

# Cross-sectional study using primary care & cancer registration data to investigate patients with cancer presenting with non-specific symptoms

Clare Pearson et al.  
BMJ Open



## Background

'Patients presenting to primary care with site-specific alarm symptoms can be referred onto urgent suspected cancer pathways, whereas those with non-specific symptoms currently have no dedicated referral routes leading to delays in cancer diagnosis and poorer outcomes. Pilot Multidisciplinary Diagnostic Centres (MDCs) provide a referral route for such patients in England.' 'This work aimed to use linked primary care and cancer registration data to describe diagnostic pathways for patients similar to those being referred into MDCs and compare them to patients presenting with more specific symptoms.'



## Methods

'Patient symptoms recorded in the (English) NCDA were used to allocate patients to one of two groups – those presenting with symptoms mirroring referral criteria of MDCs (non-specific but concerning symptoms (NSCS)) and those with at least one site-specific alarm symptom (non-NSCS).' These groups were then compared.



## Results

- Patients with non-specific but concerning symptoms (NSCS):
  - Were more likely to be diagnosed at later stage
    - 32% stage 4, compared with 21% in non-NSCS
  - Were more likely to be diagnosed via an emergency presentation
    - 34% vs 16% in non-NSCS
  - Had more multiple pre-referral general practitioner consultations
    - 59% vs 43% in non-NSCS
  - Had more primary care-led diagnostics
    - Blood tests: 57% vs 35% in non-NSCS
  - Had higher odds of having longer Primary Care Intervals
    - Adjusted OR: 1.24



## Conclusions

'Differences in the diagnostic pathway show that patients with symptoms mirroring the MDC referral criteria could benefit from a new referral pathway.'

Full reference: Pearson C, Poirier V, Fitzgerald K, Rubin G, Hamilton W. Cross-sectional study using primary care and cancer registration data to investigate patients with cancer presenting with non-specific symptoms. *BMJ Open*. 2020;10(1):e033008

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6955554/>

This National Cancer Diagnosis Audit is operationally managed by Cancer Research UK, but is a broad partnership that involves support and input from: The Royal College of General Practitioners, Macmillan Cancer Support, the National Cancer Registration and Analysis Service, NHS England, Public Health Scotland, Scottish government, Public Health Wales (specifically the Welsh Cancer Intelligence and Surveillance Unit), the Wales Cancer Network, the Northern Ireland Cancer Registry (at Queen's University Belfast), as well as patient representatives and academic partners.



[cruk.org/ncda](http://cruk.org/ncda)  
Together we will beat cancer