

## Clearer communication by GPs could speed up cancer diagnosis

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Clearer communication by GPs could speed up cancer diagnosis. Credit: Oxford Science Blog

Deciding when to return to the GP when symptoms do not resolve is something many people struggle with, especially when the symptoms may not appear to be serious or life-threatening. Research with cancer patents in Denmark, England, and Sweden, published today in BMJ Open, indicates that small changes to how doctors conclude consultations with their patient could help to improve both survival rates and efficiency.



Led by Oxford University, the international team included researchers from Aarhus University in Denmark with Lund University and the Karolinska Institute in Sweden. The project was funded by Cancer Research UK.

The researchers interviewed 155 people aged between 35 and 86 years old, within six months of being diagnosed with lung or <u>bowel cancer</u>. Patients were invited to talk about events since they had first noticed a problem, including what influenced their decision to consult a doctor.

The study compared Denmark, England, and Sweden because <u>survival</u> <u>rates</u> for lung and bowel <u>cancer</u> between 1995 and 2007 were persistently higher in Sweden than in Denmark or England, particularly in the first year following diagnosis.

Notable differences between the three countries were found in patients' accounts of the clarity and communication of action plans at the end of GP consultations. Patients in England and Denmark told the researchers that they had not known whether and when to return to their GP with symptoms, while Swedish patients described clear action plans with instructions from their GP to return in specified timeframes.

The study concluded that if clear action plans are used routinely in primary care consultations then uncertainty, false reassurance, and the inefficiency and distress of multiple consultations during cancer diagnosis could be reduced.

The authors recommend that every GP consultation should conclude with explicit advice about what to look out for and provide specific advice for patients to return if symptoms do not resolve, or re-occur.

Dr John MacArtney, Senior Researcher at Oxford University's Nuffield Department of Primary Care Health Sciences, said: "Spotting cancer



early can make the difference between survival and death. We already know that many people are reluctant to seek medical attention in the first place, for fear of unnecessarily bothering their doctor. If they have already seen a GP for the same or similar symptoms then they may wait longer to return, even if they have been given the general advice to "come back if things don't get better." This makes it important to understand why people might be reluctant to re-visit their GP."

The study, which is the first to study how patients experience the pathway to <u>cancer diagnosis</u>, has helped to illuminate previous findings from other International Cancer Benchmarking Partnership studies, which have shown that no single factor could explain why differences in cancer outcomes persist between high-income countries with universal health coverage.

The study lead Sue Ziebland, Professor of Medical Sociology in Oxford University's Nuffield Department of Primary Care Health Sciences, said, "Making the general public aware of the seemingly innocuous symptoms of common cancers is only one part of improving early diagnosis. It is just, if not more, important to remove the barriers patients face in getting to see their GP if they are concerned about their health. One of those barriers arises when patients are unsure about what to do when symptoms return or persist, because they have already seen a GP.

"Recognising these issues exist, and encouraging GPs to communicate concrete and specific action plans, could be vital in improving patient survival, especially for those patients who worry about wasting the doctors time."

Sara Hiom, Cancer Research UK's director of early diagnosis, said: "Diagnosing cancer is complex and most often starts with someone presenting to their GP with signs or symptoms they're not sure about. This fascinating study builds our understanding of what's happening at a



very personal level, at what can be an anxious and difficult time for patients. Having this insight across different countries and cultures helps build a clear picture of what's most important about the conversation between the doctor and patient, and could well improve cancer outcomes. GPs across the UK may need more support to help them make the most of these critical consultations in the little time available. Charities such as Cancer Research UK can provide information to patients at this point in the diagnostic process."

**More information:** John MacArtney et al. Patients' initial steps to cancer diagnosis in Denmark, England and Sweden: what can a qualitative, cross-country comparison of narrative interviews tell us about potentially modifiable factors?, *BMJ Open* (2017). DOI: 10.1136/bmjopen-2017-018210

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