THEME Wounds



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Skin excisions in Australian general practice

The BEACH program, a continuous national study of general practice activity in Australia, gives us an overview of encounters where a skin excision was recorded as a procedure. This provides a backdrop against which the articles in this issue of Australian Family Physician can be further considered.

Skin excisions were recorded in BEACH data 723 times

in the year from April 2004 to March 2005, at a rate of 0.8 per 100 encounters. This represents an average of approximately 760 000 encounters at which a skin excision is performed in general practice across Australia in any 1 year. Skin biopsies made up a quarter of all excisions, while excisions of superficial lesions and malignant neoplasms each accounted for one-fifth. These excisions were performed at 706 encounters (Figure 1).

Patient characteristics

There was a higher percentage of male patients at excision encounters than the average for BEACH (48% compared with 44%). This can be seen in the gender specific rates: 0.8 per 100 male encounters and 0.7 female encounters.

A difference in rate of encounters where skin excisions were performed (referred to here as excision encounters) can be seen between younger and older patients. The age specific rate for patients aged 15-44 years was 0.5 per 100 encounters, whereas for patients aged 45 years and over the rate was double, at 1.0 per 100 encounters.

Postcodes of patients were used to examine the association between location and rates of skin excisions. Excisions were performed at almost twice the average rate at encounters with patients from large rural centres (1.5 compared with 0.8 per 100 total encounters), and the rate was also high for patients from other rural areas. The lowest rates were recorded for patients from capital cities and remote centres (0.6). These results agree with findings from a recent study of the influence of geography on morbidity managed in general practice.1

Reasons for encounter

The most common reason for encounter stated by patients at excision encounters was excise/remove tissue/biopsy/ destruction/debridement/cautery, at 33 per 100 of these encounters, indicating that about one-third of these encounters had been planned for this purpose. Skin symptom/complaint was the recorded reason at 25 per 100, and skin check up at 11 per 100 excision encounters. Malignant skin neoplasm, swelling, and naevus/mole were other reasons for encounter.

Problems managed

Malignant skin neoplasm was the most common problem managed with an excision, accounting for 37% of these problems. Unspecified skin symptoms/complaints accounted for 14%, naevus/mole 12%, and skin neoplasms of a benign or uncertain nature 8% of these problems.

Medications

There was a low rate of medication prescription/advice/ supply for problems managed with an excision. A lignocaine injection was the most common medication, followed by cephalexin.

Pathology orders

As would be expected at excision encounters, the rate of

pathology test orders was high, at 65 per 100 problems compared with the BEACH average of 25 per 100 problems. Histopathology accounted for almost all of the pathology tests. There were no referrals and just one imaging order (ultrasound) recorded at these encounters.

Conflict of interest: none.

Reference

 Knox S, Britt H, et al. Locality matters: the influence of geography on general practice activity in Australia 1998–2004. AIHW Cat. No. GEP 17. Canberra: Australian Institute of Health and Welfare, 2005.



The patients (n=706)						Reasons for	r encounter	
Gender	Percent	Rate ^(a)				(n=933, 132	per 100 excision enco	ounters)
Male	48.1	8.0					Rate per 100 exc	cision encounters ^(b)
Female	51.9	0.7				Excise/rem	ove tissue/biopsy*	* 32.6
Age group						Skin symp	tom/complaint	25.4
0–14	2.1	0.1				Skin check		11.0
15–24	6.2	0.5			→		skin neoplasm	6.9
25–44	17.8	0.5				Swelling*		6.8
45–64	38.4	1.0				Naevus/mo		6.1
65–74	16.3	1.0				Prescriptio	ns all*	3.4
75+	19.1	1.0				Rash	osis/sunburn	3.1 2.1
Location [†]								=
Capital city	49.6	0.6				Test result	S"	2.1
Other metro	49.6 8.1	0.6			L	-		
	8. i 10.7	1.5		Problems manag	od wii	th a ckin av	ricion	
Large rural Small rural	8.4	1.0		(n=714)	cu wii			
Other rural	6.4 19.7	1.0		, ,			t of problems	
Other rural Remote centre	19.7			Malignant skin ne			37.1	
			→	Skin symptom/co	mplai	int	13.6	
Other remote/offshore 2.5 0.9				Naevus/mole 11.6				
				Benign/uncertain			7.6	
				Excise/remove tis		iopsy**	6.7	
				Other skin diseas			5.9	
Medications				Solar keratosis/sunburn 4.9				
				Sebaceous cyst 3.1				
(n=39, 5 per 100 excision problems) Rate per 100 excision problems(c)				Swelling* 1.7 Warts 1.4				
•	uu excisio	•		vvaits			1.4	
Lignocaine injection Cephalexin		0.8 0.6					*	
							Pathology	
Chloramphenicol	LA injection unspecified 0.4						(n=472, 65 per 100	excision problems)
	ied	0.4						excision problems ^{(c}
LA injection unspecif Fluorouracil		0.3					Rate per 100	cacinion problems
LA injection unspecif Fluorouracil General anaesthetic (0.3 d 0.3					Histopathology	64.6
LA injection unspecif Fluorouracil General anaesthetic (Salicylic acid		0.3 d 0.3 0.3					Histopathology Cytopathology	64.6 0.8
LA injection unspecif Fluorouracil General anaesthetic (Salicylic acid Silver nitrate	unspecifie	0.3 d 0.3 0.3 0.3					Histopathology Cytopathology Chemistry	64.6 0.8 0.3
LA injection unspecif Fluorouracil General anaesthetic (Salicylic acid Silver nitrate Amox/potass.clavula	unspecifie	d 0.3 0.3 0.3 0.3 0.1					Histopathology Cytopathology	64.6 0.8
LA injection unspecif Fluorouracil General anaesthetic (Salicylic acid Silver nitrate Amox/potass.clavula	unspecifie	0.3 d 0.3 0.3 0.3		_	*		Histopathology Cytopathology Chemistry	64.6 0.8 0.3
Chloramphenicol LA injection unspecif Fluorouracil General anaesthetic (Salicylic acid Silver nitrate Amox/potass.clavula Betamethasone	unspecifie	d 0.3 0.3 0.3 0.3 0.1		Г	Skin	a excision	Histopathology Cytopathology Chemistry Haematology	64.6 0.8 0.3
LA injection unspecif Fluorouracil General anaesthetic (Salicylic acid Silver nitrate Amox/potass.clavula Betamethasone	unspecifie nate	0.3 0.3 0.3 0.3 0.1 0.1	age or		_	excision	Histopathology Cytopathology Chemistry Haematology	64.6 0.8 0.3
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LA injection unspecif Fluorouracil General anaesthetic (Salicylic acid Silver nitrate Amox/potass.clavula Betamethasone	unspecifie nate	d 0.3 0.3 0.3 0.3 0.1 0.1	-	location group excision was	(n=723	3, 0.8 per 100 P	Histopathology Cytopathology Chemistry Haematology S encounters) ercent of excisions	64.6 0.8 0.3 0.3
LA injection unspecification u	unspecifie nate ters specific	d 0.3 0.3 0.3 0.3 0.1 0.1 c to each gender, ounters at which	a skin	location group excision was	(n=723	3, 0.8 per 100 P y skin	Histopathology Cytopathology Chemistry Haematology S encounters) ercent of excisions 24.8	64.6 0.8 0.3 0.3
LA injection unspecification u	nate ters specific per 100 enco	d 0.3 0.3 0.3 0.3 0.1 0.1 c to each gender, ounters at which	a skin	location group excision was skin excision	(n=723 Biops Excisi	3, 0.8 per 100 P y skin ion superfici	Histopathology Cytopathology Chemistry Haematology S encounters) ercent of excisions 24.8 al lesion 21.4	64.6 0.8 0.3 0.3
LA injection unspecif Fluorouracil General anaesthetic of Salicylic acid Silver nitrate Amox/potass.clavula Betamethasone Rate per 100 encount Expressed as a rate performed Expressed as a rate performed	nate ters specific per 100 enco	d 0.3 0.3 0.3 0.3 0.1 0.1 c to each gender, ounters at which blems managed mote and Metro	with a spolitan	location group excision was skin excision Areas (RRMA)	Biops Excisi Excisi	3, 0.8 per 100 P y skin ion superfici	Histopathology Cytopathology Chemistry Haematology S encounters) ercent of excisions 24.8 al lesion 21.4 nt neoplasm 21.2	64.6 0.8 0.3 0.3

Figure 1. Content of encounters at which a skin excision was performed