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Dermatology Online Journal

Title

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Journal

Dermatology Online Journal, 22(9)

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Publication Date

2016

DOI

10.5070/D3229032543

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Peer reviewed

Abstract

Histological completeness of BSS Excisions by dermatologists, plastic surgeons and general practitioners.

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Dermatology Online Journal 22 (9)

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OBJECTIVES

First to determine the proportion of incompletely excised basal cell carcinomas (BCCs) treated by conventional excision by dermatologists, plastic surgeons and general practitioners. Second to identify characteristics of incomplete excised BCCs.

METHODS

Analysis of pathology reports of 3005 primary BCC excisions by general practitioners (31%), dermatologists (34%) and plastic surgeons (35%) from an urbanized area in the South West of the Netherlands from 2008-2014. Chi-square test and independent T-tests were used to analyze the primary outcome. Logistic regression was used to determine the odds ratio for incomplete excision in the groups corrected for patients age, patients sex, site, size, subtype and specialism.

OUTCOME MEASURES

Proportion of incompletely excised BCC per specialism, age and sex of patients, anatomical site, excision size (as a proxy for BCC size), and subtype.

RESULTS

Dermatologists had a complete excision rate of 93.24%, plastic surgeons 83.33% and general practitioners 69.61% ($p < .0001$). Head neck tumors were more often incompletely excised (OR 2.7; 95% CI: 2.0-3.7; $p < .0001$) compared to the trunk. Infiltrative BCCs were more often incompletely excised compared to nodular BCCs (OR 3.8; 95% CI: 2.7-5.4; $p < .0001$). Plastic surgeons and general practitioners had a higher rate of incomplete excisions compared to dermatologists (OR 2.0; 95% CI: 1.5-2.7; $p < .0001$, resp. OR 6.1; 95% CI: 4.5-8.3; $p < .0001$).

CONCLUSION

Regardless of subtype, location and size dermatologists had a significantly higher rate of completely excised basal cell carcinomas compared to general practitioners and plastic surgeons.