

A review of colorectal and breast cancer referral patterns and outcomes in a district general hospital. Does an established Screening programme for cancer have an impact on referral patterns and outcomes?

Authors: M. Kumari², P. Somaiya¹, D. Corry¹, K. Thakur¹

Institution: 1. Department of Surgery, Queen Elizabeth Hospitals NHS Trust 2. Cancer Services, Queen Elizabeth Hospital NHS Trust.

Aims: The delivery of cancer services based on outcomes is a challenge for the UK and the world. Current NHS policy relies on cancer waiting time targets as performance indicators. Breast cancer has a well-developed screening programme while there was none for colorectal cancer during the period of this study. In this study patterns of referral of two types of cancers, have been reviewed and evaluated for difference in outcomes.

Methods: Data was collected from the existing cancer database [(Infoflex) provided by CIMS (Chameleon Information Management System Ltd)] at Queen Elizabeth Hospital, Woolwich. These patients were referred and/or treated for breast and colorectal cancer between January 2002 and December 2006. Data was collected for patients diagnosed by both 2week wait (2WW) and non-two week wait (Non-2WW) routes.

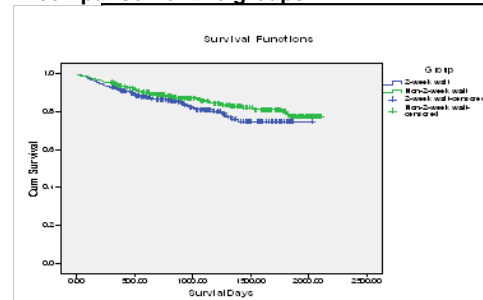
Results:

- A total of 1238 diagnoses of breast and colo-rectal cancer were made out of which Non-2WW referral-routes contributed to 56% of breast cancers and 71% of colorectal cancers.
- 30% of the patients diagnosed with colorectal cancer came via A&E route while only 6% of breast cancer patients had to take this route.
- Kaplan-Meier comparison shows survival to be similar in both groups for breast cancer(2WW&Non-2WW) at approximately 83%.
- There was a significant difference in survival for patients with colorectal cancer referred via the 2WW route(71%) compared to those referred via Non-2WW(55%) [p value= 0.005].

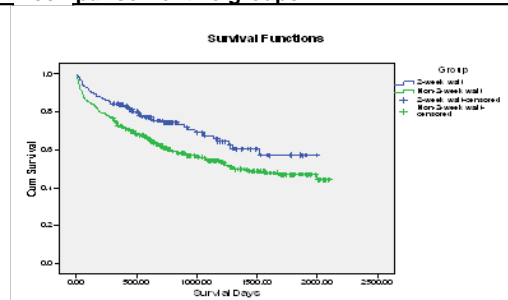
Number of two-week wait (TWW) and non two-week wait (Non TWW) cancer patients between 2002 and 2006

Category	Breast		Colorectal		Total	
	No	%	No	%	NO	%
TWW	273	44%	178	29%	451	36%
Non TWW	352	56%	435	71%	787	64%
Total	625	100%	613	100%	1238	100%

Breast cancer survival - Kaplan-Meier comparison of two groups



Colorectal cancer survival - Kaplan-Meier comparison of two groups



Conclusions:

In the absence of a well-developed screening programme, colo-rectal cancer patients diagnosed via the 2WW route have a significant survival advantage. In contrast, a well-developed screening programme like that for breast cancer has a significant impact on the outcome leading to an equally good survival for those coming via the Non-2WW route.