

Cancer outcomes linked to GP referral rates

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(Medical Xpress)—Patients from GP practices with low endoscopy referral rates are at increased risk of poor outcomes from oesophageal and gastric cancers, according to research at the University of Liverpool.

Research, presented at Public Health England's National Cancer Intelligence Network annual conference, showed that there is a wide variation in rates of elective endoscopy between GP practices across England.

Variation in average referral rates

An endoscopy is a medical procedure during which a thin, flexible tube called an endoscope is used to look inside the stomach. It can be used to investigate conditions of the throat and gut.

The team studied more than 22,000 new cases of oesophageal and gastric cancer from over 6,000 general practices. Their research showed that average referral rates for endoscopy varied by 250%

Patients belonging to practices with low rates of endoscopy referral were shown to be at increased risk of a poor outcome as reflected in higher rates of emergency admission for diagnosis, lower rates of potentially curative surgery and poorer one year survival rates.

This was most marked in practices serving deprived populations where those in the low referring group had the poorest cancer outcomes in the country.

Dr Keith Bodger, at the University's Institute of Translational Medicine and Consultant Gastroenterologist at Aintree University Hospital, said: "Most tumours of the oesophagus or stomach are incurable by the time of diagnosis in the UK. Early symptoms may be mild or indistinguishable from the common benign causes of indigestion.

"Current NICE guidelines advise a conservative approach to investigating stomach symptoms, reserving gastroscopy for older patients or those with established 'red flag' or 'alarm' symptoms.

"Our research shows that general practices in England vary substantially in their rates of gastroscopy and that low rates are associated with a risk of poorer outcomes for oesophageal and [gastric cancer](#).

Targeted interventions

"Targeted interventions may be required for local populations having inappropriately low rates of investigation to encourage older people at risk to seek medical advice and to provide GPs with revised, more flexible guidelines and good local access to investigations."

Outcomes for many cancers have improved over the last decade, but progress has been limited for tumours of the oesophagus and stomach. One year [survival rates](#) for these cancers are approximately 40%.

The research recommends that GP practices with low rates of endoscopy referral should review their current practice, particularly those serving deprived populations.

Provided by University of Liverpool

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