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Dermal matrices. An option in the management of circumferential nevi of extremities

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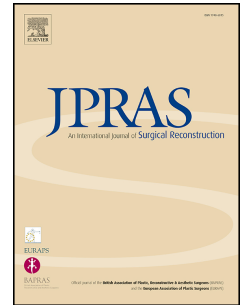
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Dear Sir

I have read with great interest the manuscript written by Sachar Y et al. "Expanded bi-pedicled "sleeve" flap for reconstruction of the upper extremity after large circumferential nevus excision in children"

Despite the evident interest of the article and the succesful outcomes of the presented technique ,there is, however, something more to be said.

The authors state that most of the current modalities available for addressing reconstruction of the upper extremity with such complex lesions simply fall short of achieving aesthetically favorable outcomes including dermabrasion , laser treatment, surgical excision with subsequent split-thickness skin grafting and pre-expanded full-thickness skin grafting) and consider surgical excision of the lesion with distant flap coverage as the best combination for treating and successfully reconstructing the affected extremity.

Unfortunately the use of dermal matrices as useful supplement and alternative to flaps, tissue expanders and full thickness skin grafts in patients undergoing reconstructive surgery after upper limb giant nevi is not mentioned. The medical literature extensively documented numerous reports in the last 10 years of succesful functional and cosmetic results with the use of dermal matrices in the reconstruction of upper limb full thickness skin defect and there is agreement that they may provide in the hands of properly trained clinicians under conditions of routine clinical use at specialized centers a treatment alternative for several indications where free or complex pediculated flaps are done historically.

In the last 20 years 17 patients presented to our institution with upper limb large circumferential nevi and were managed with dermal regeneration templates . Favorable cosmetic and functional outcomes were consistently attained in two simple procedures with no visible scar on donor sites. Adhesion to deeper planes, including bone, tendon or muscle was excellent in all cases resulting in smooth skin resurfacing and free joint movement.

In summary, the use of dermal matrices should not be underestimated as can provide an excellent result with reduced number of simplified procedures , short postoperative periods and no visible donor site scars in the management of upper and lower limbs circumferential GCMN. Our experience support the conclusion that it is a safe and effective treatment modality

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The author declares no conflict of interest

1.-Shachar Y et al Expanded bi-pedicled "sleeve" flap for reconstruction of the upper extremity after large circumferential nevus excision in children. *J Plast Reconstr Aesthet Surg*. 2016 Dec;69(12):1676-1682.

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