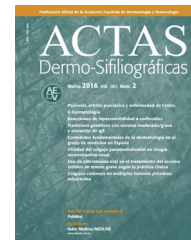




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## ORIGINAL ARTICLE

# Outpatient Dermatological Diagnoses in Spain: Results From the National DIADERM Random Sampling Project<sup>☆</sup>



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### KEYWORDS

Diagnoses;  
Coding;  
Outpatient clinic;  
Outpatient activity;  
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Spain;  
Random sampling;  
Survey;  
Cross-sectional study;  
Prevalence

### Abstract

**Background:** Dermatologists perform most of their work in outpatient or private clinics. Data on the diagnoses made by dermatologists in these settings are lacking, however, as outpatient activity, unlike hospital activity, is difficult to code. The aim of this study was to analyze the diagnoses made by members of the Spanish Academy of Dermatology and Venereology (AEDV) at dermatology clinics in Spain.

**Methods:** We selected a random sample of AEDV dermatologists drawn from the AEDV list and stratified by geographic area. The selected dermatologists received instructions on how to collect the data required. Each participant recorded the diagnosis reached and other data for patients seen during 2 specified periods: 3 days in January and 3 days in May. The diagnoses were subsequently coded by a dermatologist expert in applying the International Classification of Diseases (10th revision). In view of the complex nature of the sample, data were analyzed with standard error and finite population corrections.

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**Results:** The sample consisted of 124 dermatologists. Of these, 65% participated in the first phase of the study and 59% in the second. An estimated 621 562 patients (95% CI, 368 130-874 995) visit the dermatologist every month in Spain. This is the equivalent of 28 (25-31) patients per day per clinic. The most common diagnosis recorded was actinic keratosis, followed by basal cell carcinoma and melanocytic nevus. The vast majority of visits took place at the clinic, but 1% of patients (0.3%-3%) were assessed using teledermatology.

**Conclusions:** This is the first study in Spain to analyze diagnoses made by AEDV members at outpatient dermatology clinics. Our findings show a high volume of activity and will be useful for guiding health care planning, resource use, and future studies.

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## PALABRAS CLAVE

Diagnósticos;  
Codificación;  
Consulta externa  
hospitalaria;  
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Servicios  
dermatología;  
España;  
Muestreo aleatorio;  
Encuesta;  
Estudio transversal;  
Prevalencia

## Análisis de los diagnósticos realizados en la actividad ambulatoria dermatológica en España: muestreo aleatorio nacional DIADERM

### Resumen

**Introducción:** La actividad principal realizada por dermatólogos tiene lugar en la consulta externa hospitalaria o en los centros privados. A diferencia de la actividad hospitalaria, que es fácilmente codificada, no existen datos globales sobre los diagnósticos realizados por los dermatólogos en estos niveles. El objetivo de este estudio es analizar los diagnósticos realizados en las consultas de dermatología de los miembros de la Academia Española de Dermatología y Venereología (AEDV) en España.

**Metodología:** A partir del listado de dermatólogos de la AEDV se obtuvo una muestra aleatoria estratificada por secciones territoriales de la AEDV. A los dermatólogos participantes se les instruyó en la forma de recoger los datos. Cada participante recogió los diagnósticos y otros datos de los pacientes atendidos durante 6 días de consulta en 2 fases (3 días en enero y 3 días en mayo). Posteriormente la codificación de los diagnósticos la realizó un dermatólogo experto empleando la CIE-10. El análisis se realizó considerando el diseño muestral complejo empleado para corregir los errores estándar y el ajuste para poblaciones finitas.

**Resultados:** Se muestrearon 124 dermatólogos. Finalmente participaron en el estudio el 65% de los dermatólogos muestreados en la primera fase y el 59% en la segunda. El número de pacientes estimados que consultan al dermatólogo en toda España por mes sería de 621.562 (IC 95%: 368,130-874,995), con un promedio de 28 (25-31) pacientes por día de consulta. El diagnóstico más frecuente fue el de queratosis actínica, seguido de carcinoma basocelular y nevus melanocítico. La forma habitual de evaluar a los pacientes es mediante visita presencial y en el 1% (0,3%-3%) de los casos se realiza teledermatología.

**Conclusiones:** Se trata del primer estudio de ámbito nacional que analiza diagnósticos hechos en las consultas de dermatología de los miembros de la AEDV, mostrando una alta carga asistencial. Dicha información además será de utilidad para realizar una correcta planificación sanitaria, aprovechamiento de los recursos y planificar futuros estudios.

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## Introduction

Although most routine dermatology services in Spain are provided in outpatient clinics, data on the diagnoses reached by dermatologists in these settings are lacking. Studies carried out by dermatologists tend to be local, retrospective, focused on a single disorder, or conducted in other settings such as primary health care facilities.<sup>1-5</sup>

A comparative study of common reasons for seeking care at dermatology services in Spanish and immigrant patients in Palma de Majorca found that benign tumors were the most frequent reason, followed by inflammatory conditions and viral skin diseases, with a total of 213 diagnoses reached during the 1-year study period.<sup>3</sup> Another study, carried out

in Granada in patients over 65 years of age, found that basal cell carcinoma was the most frequent diagnosis, followed by actinic keratosis.<sup>2</sup>

A recent analysis of the burden of skin disease in the United States found that 26.9% of the population was seen by a physician for a skin condition in 2013, generating high direct and indirect costs, comparable to those associated with conditions such as diabetes or cardiovascular disease.<sup>6</sup> In view of the large number of patients seen in dermatology clinics each year, accurate knowledge about the most prevalent diseases would make it possible to analyze the management of these diseases and the costs associated with their treatment, and to distribute the available resources more efficiently in accordance with demand.

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