

Emergency hospital visits more common among most deprived bowel cancer patients

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Bowel cancer patients living in the most deprived areas have up to 13% higher proportions of emergency hospital admissions before a diagnosis than patients living in the least deprived areas, according to a study funded by Cancer Research UK.

The researchers, based at the London School of Hygiene & Tropical Medicine and at UCL, analysed hospital admissions data for around 65,000 patients diagnosed with bowel cancer between 2011-2013 in the first study of its kind in the UK.

The research, published today in the *British Journal of Cancer*, reveals that among the 8,681 patients who died between three and 12 months after a diagnosis, around two thirds (5,809) had an [emergency](#) hospital visit before dying. This was around 5% higher among those from more deprived backgrounds.

Almost 4 in 10 (24,522) bowel cancer patients in the study overall had at least one emergency hospital visit in the three months before their diagnosis. But nearly half (46%) of the most deprived patients experienced this, compared to a third (33%) of the least deprived.

Dr. Francisco Rubio, a lead author from the London School of Hygiene & Tropical Medicine, said: "We know that cancer patients from poorer areas are more likely to have emergency visits to hospital in the weeks before their diagnosis, but we found that this also happens after diagnosis. The results are puzzling, as treatment and follow-up are not

meant to differ".

"We can't tell why this is happening from our research alone, but this study shows us that there are problems which further research needs to look at to pinpoint answers. It may be that information to help people recognise the signs and symptoms of bowel cancer aren't reaching more deprived groups. After the diagnosis there could be social factors at play, for example a lack of a support network to care for the patients."

Those who were diagnosed through the bowel screening programme had a lower proportion of emergency hospital visits after a diagnosis than those who were diagnosed through other routes.

Sara Hiom, director of early [diagnosis](#) at Cancer Research UK, said: "When symptoms are picked up quickly and [bowel cancer](#) is diagnosed at an early stage, 9 in 10 [patients](#) survive but when it is detected in the late stages, survival falls to 1 in 10.

"Research like this is helping us find out how we can make improvements for people from more deprived groups who most need support. The NHS has been trying to reduce unplanned hospital visits for many years, so this is a challenge that the Department of Health & Social Care needs to factor into their plans if they want to reduce health inequalities and increase the number of free hospital beds. Improved access to, and availability of, GPs could help.

"Bowel cancer is the fourth most common [cancer](#) in the UK but because the symptoms, such as stomach pain, are often shared with problems such as IBS, it can sometimes be hard to spot. That's why it's really important for people to consider taking part in the [bowel](#) screening programme when invited; this can spot the disease before symptoms appear. This study shows that people diagnosed through screening are less likely to have an emergency [hospital](#) visit."

More information: Camille Maringe et al, Persistent inequalities in unplanned hospitalisation among colon cancer patients across critical phases of their care pathway, England, 2011–13, *British Journal of Cancer* (2018). [DOI: 10.1038/s41416-018-0170-2](https://doi.org/10.1038/s41416-018-0170-2)

Provided by Cancer Research UK

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