## Non-Self-Inflicted Vs. Self-Inflicted Facial Gunshot Wounds: A Comparison of Insurance Status and Race with Mortality and Cost at UMCNO

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### Background

- From the mid-1960s to the present, gun violence has continued to rise throughout the country.
- According to the Centers for Disease Control and Prevention (CDC) from 1999-2018, suicide in the United States was in the top 5 causes of death for age ranges 10-54. Age ranges 55-64 were in the top 8. Suicide by firearm was the main method for age ranges 15-64.
- Homicide was in the top 4 causes of death for age ranges 1-34. Age ranges 35-44 were in the top 6. Homicide by firearm was the leading cause.
- Louisiana ranked #1 in the entire country for age-adjusted death rate secondary to firearms from 2001-2018 with 2 main causes being suicide and homicide.
- In Louisiana during this time frame, suicide and homicide death rates have increased across all ages and genders.

### Methods

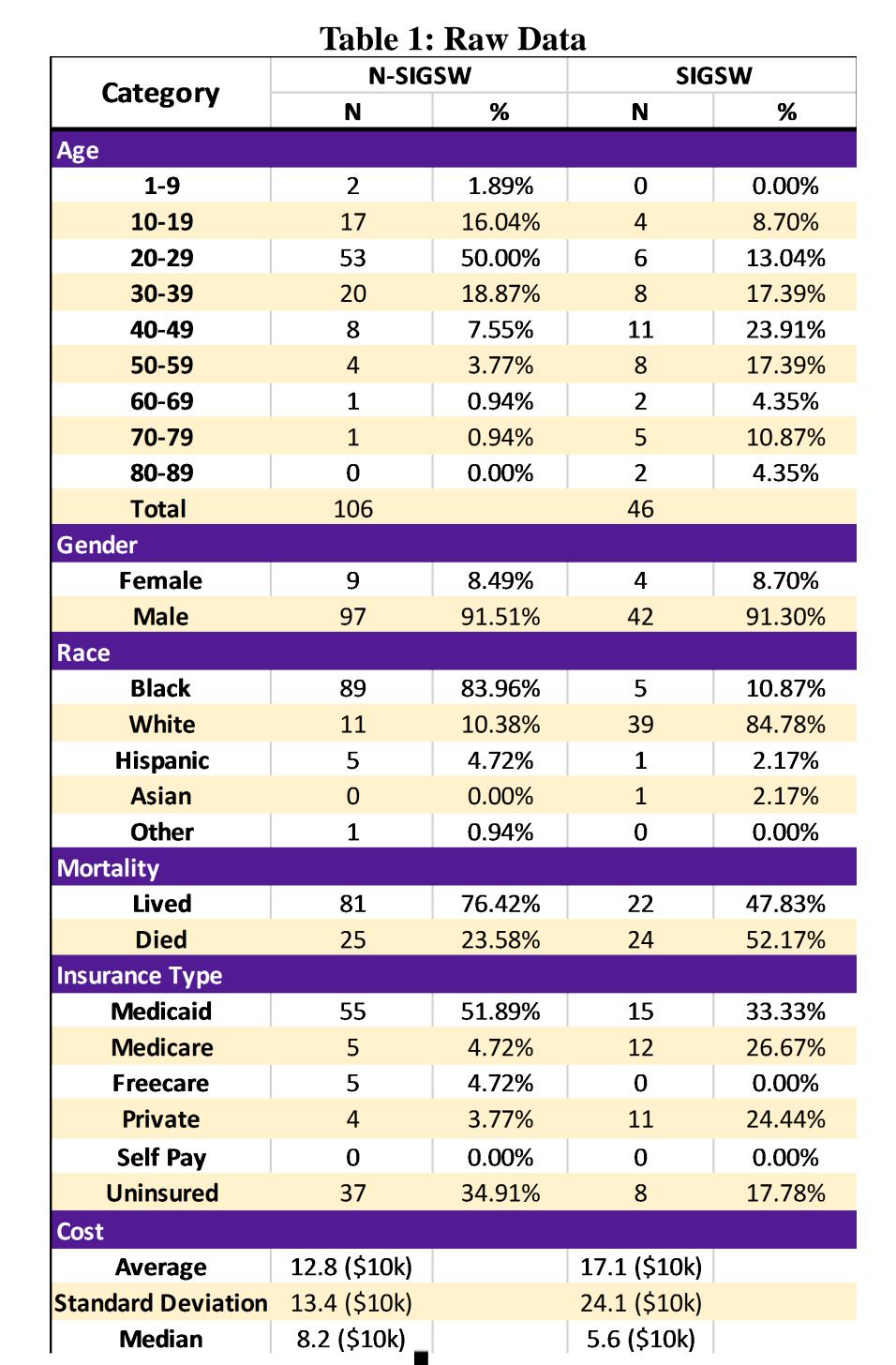
- Patients with GSWs were evaluated on a range of demographic and output variables including non-self-inflicted and self-inflicted facial GSWs (N-SIGSW & SIGSW respectively), age, gender, race, mortality, insurance type, and cost.
- A student's t-test (2-tailed,  $\alpha = 0.05$ ) was used for comparisons between uninsured vs. insured patient cost data and Black vs. White patient cost data.
- A chi-square ( $\chi^2$ ) test of independence (df = 1,  $\alpha$  = 0.05) was performed to examine the relation between uninsured vs. insured patient mortality data and Black vs. White patient mortality data.
- A retrospective sample of 152 patients who met inclusion criteria was obtained from UMCNO from 07/01/2012 to 06/30/2017. Ages ranged from 4-88.
- 106 patients were categorized as N-SIGSW (70%). 46 patients were categorized as SIGSW (30%).

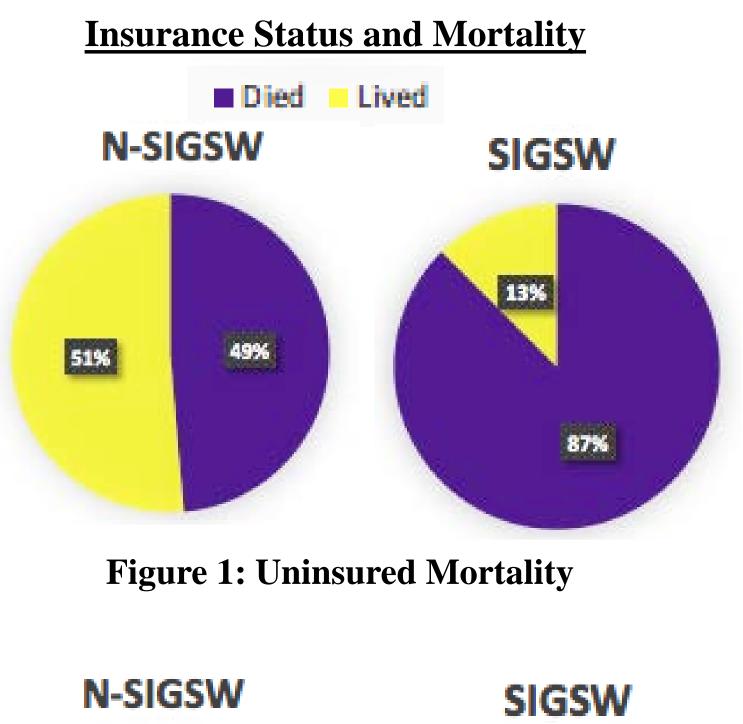
### References

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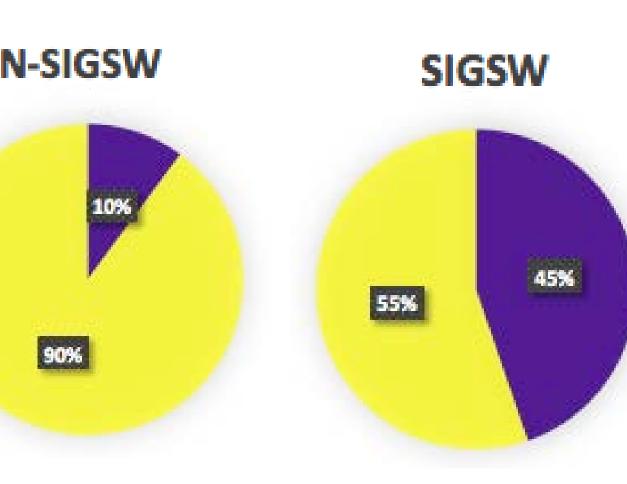


Figure 2: Insured Mortality

# N-SIGSW SIGSW 25% 40%

**Race and Mortality** 

Figure 3: Black Mortality

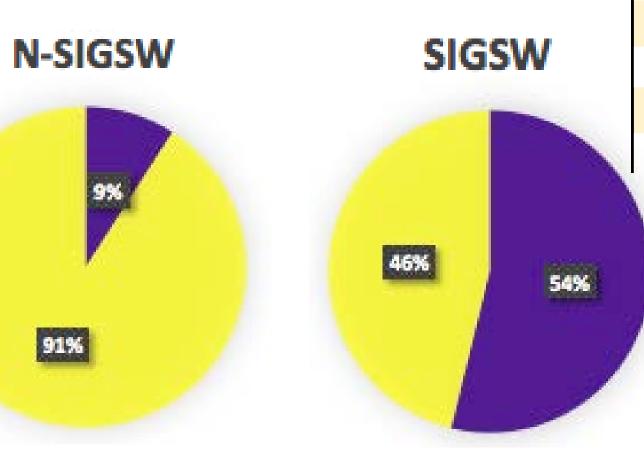


Figure 4: White Mortality

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### Results

- The relation between uninsured vs. insured patient mortality was significant for both N-SIGSW and SIGSW groups:  $\chi^2$  (1, N = 106) = 19.8, p = << 0.05 and  $\chi^2$  (1, N = 46) = 4.8, p = 0.03 respectively.
- The relation between Black vs. White mortality was not significant for N-SIGSW or SIGSW patients:  $\chi^2$  (1, N = 100) = 1.4, p = 0.25 and  $\chi^2$  (1, N = 44) = 0.34, p = 0.56 respectively.
- For N-SIGSW patients, the cost of treatment for uninsured individuals was not significantly different than those who were insured (Mean: \$102,748 vs. 142,160, p = 0.17).
- For SIGSW patients, cost for uninsured patients was significantly different from insured patients (Mean: \$45,418 vs. 199,231, p = 0.001).
- The cost of treatment for Black individuals was not significantly different than White individuals for either N-SIGSW or SIGSW groups: (Mean: \$133,211 vs. 104,193, p = 0.42) and (Mean: \$113,555 vs. 183,357, p = 0.29) respectively.

Table 2: Statistical Analysis of Mortality

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Category	N-SIGS	W	SIGSW				
	Mortality	p-value	Mortality	p-value			
Uninsured	18 (20.8%)	<< 0.05	7 (15.2%)	0.03			
Insured	7 (0.9%)	~~ 0.03	17 (37.0%)				
Black	22 (20.8%)	0.25	2 (4.3%)	0.34			
White	1 (0.9%)	0.25	21 (45.7%)				

Table 3: Statistical Analysis of Cost

Category	N-SIGSW				SIGSW			
	Cost in 100k	Mean	Median	p-value	Cost in 100k	Mean	Median	p-value
Uninsured	38.0 (28.2%)	1.0	0.3	0.17	3.6 (4.8%)	0.5	0.3	0.001
Insured	96.7 (71.8%)	1.4	1.0		71.7 (94.2%)	2.0	0.8	
Total	134.7				75.4			
Black	119 (92.2%)	1.3	0.9	0.42	4.5 (6.0%)	1.1	1.0	0.290
White	10 (7.8%)	1.0	0.7	0.42	70 (94.0%)	1.8	0.6	0.290
Total	129.0				74.5			

### Conclusions

- From these results, insurance status, rather than race, is more closely associated with mortality outcomes.
- Uninsured SIGSW patient costs were significantly decreased more than likely due to only a 12.5% survival rate.
- Further studies will elucidate why uninsured SIGSW patients have a higher mortality rate as opposed to insured.