



Race and Social Vulnerability As Predictors of Breast Reconstruction Outcomes

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Background

- Post-mastectomy breast reconstruction has been shown to improve physical and psychosocial well-being
- Although reconstruction rates have increased over time, disparities remain particularly among racial minorities and patients with lower socioeconomic status

Purpose

- Analyze the impact of race and social vulnerability on outcomes of post-mastectomy breast reconstruction

Methods

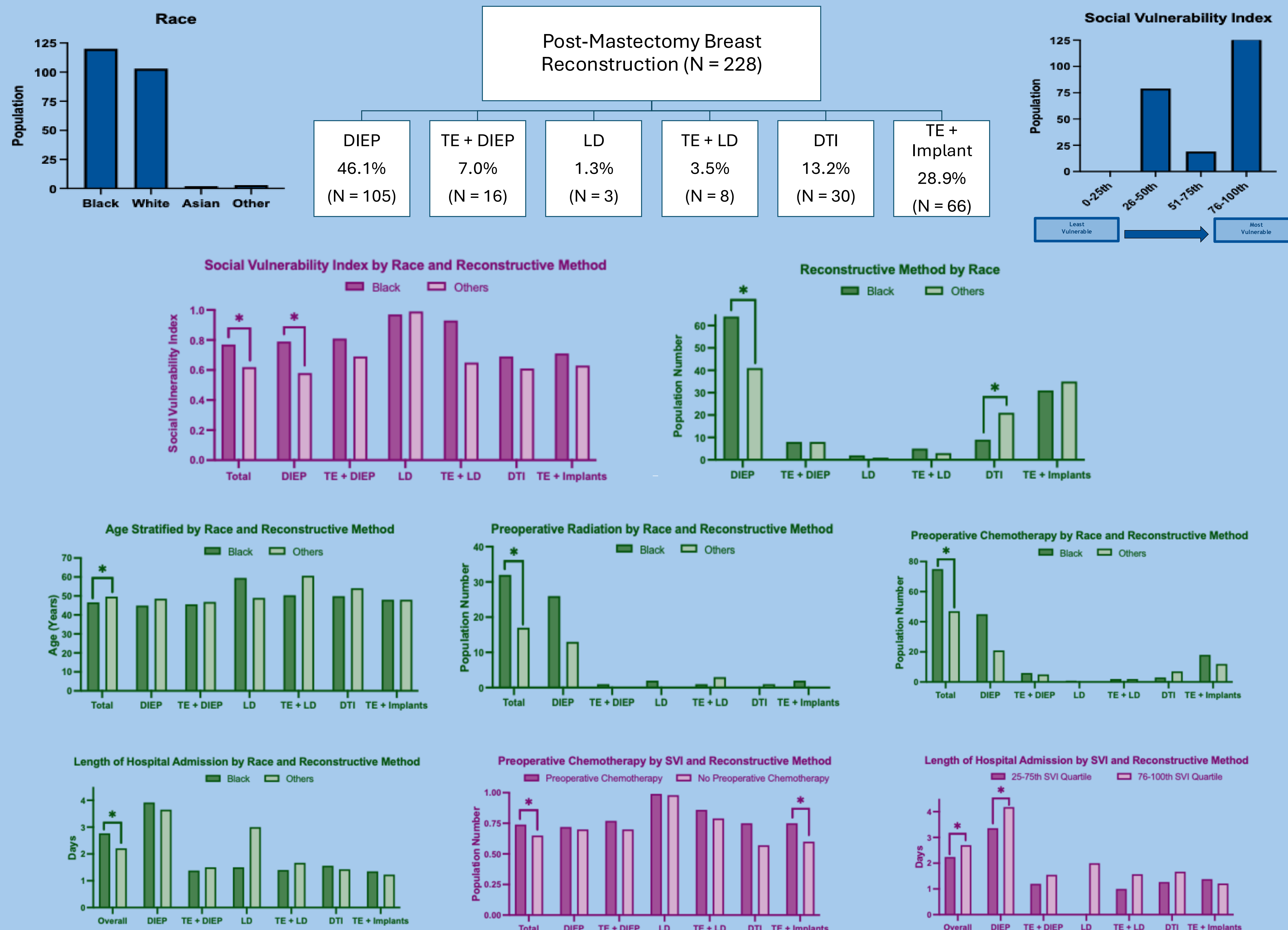
- Retrospective cohort study of patients undergoing first-time post-mastectomy breast reconstruction at a single institution from 2016-2023
- Data included: demographics, social vulnerability index (SVI), preoperative treatment with radiation/chemotherapy reconstruction methods, and outcomes
- Statistical analysis with independent t-tests and Chi-square
- Stratified by reconstructive methods



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Results



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- Most patients were Black (52.6%)
White 45.2%; Asian 0.9%; Other 1.3%
- Most patients were in the most vulnerable quartile, and none were in the least vulnerable quartile
- Black patients were more likely to receive DIEP flaps and less likely to undergo direct-to-implant reconstruction
- Black patients overall and black patients receiving DIEP flaps were more socially vulnerable
- Black patients presented at a younger age and were more likely to undergo preoperative radiation and chemotherapy, and to have a longer hospital admission
- Higher socially vulnerable patients were more likely to receive preoperative chemotherapy and have a longer hospital admission

Discussion

- Sociodemographic factors significantly impact patients undergoing post-mastectomy breast reconstruction
- The relationship between race, increase SVI, preoperative chemotherapy and radiation and earlier presentation demonstrates increased susceptibility to increased disease severity and adverse health outcomes
- This impacts patients' access to care and their physical and economic well-being
- Attention to strategies addressing these disparities is needed to enhance care among vulnerable populations undergoing breast reconstruction

* denotes statistically significant comparison