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P058 Healthcare disparity affecting delayed diagnosis in acral lentiginous melanoma
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Acral lentiginous melanoma (ALM) is a rare subtype of cutaneous malignant melanoma that arises in patients with minimal correlation to ultraviolet radiation exposure, unlike many other melanoma subtypes (Arrington JH 3rd, Reed RJ, Ichinose H, Krementz ET. Plantar lentiginous melanoma: a distinctive variant of human cutaneous malignant melanoma. Am J Surg Pathol 1977; 1: 131–43). The 5-year overall survival rate for stage I disease is 98%, which can drop as low as 10% for stage IV. A concerning trend in diagnosis has shown that many patients present with this disease later in the disease process and are thus subject to high morbidity and mortality. Of additional concern is that ALM disproportionately affects non-White populations. A previous Surveillance, Epidemiology and End Results study (n = 1724) reported that Black patients, on average, presented with more advanced disease than their White counterparts (Huang K, Fan J, Misra S. Acral lentiginous melanoma: incidence and survival in the United States, 2006–2015, an analysis of the SEER registry. J Surg Res 2020; 251: 329–39).

This calls into question the role of socioeconomic inequities in the stage of disease at which patients are diagnosed. A retrospective cohort study of 3683 patients diagnosed with stage I and stage IV ALM between 2004 and 2020 in the National Cancer Database was compared via binary logistic regression to determine factors associated with later diagnosis. On multivariate analysis, Black race and male sex were associated with later stage at diagnosis (P = 0.001 and P < 0.001, respectively). Population density, insurance status, facility location, education level, income status, age and Hispanic status did not have statistically significant associations with patients diagnosed with stage I vs. stage IV ALM. These results illustrate that Black male patients disproportionately face disparities in the diagnosis of this subtype of melanoma. This study highlights the need for continued research on ALM and the factors that affect its prompt recognition, diagnosis and treatment.