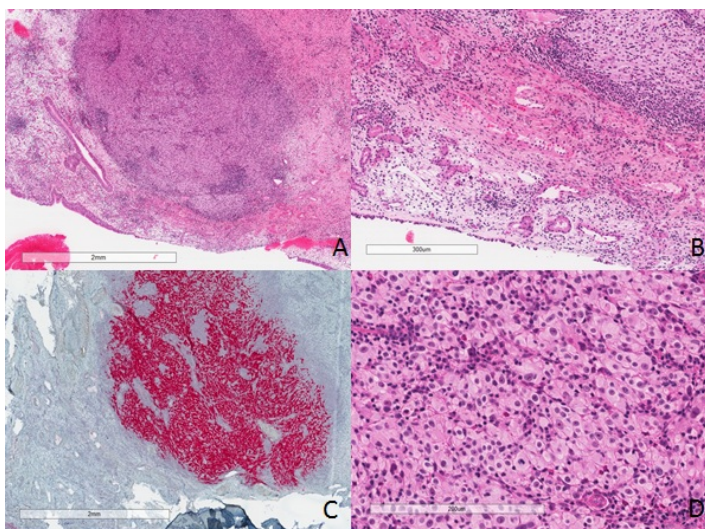


Figure 5: A-Low power H&E view of mucosal melanoma. B-Medium power H&E view of mucosal melanoma in relation to overlying mucosa. C-Low power immunohistochemistry of mucosal melanoma stained with pan-melanoma stains. D-High power view of mucosal melanoma revealing melanocytes with nuclear pleomorphism and prominent eosinophilic nucleoli.

- [1] Chang AE, Karnell LH, Menck HR. The National Cancer Data Base report on cutaneous and noncutaneous melanoma: a summary of 84,836 cases from the past decade. The American College of Surgeons Commission on Cancer and the American Cancer Society. *Cancer*. 1998 Oct 15;83(8):1664-78.
- [2] Mihajlovic M, Vlajkovic S, Jovanovic P, Stefanovic V. Primary mucosal melanomas: a comprehensive review. *Int J Clin Exp Pathol*. 2012;5(8):739-53. Epub 2012 Oct 1.
- [3] Paolino G, Didona D, Macri G, Calvieri S, Mercuri SR. Nasopharyngeal Melanoma. In: Scott JF, Gerstenblith MR, editors. *Noncutaneous Melanoma* [Internet]. Brisbane (AU): Codon Publications; 2018 Mar. Chapter 4.
- [4] Green B, Elhamshary A, Gomez R, Rahimi S, Brennan PA. An update on the current management of head and neck mucosal melanoma. *J Oral Pathol Med*. 2017 Aug;46(7):475-479. doi: 10.1111/jop.12526. Epub 2017 Jan 10. Review.
- [5] Thompson LD, Wieneke JA, Miettinen M. Sinonasal tract and nasopharyngeal melanomas: a clinicopathologic study of 115 cases with a proposed staging system. *Am J Surg Pathol*. 2003 May;27(5):594-611.
- [6] Yde SS, Sjoegren P, Heje M, Stolle LB. Mucosal Melanoma: a Literature Review. *Curr Oncol Rep*. 2018 Mar 23;20(3):28. doi: 10.1007/s11912-018-0675-0.
- [7] Roth TN, Gengler C, Huber GF, Holzmann D. Outcome of sinonasal melanoma: clinical experience and review of the literature. *Head Neck*. 2010 Oct;32(10):1385-92. doi: 10.1002/hed.21340.
- [8] Amit M, Tam S, Abdelmeguid AS, Kupferman ME, Su SY, Raza SM, DeMonte F, Hanna EY. Patterns of Treatment Failure in Patients with Sinonasal Mucosal Melanoma. *Ann Surg Oncol*. 2018 Jun;25(6):1723-1729. doi: 10.1245/s10434-018-6465-y. Epub 2018 Apr 6.
- [9] Jethanamest D1, Vila PM, Sikora AG, Morris LG. Predictors of survival in mucosal melanoma of the head and neck. *Ann Surg Oncol*. 2011 Oct;18(10):2748-56. Doi: 10.1245/s10434-011-1685-4. Epub 2011 Apr 8.
- [10] Grözinger G, Mann S, Mehra T, Klumpp B, Grosse U, Nikolaou K, Garbe C, Clasen S. Metastatic patterns and metastatic sites in mucosal melanoma: a retrospective study. *Eur Radiol*. 2016 Jun;26(6):1826-34. doi: 10.1007/s00330-015-3992-9. Epub 2015 Sep 15.
- [11] National Comprehensive Cancer Network. NCCN Melanoma Guidelines for Cancer Treatment. Retrieved from https://www.nccn.org/professionals/physician_gls/pdf/melanoma.pdf.
- [12] Weber et al. Adjuvant Nivolumab versus Ipilimumab in Resected Stage III or IV Melanoma. *N Engl J Med*. 2017 Nov 9;377(19):1824-1835. doi: 10.1056/NEJMoa1709030. Epub 2017 Sep 10.

Upcoming Meeting Information from Dr. Gregory W. Randolph:



SURGERY OF THE THYROID AND PARATHYROID GLANDS



November 9 - 10, 2018
Boston Marriott Long Wharf
Boston, MA

This course has been endorsed by the ATA

Dear Colleague,

The field of thyroid and parathyroid surgery has recently undergone significant changes; thyroid cancer incidence has increased dramatically over the last several decades, technologic advances have been achieved in molecular analysis of patients and the American Thyroid Association has published its new set of medical and surgical thyroid nodule and thyroid cancer guidelines. There is a tremendous new data set that is important to convey to medical endocrinologists and thyroid and parathyroid surgeons.

This course is a 2-day course about surgery of the thyroid and parathyroid glands, which has been offered since 1996. Preoperative workup of both thyroid and parathyroid surgical disease will be discussed, with an emphasis on fine needle aspiration and preoperative parathyroid localization imaging options. Surgical techniques will be reviewed (recurrent laryngeal nerve monitoring, parathyroid identification and preservation, intraoperative PTH analysis and new surgical approaches) and minimally invasive surgical techniques will be discussed. Molecular genetic analysis for differentiated and medullary thyroid carcinoma and advances in oncogene research will also be presented. Surgical philosophy regarding bilateral thyroid surgery, its risks, surgical treatment of the neck, and surgical treatment of invasive tracheal disease will be presented, and we will also review recognition and treatment of postoperative complications along with new advances in their treatment. A panel discussion will focus on difficult cases with a focus on avoidance and early recognition of surgical complications, which will include audience participation.

For more information, visit the [Surgery of the Thyroid and Parathyroid Glands website](#).

Sincerely,
Gregory W. Randolph, MD
Richard Hodin, MD
Randall Gaz, MD

© 2017. All Rights Reserved.

