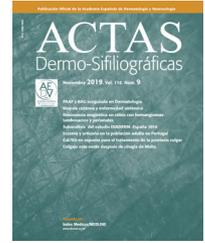




# ACTAS Dermo-Sifiliográficas

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## COMUNICACIÓN BREVE

### [Translated article] Private Dermatology Practice Characteristics and Fees in Spain in 2023: A Survey and Comparison With Findings for 2018



A. Martin-Gorgojo<sup>a,\*</sup>, I. García-Doval<sup>b</sup>, N. Iglesias-Pena<sup>c</sup>, E. del Río de la Torre<sup>d</sup>

<sup>a</sup> *Clinica Dermatológica Internacional, Madrid, Spain*

<sup>b</sup> *Clinica Vida, Vigo, Spain*

<sup>c</sup> *Servicio de Dermatología, Hospital San Rafael, A Coruña, Spain*

<sup>d</sup> *Clinica Dermalar, Santiago de Compostela, Spain*

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#### KEYWORDS

Economics;  
Fees;  
Private practice;  
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**Abstract** This report analyzes findings from a January 2023 survey of 235 dermatologists in private practice in Spain. The data for 2023 are compared to findings from a similar survey of conditions in 2018, to provide a snapshot of each year and identify changes in clinical practice and adaptations to emerging situations and challenges. Noteworthy changes in 2023 vs. 2018 included increased dedication to private practice and teleconsultations, more use of prepayment for procedures, more acceptance of payment by credit card or other electronic means, and variation in the timing of price changes. Sixty percent of the respondents reported planning to raise prices in 2023. The planned pricing adjustments will approximate the rise in the consumer price index. We also found that male dermatologists more often reported fees at the highest end of the range.

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#### PALABRAS CLAVE

Economía;  
Remuneración;  
Sector privado;  
Práctica privada;  
Identidad de género;  
Factores etarios

**Encuesta sobre las características y honorarios de la práctica dermatológica privada española en 2023. Actualización y cambios con respecto a 2018**

**Resumen** El presente trabajo incluye el análisis de los datos obtenidos mediante una encuesta realizada en enero de 2023 a 235 dermatólogos que ejercen actividad asistencial privada en España. Se añade un fotograma posterior al estudio con metodología similar realizado en 2018, al mismo tiempo que se analizan los cambios y adaptaciones que tiene la práctica con los nuevos tiempos y retos emergentes. Comparado con 2018, en 2023 destacan: incrementos

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\* Corresponding author.

E-mail address: [alejandromartingorgojo@aedv.es](mailto:alejandromartingorgojo@aedv.es) (A. Martin-Gorgojo).

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en la dedicación a la actividad privada, las teleconsultas, el cobro anticipado de técnicas, la aceptación de pagos con tarjeta bancaria y banca electrónica; cambios en la periodicidad de ajuste de precios; el hecho de que un 60% de los encuestados declare que ha ajustado al alza los precios en el año; un alza de los precios que se ajusta aproximadamente a la del IPC, y la observación de que los dermatólogos varones declaran con más frecuencia precios extremos más altos.

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## Introduction

In 2018, *ACTAS DERMOSIFILIOGRÁFICAS* published a study that addressed, for the first time, the characteristics of private practice and medical fees among specialists in medical-surgical dermatology and venereology in Spain.<sup>1</sup>

The present study aims to update the data recorded to the year 2023, that is, after 5 years, a pandemic, and an economic crisis. Our objective was not only to examine fees in private dermatology practice in Spain, but also to describe the changes and adaptations brought about by new times and emerging challenges. The primary objective was to describe the characteristics of private dermatology practice and the fees charged for the most common medical and cosmetic procedures using the same parameters and addressing some novel areas of interest. Our secondary objective was to perform a dynamic analysis of differences in the distribution of prices according to region, age, and sex.

## Material and Methods

We performed a cross-sectional descriptive study using data obtained via an online survey, which could be completed between January 9 and January 20, 2023.

Requests for participation were sent via 2 professional forums in which access was controlled by dermatologists: *Dermachat* (chat forum, with 888 members at the close of the survey) and *Dermus* (chat forum with 119 participants). This approach ensured that the responses were restricted to specialists in medical-surgical dermatology and venereology. While these groups mostly comprise Spanish specialists, the introduction to the survey and the initial questions excluded health professionals not practicing in Spain. Responses were limited to professionals with some private practice activity (based on an ad hoc question at the start of the survey).

Data were analyzed using the  $\chi^2$  test and comparing by regional section, sex, and age. Fee data were based on categories to make the survey more acceptable. For purposes of analysis, each category was recoded as its mean value—assuming that fees were distributed uniformly in the category—and mean prices in outlying categories were estimated as in the previous study.<sup>1</sup> Fees were compared using analysis of variance and linear regression after verifying that these methods were both applicable. The analysis was performed using IBM SPSS Statistics, Version 25.0 (IBM Corp.) and Stata Statistical Software: Release 17. Statistical significance was set at  $P < .05$ .

## Results

The survey was answered by 235 specialists in medical-surgical dermatology and venereology who provide private care in Spain (51.9% women). The demographic and professional data of the respondents are compared between 2018 and 2023 ([Table 1-A of the Supplementary Material](#)). Responses were received from all the regional sections of the Spanish Academy of Dermatology and Venereology. In this edition, we found no significant differences in the age of the respondents from the different sections.

A comparison of both editions of the study highlighted significant changes in the percentages for age groups (greater representation of the 40- to 49-year age group and the  $\geq 60$ -year group in the present edition,  $P < .001$ ) and an increase in the number of participants who provided private care ( $P = .03$ ). Once again, we found that private care was provided mainly by older professionals ( $P = .01$ ).

The results for invoicing systems and habits, promotions, and price adjustments, as well as the presence or absence of significant differences with respect to region, sex, and age are summarized in [Table 1-B of the Supplementary Material](#). As for the responses collected in 2018, we observed statistically significant increases in early payment for techniques (16.6% vs. 9%), acceptance of payment by bank card (88.9% vs. 75.2%), and online payment (60.4% vs. 32.9%). A significant reduction was found in the percentage of professionals who offered discounts to relatives and who accepted cryptocurrency as payment. The results also differed for the frequency of price adjustment: in 2023, the respondents more frequently reported that fees were adjusted every year or only when the professional considered it appropriate. In this edition, we also found significant differences according to age for frequency of fee adjustment (although on this occasion no differences were found with respect to sex): professionals aged  $\geq 50$  years more frequently have a defined periodicity for adjusting their fees ( $P = .001$ ). As for increases, 60% of the respondents reported that their fees would rise in 2023.

The results for setting fees and a comparison between editions are shown in [Table 1-C of the Supplementary Material](#). Fees based on a multiple of 10 continue to be more common. In 2023, greater frequency was found for the following: charges for reviewing results (43.4% vs. 18.8%) and online visits (40.4% vs. 9.0%). The percentage of dermatologists who charged for postsurgical dressings decreased significantly (22.6% vs. 37.6%). One area not addressed in the previous edition, and which was addressed in the present

**Table 1** Fees Set by Dermatologists Surveyed.

Concept and section		Mean price for 2018, €	IQR for 2018	Mean for 2023	IQR for 2023	Mean for 2023	IQR for 2023
<i>First visit (with statistically significant differences between sections in 2018 and 2023, P &lt; .001)</i>	Andalusia	86.1	80-105	94.8	80-105	<i>Follow-up visits (with no significant differences between sections in 2018, and with significant differences in 2023, P = .001)</i>	60-80
	Asturias-Cantabria-Castile and Leon	89.6	80-105	96.9	80-105		60-80
	Balearic Islands	109.0	105-105	108.1	80-127.5		45-80
	Canary Islands	80.8	80-80	84.2	80-86.3		60-80
	Catalonia	94.6	80-105	101.7	80-135		60-105
	Central	95.7	80-105	124.2	105-135		60-105
	Galicia	80.9	60-105	94.8	80-105		60-80
	Murcia	83.6	80-80	98.2	80-105		60-80
	Valencia	79.2	60-80	81.9	60-105		60-80
	Basque	87.1	70-105	104.5	80-105		60-80
	Country-Navarre-Aragon-Rioja						
Concept for regional sections overall		Mean for 2018	95% CI for 2018	Mean for 2023	95% CI for 2023	Increase % (mean 2018-2023)	
First visit		88.6	83.4-93.6	100.8	95.4-107.3	13.8%	
Follow-up visit		62.6	59.6-70.3	74.3	71.3-84.1	18.7%	
Low-complexity surgery (e.g., shave excision of nevi)		144.2	135.2-166.2	160.1	155.4-188.3	11.0%	
Medium-complexity surgery (e.g., removal of a tumor on the trunk or of a small-to-medium tumor on the face with direct closure)		188.9	179.4-221.6	223.5	209.8-259.8	18.3%	
High-complexity surgery (e.g., removal of a large tumor on the trunk or a larger lesion on the face with complex closure based on flaps or grafts)		324.1	287.2-408.9	367.9	344.6-440.2	13.5%	
Infiltration of botulinum toxin in a small anatomic area (e.g., glabella), including material		273.1	250.8-294.1	297.7	272.8-321.9	9.0%	
Infiltration of a vial of hyaluronic acid, including material		335.2	317.9-351.1	351.6	329.6-362.6	4.9%	

Abbreviation: IQR, interquartile range.

**Table 2** Differences in Fees According to the Sex of the Specialist in 2023.

Concept	Mean, male dermatologists, €	Mean, female dermatologists, €	Difference between prices, €	P Value (ANOVA)
First visit	102.83	98.98	3.85	.346
Follow-up visit	76.56	72.27	4.29	.259
Low-complexity surgery	170.09	150.83	19.26	.046
Medium-complexity surgery	234.40	212.95	21.45	.143
High-complexity surgery	399.75	330.81	68.94	.031
Botulinum toxin infiltration in a limited anatomic area (e.g., glabella), including material	323.06	277.84	45.22	.022
Infiltration of a vial of hyaluronic acid, including material	350	352.99	-2.99	.84

Abbreviation: ANOVA, analysis of variance.

edition, concerned whether dermatologists charged emergency cases at the same amount as a standard visit. We found that 30.6% generally charged the same for both.

Prices for the different concepts are shown in Table 1. The mean cost of a first visit as a private patient in Spain at the time of the survey was € 100.8, that is, 13.8% more than in 2018. This visit and follow-up visits were the only ones for which statistically significant differences between regional sections were found ( $P < .001$  and  $P = .001$ ).

The differences in fees by sex of the respondent have diminished compared with the previous edition (Table 2): the only significant differences were found for low- and high-complexity surgery and for infiltration of botulinum toxin. These differences were due to a small number of visits with significantly higher fees and that mainly apply to male dermatologists (significance is lost when these outliers are excluded).

## Discussion

The present study updates the characteristics and fees for private health care provided by dermatologists practicing in Spain in 2023. Differences were observed according to the sex, age, and geographic area of the dermatologists, with findings that differed from those reported in 2018.

We remain unable to identify studies following a similar methodology in the literature. We performed the study in the same way as we did 5 years ago and with the same characteristics.

The number of dermatologists providing private care has increased in 2023. In our opinion, the conditions, perceptions, and desirability associated with public and private health care are evolving, partly owing to the effects of the COVID-19 pandemic.<sup>2</sup>

The recent economic crises in Spain have affected many factors and behaviors,<sup>3</sup> as they did in the striking growth of private teledermatology in the last 5 years, the periodicity of fee adjustment, prepayment for techniques, acceptance of payment with bank cards and online payment, and payment for reviewing results. The percentage of professionals offering discounts to relatives decreased, as did that of professionals who reported considering cryptocurrency as a

means of payment (even though some scientific publications predict that these will increase and stabilize<sup>4</sup>).

The increase in per-visit fees was in line with the variation in the consumer price index between January 2018 and January 2023, that is, around 15.3%,<sup>5</sup> although price increases were clearly smaller for the injectable-based cosmetic procedures assessed. We do not know the reason for this smaller increase in cosmetic procedures, although a colleague suggested that this could be because of the evident growth in the availability of these procedures in Spain.

We re-analyzed the data from 2018 and compared them with those of the present edition of the study. Both in the present edition and in the previous one, the most extreme high prices were set by men. When these extreme prices are removed from the analysis, the differences between the sexes lose significance. When done in the 2018 version, it removed significant differences for all concepts except for the initial visit, where significant differences remained notwithstanding. We believe that the publication of the results of the previous survey may—in some cases—have encouraged some dermatologists to increase their prices, since they were not previously aware of the differences (no information was available before the publication of the manuscript), although we do not know the reason for this “glass ceiling” in pricing.

## Conclusions

Private dermatology in Spain is clearly expanding. Fees have been updated in line with the consumer price index. The services offered and some habits have changed, consistent with the period we live in. While the differences between the present edition of the survey and the 2018 edition have diminished, there continue to be differences in fees depending on sex, mainly because of the extremely high fees set by male dermatologists.

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## Conflicts of Interest

The authors declare that they have no conflicts of interest concerning the content of the present article.

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## Appendix A. Supplementary data

Supplementary data associated with this article can be found, in the online version, at [doi:10.1016/j.ad.2023.09.014](https://doi.org/10.1016/j.ad.2023.09.014).

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