AGE, SOCIOECONOMIC STATUS, RACE, AND CONGENITAL NEVUS EXCISION

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NOTHING TO DISCLOSE

INTRODUCTION

- Excision of congenital nevi is recommended for aesthetic reasons as well as for malignancy prophylaxis.
- As the lesions grow with children, excisions at a younger age may be technically easier.

The authors aimed to examine patterns in congenital nevus excision.

METHODS

- The Healthcare Cost and Utilization Project Kids' Inpatient Database (**HCUP KID**) is the largest all-payer pediatric inpatient database.
- Diagnosis codes used:
  - ICD-9 **216-216.9** and **757.33**
- Procedure codes for local and radical excision, grafts, flaps, and tissue expanders used.

METHODS

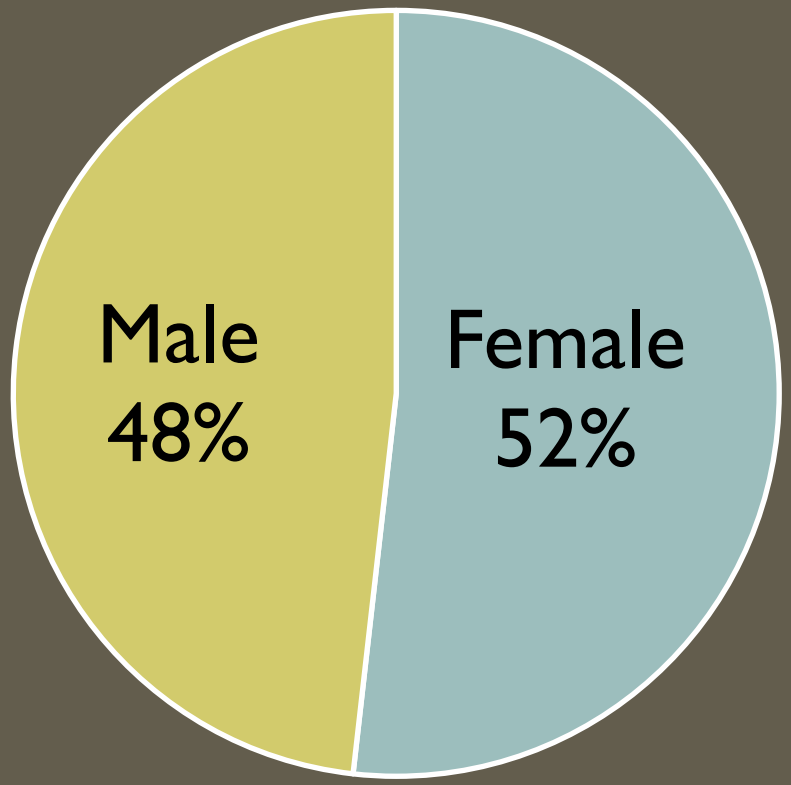
- Dollar values converted to 2015 amounts.
- Independent t tests and Mann Whitney U tests used for univariate analysis.
- Multivariate regressions constructed with variables significant ($p<0.05$) on univariate analysis.

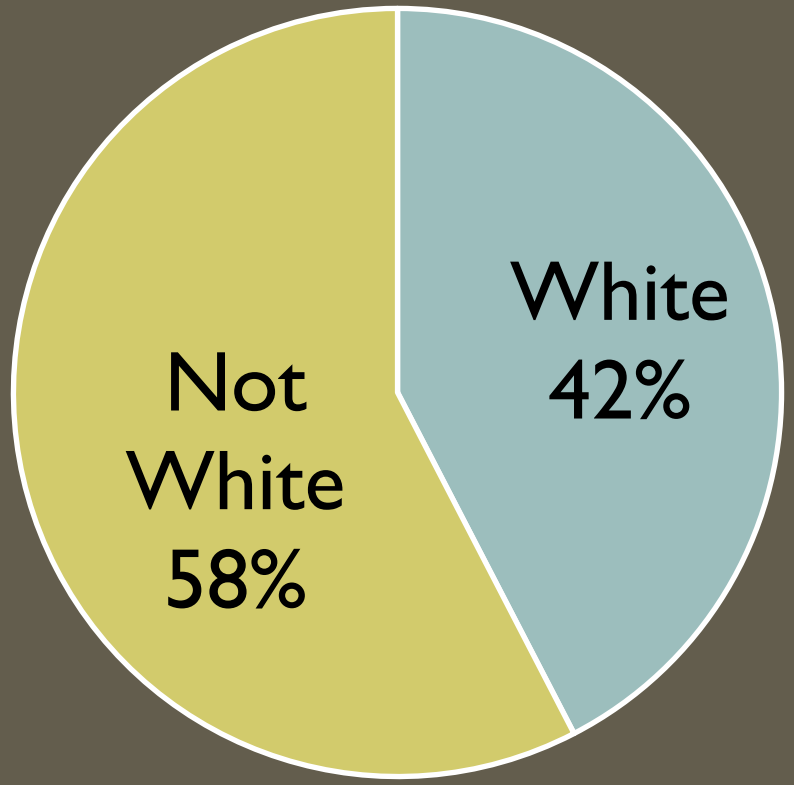
RESULTS

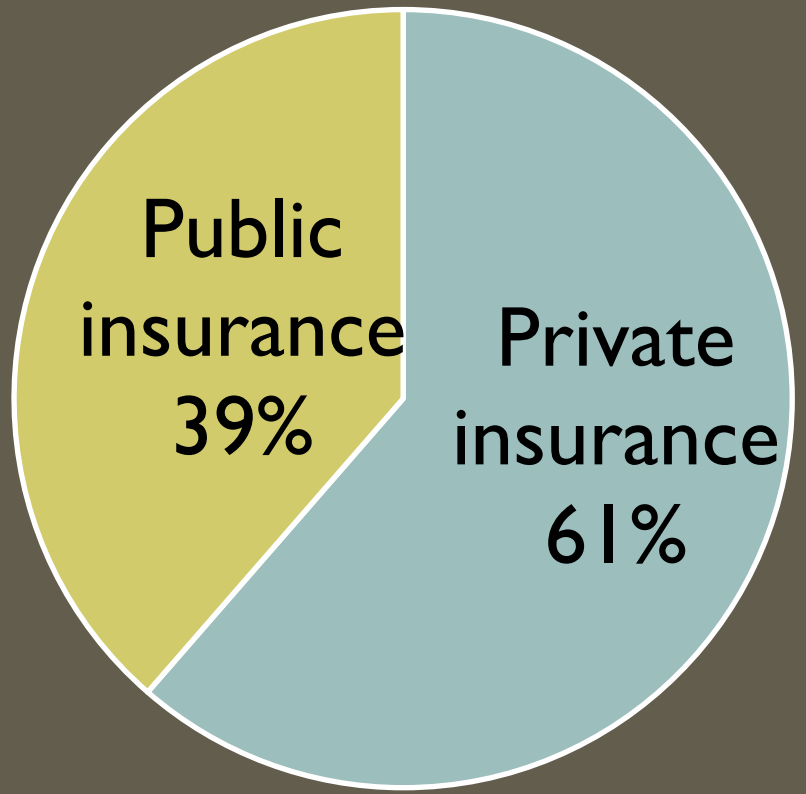
RESULTS - DEMOGRAPHICS

1,306 discharges

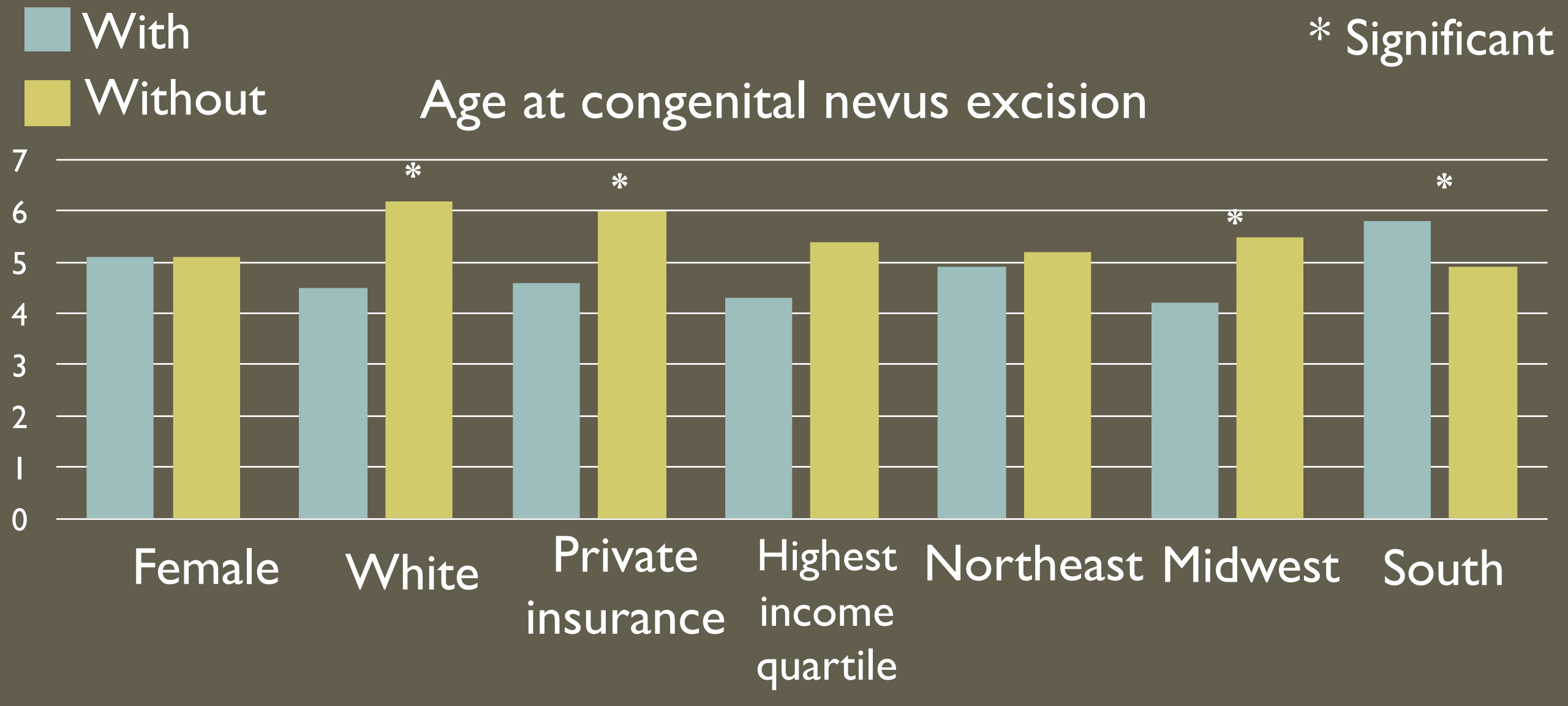
Average age: 5.2 years







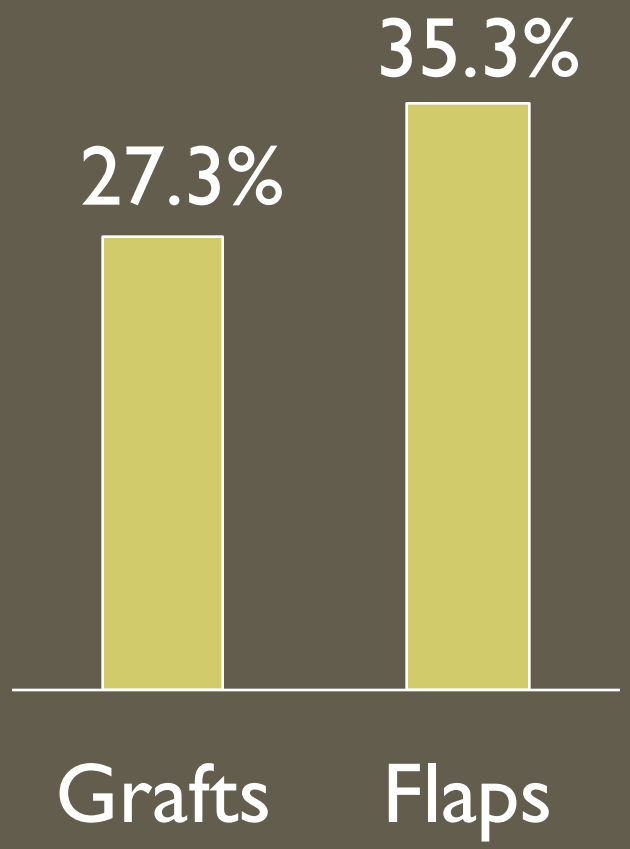
RESULTS – AGE OF SURGERY

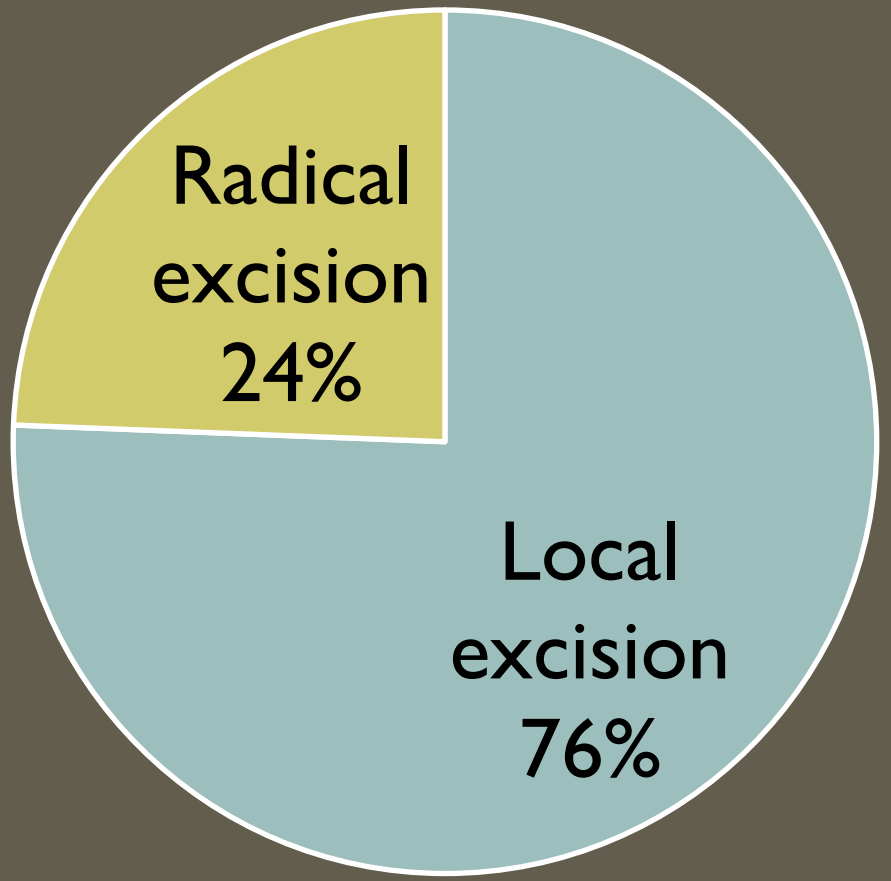


RESULTS – EXCISION TYPE

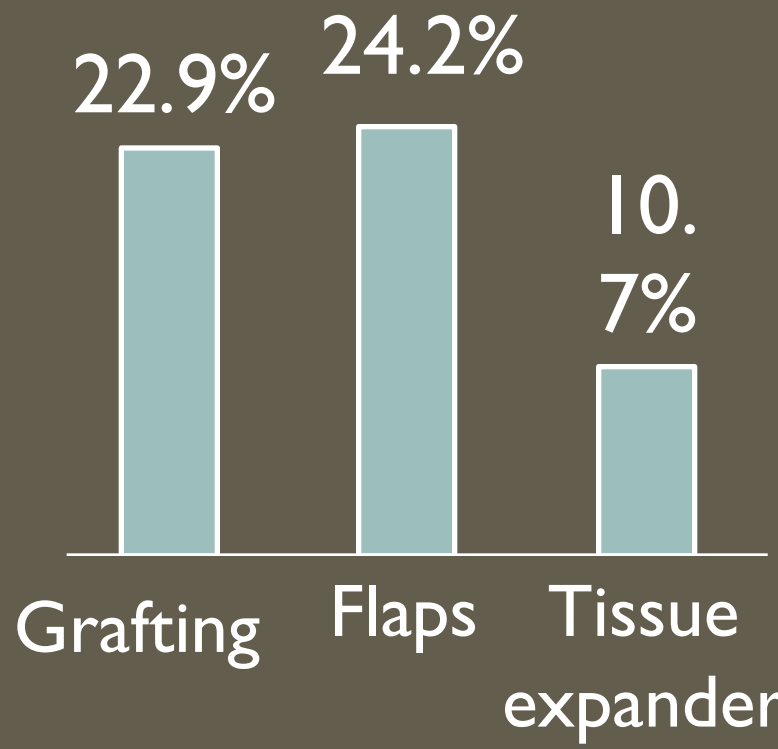
Patients with radical excisions more likely to require flaps (p=0.0003).

Additional procedures with radical excisions





Additional procedures with local excisions



RESULTS – ASSOCIATIONS WITH **RADICAL EXCISION**

Associated with radical excision:

- **Older age** (p=0.015).
- **Northeastern location**: 0.60 (0.40-0.91).
- **Household income below highest quartile**: 0.60 (0.40-0.91).

RESULTS – ASSOCIATIONS WITH **COMPLICATIONS**

3.4% of patients had a complication

UNIVARIATE ANALYSIS:

Complications **less** common:

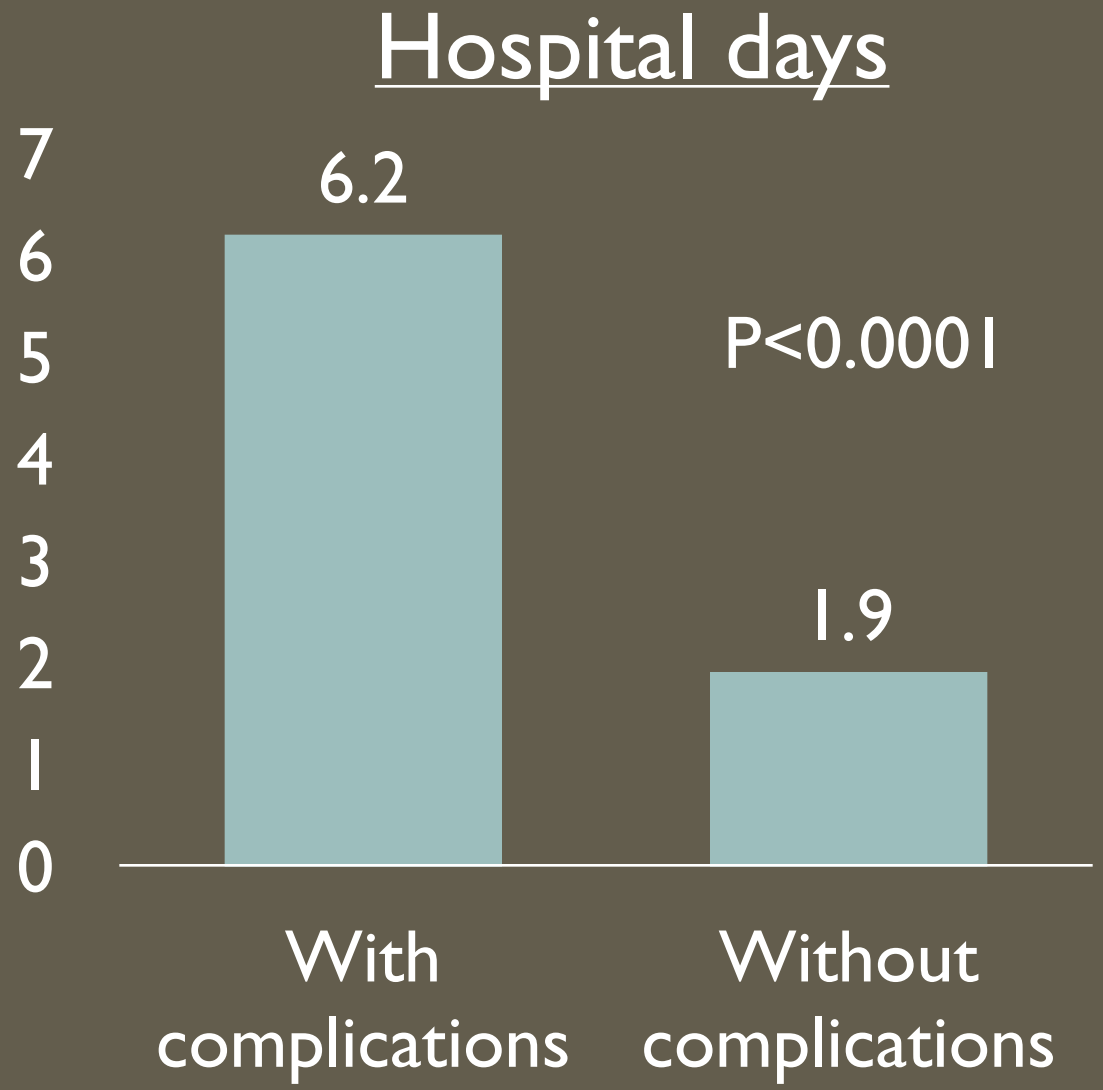
- White patients
- Private insurance
- Northeastern location

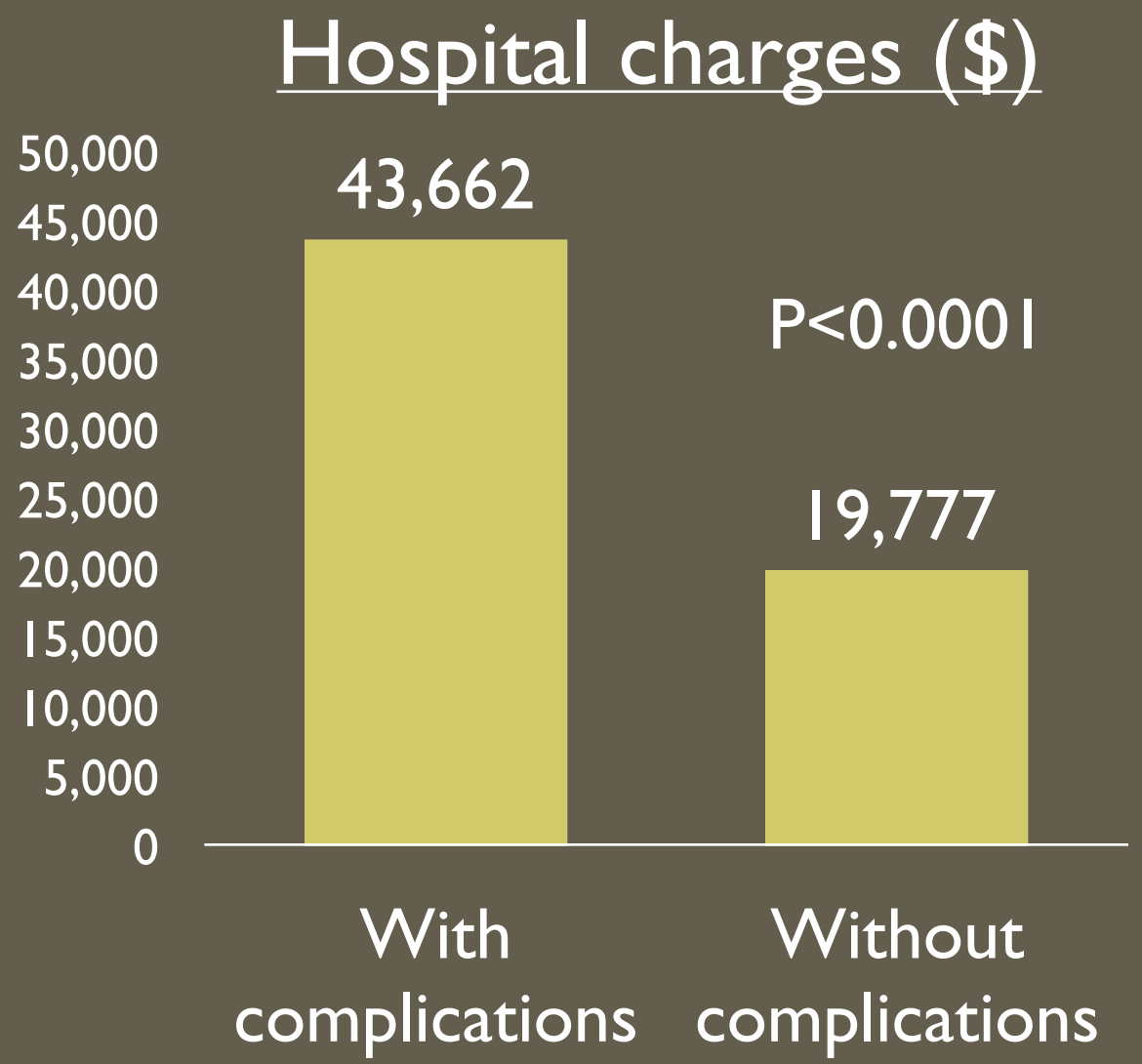
Complications **more** common:

- Southern locations

Only **southern location** associated with complications on **multivariate analysis**

RESULTS – LENGTH OF STAY AND CHARGES





CONCLUSIONS

Patient age at presentation is associated with excision type for congenital nevi.

Certain excision types are higher risk.

Certain patient populations are more likely to present later.

Non-white and poorer patients may be at increased risk for complications.

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