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401 Squamous Cell Carcinoma Surgery During a Global Pandemic – a Single UK Tertiary Centre Experience

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Aim: To determine excision rates for squamous cell carcinoma (SCC) both before and during the COVID 19 pandemic.

Method: Between April 2020 to March 2021, a retrospective cohort study of patients undergoing SCC surgery in Cambridge University Hospitals (CUH) was undertaken. Data was collected from the hospital patient record system (EPIC) and included preoperative diagnosis, excision margins, histological subtype, and operative technique.

Results: 287 primary SCCs were excised during this period. 70% of SCC patients were male, with the commonest site being the head and neck (72%). The rate of incompletely excised SSCs doubled from 5.5% in 2018–19 to 11.3% in 2020–21. Of these, most incomplete excisions were due to inadequate deep margins (9.8%). The majority of incomplete excisions were performed by registrars (14.8%) followed by consultants (9.1%).

Conclusions: Whilst diagnostic accuracy remains high, we report a decline in complete excision rates. Deferral of non-urgent visits due to the COVID-19 pandemic may have resulted in delayed diagnosis of SCCs, resulting in larger and deeper cancers. The more invasive SCCs may have then resulted in a higher rate of inadequate excision. A potential solution is the use of templates in operative notes, in order to ensure an accurate record of deep and peripheral margins is made.