

# The frequency, nature and impact of GP-assessed avoidable delays in a population-based cohort of cancer patients

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## Background

'There is a growing emphasis on the speed of diagnosis as an aspect of cancer prognosis. Whether and how often prolonged diagnostic intervals can be considered avoidable is unknown'



## Methods

Research used data from the English National Cancer Diagnosis Audit (17,042 patients diagnosed with cancer in 2014) to analyse variation in the frequency and nature of avoidable delays among 14,529 patients.



## Results

- 24% of patients identified to have had an avoidable delay to their diagnosis.
- These patients had a longer median diagnostic interval of 92 days
  - Patients without a reported delay - 30 days
- Of all avoidable delays
  - 13% deemed to be pre-consultation
  - 49% within primary care
  - 38% within secondary care.
- 25% of avoidable delays attributed to the test request/performance phase.
- Multimorbidity identified as having greater odds of avoidable delay
  - Odds ratio for 3+ vs no comorbidity: 1.43



## Conclusions

'The causes of avoidable diagnostic delays are multi-factorial and occur in different settings and phases of the diagnostic process. Their analysis can guide improvement initiatives and enable the examination of any prognostic implications.'

Full reference: Swann R, Lyratzopoulos G, Rubin G, Pickworth E, McPhail S. The frequency, nature and impact of GP-assessed avoidable delays in a population-based cohort of cancer patients.

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