

Metastatic Cancers

What Does “Metastatic Cancer” Mean?

Metastatic cancer means a cancer that started in one part of the body (such as the breast, lung, colon, or kidney) has **spread to another location**.

When metastatic cancer shows up in the skin, it is called a **cutaneous metastasis**. These are **not primary skin cancers** like basal cell carcinoma, squamous cell carcinoma, or melanoma—rather, they represent spread from a cancer elsewhere in the body.



What Do Cutaneous Metastases Look Like?

Cutaneous metastases most commonly appear as:

- **Firm, round or oval bumps (nodules)** in or under the skin
- Often **painless** (though they can be tender)
- Skin-colored, pink, red, purple—or **blue/black** in some melanoma metastases
- Sometimes **multiple lesions appear quickly**
- Occasionally they can **ulcerate** (break down) or resemble an infection/rash

They often develop **near the original cancer site**, but can appear elsewhere.

A classic example

A firm nodule at the belly button can be a **Sister Mary Joseph nodule**, which is an **umbilical metastasis** from an internal cancer (often gastrointestinal or gynecologic).

Which Cancers Most Commonly Spread to Skin?

Cutaneous metastases are **uncommon overall**, but when they occur, common sources include (patterns differ by sex):

- **Breast, colon, melanoma, ovarian** (more common in females)
- **Lung, colon, melanoma** (more common in males)

Important: Sometimes a skin metastasis can be the **first sign** of an undiagnosed internal cancer—so a prompt evaluation matters.

How We Diagnose Metastatic Cancer in the Skin

Diagnosis typically requires:

1) Skin exam

We evaluate size, firmness, growth rate, and location.

2) Skin biopsy

A biopsy is essential to confirm the diagnosis.

3) Special pathology testing

Pathologists often use **immunohistochemistry** to help identify where the cancer likely originated.

4) Care coordination

If metastasis is confirmed, we coordinate with your oncology team (or help connect you with one) for further evaluation and treatment planning.

How Cutaneous Metastases Are Treated

Treatment is usually focused on the **underlying cancer**, often with guidance from oncology. Because skin metastases often indicate **systemic disease**, treatment frequently involves **systemic anti-cancer therapy** (with additional local treatments in selected cases).

Dermatology may also help with:

- Symptom relief (pain, bleeding, irritation)
 - Wound care if ulceration occurs
 - Biopsy and diagnosis to guide next steps
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Pre-Op Instructions

(Not surgery—these are “before your visit/biopsy” tips.)

Before your appointment

- Take **photos** if the lesion changes quickly.
- Write down:
 - When you first noticed it
 - How fast it’s changing
 - Any history of cancer (type, treatments, dates)
- Bring a list of:
 - Current medications and supplements
 - Your oncologist’s contact information (if applicable)

If a biopsy may be done

- Tell us if you take **blood thinners** or bruise easily.
 - ⚠ **Do not stop prescribed blood thinners** unless your prescribing clinician instructs you.
 - Tell us about allergies to **adhesives, antiseptics, or numbing medicine**.
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Post-Op Instructions

After a skin biopsy

- Keep the bandage on and dry for **24 hours** (unless instructed otherwise).
- After 24 hours, daily:
 1. Gently clean with mild soap and water
 2. Pat dry
 3. Apply a thin layer of ointment if instructed
 4. Cover with a clean bandage
- Avoid soaking (pools/hot tubs/baths) until healed.
- Call if you develop increasing redness, warmth, swelling, pus, fever, or bleeding that won't stop with pressure.

After results are available

- If results show metastatic cancer, we will:
 - Review what the biopsy suggests
 - Coordinate next steps with oncology and/or your treating physicians
 - Help guide what additional testing may be needed

When to Seek Urgent Care

Seek urgent/emergency care if you have:

- Rapidly worsening shortness of breath, chest pain, confusion, or severe weakness
- Uncontrolled bleeding from a skin lesion
- High fever with rapidly worsening skin pain or spreading redness

Call our office promptly if:

- A lesion is rapidly enlarging
- New lumps appear
- A biopsy site shows signs of infection

Metastatic Cancers to the Skin FAQ

Is this the same as “skin cancer”?

Not exactly. A cutaneous metastasis is **cancer spread to the skin from another organ**. It is different from primary skin cancers like basal cell carcinoma or squamous cell carcinoma.

Does a skin metastasis mean cancer is advanced?

Often, yes—cutaneous metastases are frequently associated with advanced disease. However, every case is different, and your oncology team will explain what it means for your specific situation.

Can a skin metastasis be the first sign of cancer?

Sometimes. In a meaningful minority of cases, the skin finding appears before the primary cancer is diagnosed—one reason biopsy is so important.

Are cutaneous metastases painful or itchy?

They are often painless, but they can be tender, itchy, or ulcerate depending on location and type.

How do you confirm where the cancer came from?

A biopsy plus special stains (immunohistochemistry) often points to the likely origin, and your full medical history and any imaging help confirm it.

Can the skin spots be removed?

Sometimes local treatments are used for comfort or control, but most treatment focuses on the **underlying cancer** (systemic therapy), especially when disease is not limited to one spot.

When should I get a new skin lump checked?

Any **new, firm, growing** skin nodule—especially in someone with a cancer history—should be evaluated promptly.