

Abstract N°: 4380**Classification tool for congenital melanocytic naevi; a physician tool and patient self-classification tool.**

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Introduction & Objectives:

Various cutaneous features of congenital melanocytic nevi (CMN) may be predictors for surgical treatment outcomes, psychological problems, neurological manifestations and melanoma. Especially larger CMN (>20 cm projected adult size (PAS)) are rare and occur in 1:20,000 new-borns. Therefore, standard and uniform classification is crucial. Krengel et al. developed a consensus-based standardized categorization of six cutaneous features of CMN. Besides this Krengel classification, a patients self-classification tool may be useful as a triage tool and to facilitate patient's involvement in their disease management and enhance communication between patients and physicians. This study aimed to (1) evaluate the interrater agreement of the Krengel classification and (2) to develop and validated a patient self-classifications tool.

Materials & Methods:

Two independent CMN specialists classified medium-to-giant CMN patients in the outpatient clinic. These same patients were asked to use the self-classification tool. Interrater agreement among all raters was calculated with weighted kappa.

Results:

Seventy-one patients were classified by the specialists, with 22 medium (> 1.5 cm PAS), 22 large (>20 cm PAS) and 27 giant (>40 cm PAS) CMN. The mean age was 8 years (range 1 month – 39 years). Fifty patients used the self-classification tool. Assessment of consistency among two specialists showed moderate to excellent interrater agreement for the six features (kappa 0.43 - 0.91). The agreement between specialists and patients was excellent for size and satellite naevi number (kappa 0.8 and 0.67) moderate for hypertrichosis (kappa 0.49) and fair for rugosity, noduli and color heterogeneity (kappa 0.21 -0.38).

Conclusion:

Both the Krengel CMN classification for specialists and the patient self-classification tool CMN showed excellent interrater agreement for the most important predictors for melanoma and neurological manifestations i.e. size and satellite naevi number. Moderate and fair agreement was shown for the other features. Such standard reporting of patients facilitates treatment comparison and eventually facilitating guidance on management.