Epitrochlear Lymph Node Dissection and Axillary Lymph Node Biopsy. An Unusual Clinical Presentation in a Patient with Forearm Melanoma

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When primary melanomas of the forearm or hand metastasize to a lymph node, they usually affect axillary nodes, but in a small minority of patients epitrochlear node involvement can occur. The relationship between tumor-draining axillary and epitrochlear nodes is still unclear, the latter being commonly considered as interval node or node located in a minor node field.^{1–3}

The possible involvement of epitrochlear nodes demands anyway a detailed preoperative lymphoscintigraphy as well as a meticulous intraoperative search, even if the finding of positive SLN in the basin is infrequent.^{4,5}

We present a case of a forearm melanoma with clinical involvement to epitrochlear nodes and metastasized to an axillary sentinel lymph node, with remaining axillary nodes uninvolved; the video illustrates the features of the case and highlights some technical details associated with epitrochlear lymph node dissection.

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