
GPs Should Not Avoid Overt Patient Dialogue When Making Cancer Referrals



A UK-based study funded by the National Institute for Health Research (NIHR) reveals that general practice physicians whose patients exhibit symptoms of cancer often do not overtly discuss their recommendation for a cancer investigation when referring patients to specialists for follow-up testing. The study, conducted by researchers from the Universities of Bristol, Cambridge, Durham and Exeter, appears in the *British Journal of General Practice*.

"A GP referring a patient with symptoms indicating risk levels around 5 per cent may withhold discussion about cancer because they do not want to raise patient anxiety, and it is known that patients can find being referred for cancer particularly stressful," said Dr. John Banks, who manages the research programme at the University of Bristol's Centre for Academic Primary Care. "However our research has shown that the 'tipping point' for discussing cancer alongside referral for investigation could be set too high. We suggest that the tipping point for discussing the possibility of cancer should be moved to a lower level of risk."

According to referral guidelines established by the National Institute for Health and Care Excellence (NICE), physicians should involve patients in the process of specialist referrals when cancer symptoms are present. Until now, no study has examined the enforcement of those guidelines.

The study showed that patients who were referred for possible lung or colorectal cancer were not always involved in the recommendation to see a specialist for the investigation of whether symptoms were malignant. The challenge is that many signs of cancer are caused by benign illness. However, withholding a full dialogue can cause additional stress for a patient if they learn second-hand that they may be on a cancer-specific pathway.

A patient who first learned about the nature of her referral on a computer screen rather than from her GP remarked, "I was looking at the screen, they don't actually say it, but I was reading on the screen it said 'cancer referral' now nobody had said that to me, and I was looking at it and that made me upset when I saw it on the screen... it was a bit scary and I was already upset, so I got really upset."

The researchers examined transcripts of 34 patient interviews. All patients exhibited a respiratory or gastrointestinal symptom which was associated with lung or colorectal cancer, respectively. They were referred either on a fast-track, two-week wait route to a cancer specialist (per NICE guidelines), or a normal referral to a routine clinic.

The study also highlighted the challenge of matching clinical practice with the goals of recent public awareness campaigns about cancer. Patients who see their GP for nagging ailments are told that conversations about cancer are appropriate, despite the reluctance among GPs to begin those discussions.

Source: Science Daily

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