

# Sarcoma

## What Is a Sarcoma?

A **sarcoma** is a **rare type of cancer** that arises from the body's **connective (supporting) tissues**, such as:

- Fibrous tissue
- Fat
- Muscle
- Blood vessels
- Nerves

When sarcomas involve the **skin or the tissue just beneath it**, dermatologists are often the first specialists to evaluate and diagnose them.

Sarcomas are **not common**, but early recognition is important because treatment often requires **specialized surgery and coordinated care**.



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# Types of Sarcoma Seen in Dermatology

Some sarcomas that may involve the skin include:

- **Dermatofibrosarcoma Protuberans (DFSP)**  
Slow-growing but locally aggressive tumor of the skin.
- **Angiosarcoma**  
Cancer of blood vessels, often appearing as bruise-like or purple patches, commonly on the scalp or face.
- **Leiomyosarcoma**  
Cancer arising from smooth muscle, presenting as firm skin or subcutaneous nodules.
- **Kaposi Sarcoma**  
A vascular sarcoma associated with immune suppression, causing red or purple patches or nodules.

Each type behaves differently, which is why accurate diagnosis is essential.

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## What Do Cutaneous Sarcomas Look Like?

Sarcomas of the skin may appear as:

- **Firm or hard lumps** under the skin
- Slowly enlarging plaques or nodules
- Red, purple, brown, or skin-colored lesions
- Bruise-like areas that do not resolve
- Usually **not scaly** and often **not itchy**
- May or may not be painful

Any **new, enlarging, or persistent firm growth** should be evaluated.

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## How Sarcomas Are Diagnosed

Diagnosis usually involves several steps:

### 1) Skin Examination

Your dermatologist evaluates size, depth, firmness, and growth pattern.

## 2) Skin or Deep Tissue Biopsy

A biopsy is essential to:

- Confirm the diagnosis
- Identify the sarcoma subtype
- Guide treatment planning

## 3) Additional Testing (When Needed)

Depending on biopsy results, this may include:

- Imaging (MRI, CT)
  - Blood tests
  - Referral to surgical or medical oncology
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# How Sarcomas Are Treated

Treatment depends on the **type, size, depth, and location** of the sarcoma.

## Surgical Treatment

- **Complete surgical removal** is the main treatment
- Specialized techniques (such as wide excision or Mohs-type surgery) may be used for certain sarcomas
- Clear margins are critical to reduce recurrence risk

## Additional Therapies

Some patients may also need:

- **Radiation therapy**
  - **Systemic therapy** (chemotherapy or targeted therapy)
  - Care coordinated with oncology specialists
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# Pre-Op Instructions

*(Before biopsy or surgical referral)*

## Before Your Appointment

- Take photos of the lesion if it has been changing
- Bring a list of:
  - Current medications and supplements
  - Prior biopsies or imaging, if any
- Tell us if you:
  - Take blood thinners
  - Have bleeding disorders
  - Have allergies to numbing medications or adhesives

**⚠ Do not stop prescribed medications** unless directed by your prescribing clinician.

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## Post-Op Instructions

### After a Biopsy

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

### After Surgical Treatment

- Follow surgeon-specific instructions carefully
  - Expect some soreness, swelling, or bruising
  - Activity restrictions depend on surgical site and extent
  - Attend all follow-up visits for wound checks and surveillance
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## When to Seek Prompt Medical Care

Contact us urgently if you experience:

- Rapid enlargement of a lesion
- Increasing pain, bleeding, or ulceration
- Signs of infection
- New unexplained lumps elsewhere on the body

# Sarcoma – Frequently Asked Questions

## Is a sarcoma the same as typical skin cancer?

No. Sarcomas are different from common skin cancers like basal cell carcinoma, squamous cell carcinoma, or melanoma. They arise from **connective tissue**, not skin cells.

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## Are sarcomas aggressive?

Some are slow-growing, while others are more aggressive. Behavior depends on the specific type and depth of the tumor.

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## Can sarcomas spread?

Yes. Some sarcomas can spread to other parts of the body, which is why early diagnosis and proper treatment are important.

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## Will I need an oncologist?

Often, yes. Sarcoma care frequently involves a **multidisciplinary team**, including dermatology, surgical oncology, and medical oncology.

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## Will surgery leave a scar?

Yes. Because complete removal is essential, scars are expected. Surgeons aim to balance cure with the best possible functional and cosmetic outcome.

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## How often will I need follow-up?

Regular follow-up is important to monitor for recurrence. The schedule depends on the sarcoma type and treatment received.