

Round-the-clock A&E cancer doctors revolutionise treatment for patients

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Having on-site cancer consultants in hospitals with Accident and Emergency (A&E) departments improves diagnosis and treatment of patients and reduces their hospital stay, according to data presented at the National Cancer Research Institute Cancer Conference in Liverpool, today.

New [cancer patients](#) admitted through A&E usually have advanced disease, with late-stage symptoms, so not having access to the best cancer experts from the start can cause confusion around diagnosis and treatment.

To address this, The Clatterbridge Cancer Centre NHS Foundation Trust

developed a network of 'Acute Oncology'* teams to provide a Monday-to-Friday emergency cancer service in all hospitals with A&E departments in the Merseyside and Cheshire cancer network, to see if this would improve treatment for patients admitted through A&E.

The service aimed to improve assessment of people who had not yet been diagnosed with cancer; cancer patients admitted because of treatment side effects; and cancer patients with disease complications.

Between April 2012 and April 2013, 787 cancer patients were admitted as an [emergency](#) to Southport and Ormskirk hospital trust, either through the A&E Department, or through the Medical Admissions Unit.

Of these, 96 per cent were seen within 24 hours by the Acute Oncology Team and the remaining four per cent were seen within 48 hours. Previously these patients would not have been seen at all by oncology consultants.

The results showed that 76 per cent of the 787 A&E patients received a major benefit of being seen by oncology specialists when previously no such service existed. These benefits included the acute team being able to advise medical teams more quickly and effectively on appropriate investigations for new cancer patients. And for people with existing cancer the team could provide more effective management of severe chemotherapy or radiotherapy side effects.

These improvements combined to decrease the length of stay in hospital to an average of 8.7 days compared within the previous average stay of 12.1 days, across the network. The service was also able to care for some patients in A&E or day units enabling patients to be discharged and avoiding unnecessary admission.

A support service also provided information on cancer treatment to

patients and their families – enabling earlier discharge compared with the previous system.

Dr Helen Neville-Webbe, study author, Consultant at The Clatterbridge Cancer Centre and Acute Oncology Consultant at Southport and Ormskirk Hospital, said: "Incorporating cancer consultants and cancer nurse specialists into the acute medical services of A&E and Acute Medical Admissions of a hospital means better care for cancer patients. Being able to see a specialist straight away has ensured patients receive better management of side effects of cancer treatment, and for those admitted with advanced disease, we can ensure patients are appropriately managed, whilst providing psychological support and information."

There was no budget for the new service and cost savings were made from reduced bed costs because of the reduced length of stay in [hospital](#) due to the improved patient pathway.

Dr Neville-Webbe added: "This new approach to acute cancer care provides cost savings whilst providing high quality care to [cancer](#) patients, making it a win-win for [patients](#) and the NHS."

Provided by Cancer Research UK

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