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“Examining The Role Of Insurance Type On Disparities In Pediatric Sports-related Concussion Follow-up”

Background: Pediatric sports-related concussions (SRC) have increased over the past decade and are the primary cause of concussions in children. Children who have suffered concussions are more likely to have adverse long-term outcomes. The inability to adhere to concussion care recommendations has been shown to have longer recovery times and worse outcomes. Disparities in follow-up care have been shown particularly among pediatric patients who are publicly insured and identify as Black. Further examination is needed to determine if this disparity is driven by patients missing appointments or provider bias. Our aim was to examine the number and length of SRC follow-ups stratified by insurance type in our region.

Methods: We performed a retrospective chart review of patients <18 years old who were diagnosed with SRC at our stand-alone children's hospital from January 2007 to December 2021. We performed t-test, chi-square vs Fischer's exact (as deemed appropriate) for outcomes between insurance types, demographics, and follow-up care.

Results: 300 children were included. Medicaid/uninsured patients were more likely to be male ($p=0.0002$) and nonwhite ($p=0.0001$). They had a longer length of follow-up (53.08 ± 133.71 vs 34.90 ± 65.10 days, $p=0.0489$) and more patients who missed appointments ($p=0.0062$). However, the total number of follow-ups between insurance types was the same.

Conclusion: Medicaid/uninsured patients having a longer length of follow-up but the same number of follow-ups compared to privately insured patients, is likely due to the increased number of missed appointments by Medicaid/uninsured patients extending the follow-up period. These missed appointments are likely due to known causes of social disparity such as access to adequate transportation and resources.