

Early GP referrals are leading to cancer patients surviving longer

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Early GP referrals are likely to lead to cancer patients surviving longer, a study by King's College London and funded by the National Institute for Health Research (NIHR) has found.

The analysis of 1.4 million [cancer patients](#) in England published today in the *British Journal of General Practice*, led by King's College London and Public Health England (PHE), found that [cancer](#) patients from the highest referring GP practices had a lower mortality rate. Cancer patients from these same practices were also more likely to be diagnosed at an earlier stage for breast, lung and [prostate cancer](#).

Dr. Thomas Round, from King's College London and PHE said: "As a GP, considering a [cancer diagnosis](#) is not easy. A typical full time GP would have 8-9 new cancer cases per year but sees many patients who have symptoms which could be due to cancer. The urgent referral, or two-week wait pathway, is very helpful for both patients, with potentially worrying symptoms, and their GPs who can fast track them to have a specialist review or tests. This research shows that GPs are referring substantially more patients with suspected cancer, which is making a real impact in improving cancer outcomes in the NHS."

1 in 2 of us will be diagnosed with cancer in our lifetimes, with over 360,000 new cases and 165,000 cancer deaths per year in the UK. However similar countries have better cancer survival rates, with potentially 5,000-10,000 avoidable cancer deaths per year in the UK if our survival rates matched those in other countries. Early diagnosis is a key component to increasing cancer survival rates.

If a GP suspects a patient has cancer, they can fast-track refer them to be seen by a specialist or have a specialist test within two weeks. Urgent referrals have increased to more than 2 million per year in England, with an average GP making 50-60 referrals per year.

The research, which looked at cases of breast, lung, prostate and [colorectal cancers](#) using data from the National Cancer Registry, supports the increases seen in primary care referrals and access to diagnostic tests, which allows more cancers to be diagnosed. This has

also led to the number of people diagnosed with cancer following an A&E presentation, who are more likely to have worse outcomes, to drop from 1 in 4 to less than 1 in 5.

Dr. Round said: "Clearly the current COVID19 situation is putting a significant strain on [health services](#), including for potentially serious conditions, such as suspected cancer referrals and cancer treatment once diagnosed. This is clearly a worrying time for patients and NHS staff. We have some reports of patients delaying seeking help because they think their GP practice or A&E departments are closed. This is not the case, with GP practices adapting with use of telephone, video and online appointments. It is important if patients are experiencing worrying symptoms to contact their GP practice. Whilst the assessments may be different, and NHS capacity is stretched, we are still trying to facilitate urgent two week wait referrals in collaboration with our hospital colleagues. With approximately 450 cancer deaths per day in the UK it's important that we continue urgent referrals, diagnosis and treatment for cancer patients."

This work is in collaboration with PHE's National Cancer Registration and Analysis Service (NCRAS) and uses data that has been provided by patients and collected by the NHS as part of their care and support. The data is collated, maintained and quality assured by the National Cancer Registration and Analysis Service, which is part of Public Health England (PHE).

Provided by King's College London

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