

Prediagnosis psychiatric care linked to worse cancer mortality

March 13 2019



(HealthDay)—Precancer psychiatric utilization (PU) is associated with

worse cancer-specific mortality (CSM) and all-cause mortality (ACM) among adults with solid organ malignancies, according to a study recently published in the *British Journal of Cancer*.

Zachary Klaassen, M.D., from the University of Toronto, and colleagues included data for 676,125 residents of Ontario diagnosed with one of the top 10 malignancies from 1997 to 2014. The psychiatric utilization gradient (PUG) score was examined in the five years prior to [cancer diagnosis](#) (0: none; 1: outpatient; 2: [emergency department](#); 3: hospital admission). The authors examined the impact of the PUG score on CSM and ACM.

The researchers found that 53.2, 45.0, 1.2, and 0.6 percent of patients had PUG scores of 0, 1, 2, and 3, respectively. An independent correlation was observed for increasing PUG score with worse CSM, with an effect gradient across the intensity of prediagnosis PU versus PUG 0 of 1.05, 1.36, and 1.73 for PUG 1, 2, and 3, respectively. A correlation was also noted for increasing PUG score with worse ACM.

"Patients with intense psychiatric utilization prior to diagnosis are more likely to suffer CSM compared to [patients](#) without psychiatric utilization," the authors write. "The specific factors underlying the observed associations remain to be elucidated."

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

Copyright © 2019 [HealthDay](#). All rights reserved.

Citation: Prediagnosis psychiatric care linked to worse cancer mortality (2019, March 13) retrieved 11 May 2024 from <https://medicalxpress.com/news/2019-03-prediagnosis-psychiatric-linked-worse-cancer.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.