

INTRODUCTION

The skin forms a self-replacing multifunctional, resilient covering for the body that adjusts easily to a remarkable variation in environment. as well as adapting to the needs of the underlying structures that it shelters. (Stewart et. al . 1978) .

The skin is a heterogenous structure,consisting of various cell types and organs, many of which can begin to grow abnormally. this giving rise to tumours. (Vasarinsh 1982) .

The number. of different skin tumours exceeds that of any other organ. (Caro. and Bronstein 1985). In reviewing the literature on tumours of the skin, it is noticed that there are many difficult and important points which deserve investigation. Namely, the large number of lesions it contains which sometimes lack diagnostic accuracy, lacka definite final classifications. especially for certain types.

This difficiency may be in part due to the vast and unlimited nomenclature and the traditional terminology which is not based on a certain system. But based on a mixture of gross appearances, clinical course, cause, and recently on histologic picture. The most logical method of classifying tumours is on their histogenesis the tissue of origin can usually be identified on microscopy; but the exact direction of

differentiation of tumour cells is often hard to determine (Sanderson and Mackie 1979) so many individual tumours will require more specific or peculiar names than can be derived from histologic structure alone.

Aim of the work.

The aim of the present work is to discuss and review the diagnosis and surgical treatment of skin tumours.