

Routes to diagnosis – urology workshop

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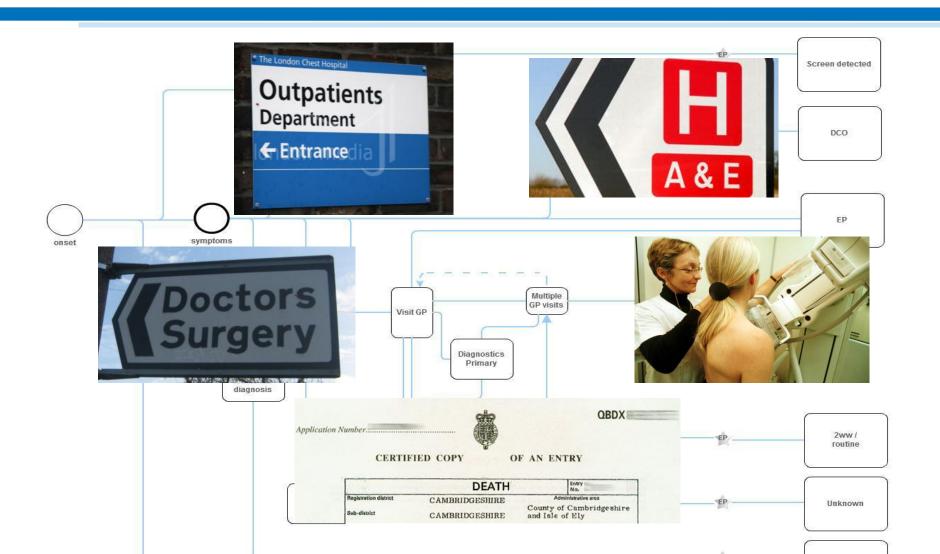
National Cancer Intelligence Network



What is routes to diagnosis (RtD)?



Using information to improve quality & choice



What did we want to achieve?



- 1. Can we use available datasets to define the route to diagnosis for patients?
- 2. If so, how do routes differ by cancer site, age, sex, ethnicity, deprivation or cancer network?
- 3. Can we show how survival rates differ for different routes?

In the beginning...



Pilot in the South West

Expanded to 1st national analyses using 2007 data

Used data from:

- Cancer registries
- Screening programme
- Cancer waiting times
- Not without limitations.

- Inpatient HES
- Outpatient HES

Assigned 8 routes



Screen detected: breast or cervical (In situ neoplasms not included)

Two week wait: urgent GP referrals with a suspicion of cancer

GP/Outpatient referral: includes routine and non-2WW GP referrals

Emergency presentation: emergency route via A&E, emergency GP or consultant outpatient referral, emergency transfer etc

Other outpatient: elective route starting with an outpatient appointment

Inpatient elective: where no earlier information found prior to inpatient visit

DCO: diagnosis by death certificate only

Unknown: no data available from HES, CWT or screening

All cancers combined



Routes to diagnosis (all cancers)

 Screen Detected 	3%
 Two week wait 	25%
 Non- 2WW GP referral 	24%
 Other outpatient 	14%
 Inpatient 	2%
• Emergency	23%
• DCO	1%
 Unknown 	8%

Kidney by route



Kidney	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
Male		20%	29%	19%	2%	23%	1%	7%	100%	3,221
Confidence interval		18% 21%	28% 31%	18% 20%	1% 2%	22% 25%	0% 1%	6% 8%		,
Female		21%	29%	16%	1%	26%	1%	5%	100%	1,951
Confidence interval		20% 23%	27% 31%	15% 18%	1% 1%	24% 28%	1% 2%	5% 7%		
Total		20%	29%	18%	1%	24%	1%	6%	100%	5,172
Confidence interval		19% 21%	28% 30%	17% 19%	1% 2%	23% 25%	1% 1%	6% 7%		•

Kidney by age

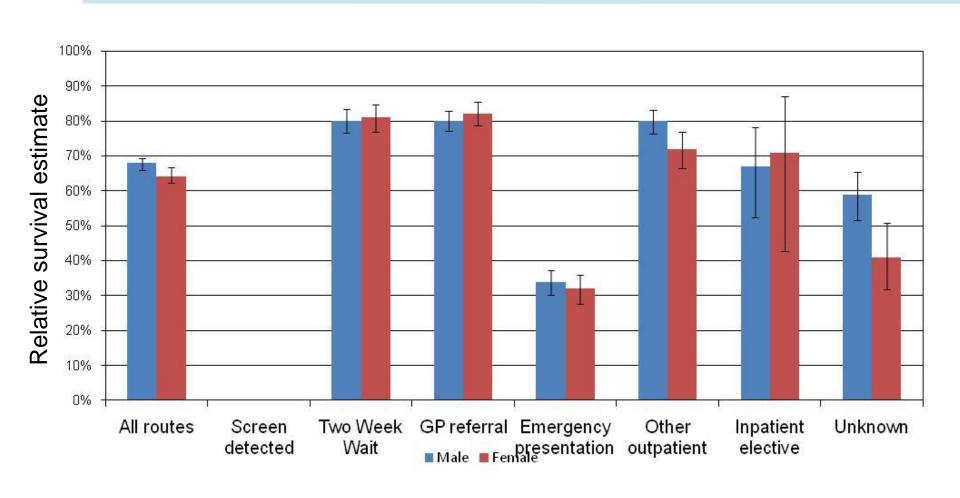


Using information	to	improve	quality & choice	

Kidney	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
0-39		13%	22%	26%	4%	26%	0%	8%	100%	202
Confidence interval		9% 18%	17% 29%	20% 32%	2% 8%	21% 33%	0% 3%	5% 13%		202
40-49		26%	29%	21%	2%	17%	0%	5%	100%	380
Confidence interval		22% 30%	24% 33%	18% 26%	1% 4%	14% 21%	0% 1%	3% 7%		000
50-59		24%	31%	17%	1%	18%	0%	8%	100%	947
Confidence interval		22% 27%	29% 35%	15% 20%	1% 2%	15% 20%	0% 1%	6% 10%		041
60-69		24%	31%	19%	1%	18%	1%	6%	100%	1,335
Confidence interval		22% 27%	29% 34%	17% 21%	1% 2%	16% 21%	0% 1%	5% 7%		.,000
70-79		19%	30%	20%	1%	23%	1%	5%	100%	1,405
Confidence interval		17% 21%	28% 33%	18% 22%	1% 2%	21% 25%	0% 1%	4% 6%		1,400
80+		12%	24%	11%	1%	43%	2%	8%	100%	903
Confidence interval		10% 14%	21% 27%	9% 13%	1% 2%	40% 46%	1% 3%	6% 10%		300
Total		20%	29%	18%	1%	24%	1%	6%	100%	5,172
Confidence interval		19% 21%	28% 30%	17% 19%	1% 2%	23% 25%	1% 1%	6% 7%		

Kidney 1 year relative survival by route





Prostate by route



Prostate	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
Male		20%	38%	16%	3%	9%	0%	14%	100%	28,362
Confidence interval		19% 20%	38% 39%	15% 16%	3% 3%	9% 10%	5 0% 0%	13% 14%		20,002

Prostate by age and SES

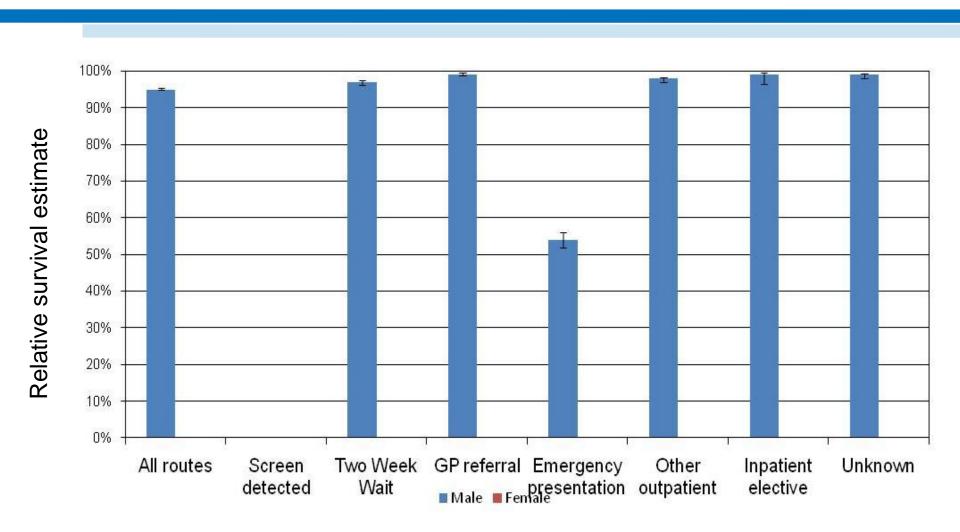


Using information to improve quality & choice

Prostate	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
0-39		0%	40%	40%	0%	20%	0%	0%	100%	5
Confidence interval		0% 43%	12% 77%	12% 77%	0% 43%	4% 62%	0% 43%	0% 43%		
40-49		13%	43%	23%	4%	3%	0%	14%	100%	212
Confidence interval		9% 18%	36% 50%	18% 29%	2% 7%	2% 7%	0% 2%	10% 19%	10070	
50-59		12%	41%	18%	4%	4%	0%	20%	100%	2,933
Confidence interval		11% 14%	39% 43%	17% 19%	4% 5%	3% 5%	0% 0%	19% 22%		2,933
60-69		16%	42%	18%	3%	5%	0%	16%	100%	9,150
Confidence interval		15% 17%	41% 43%	17% 19%	3% 4%	4% 5%	0% 0%	15% 17%	10070	3,100
70-79		23%	39%	15%	2%	8%	0%	12%	100%	10,548
Confidence interval		22% 24%	38% 40%	15% 16%	2% 2%	7% 8%	0% 0%	12% 13%	10070	10,040
80+		24%	30%	11%	2%	23%	1%	9%	100%	5,514
Confidence interval		23% 26%	29% 31%	10% 12%	2% 3%	22% 24%	1% 1%	8% 9%	10070	0,0
Total		20%	38%	16%	3%	9%	0%	14%	100%	28,362
Confidence interval		19% 20%	38% 39%	15% 16%	3% 3%	9% 10%	0% 0%	13% 14%		20,002

Prostate 1-yr survival





Bladder by route



Bladder	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
Male		33%	29%	16%	3%	16%	0%	4%	100%	5,493
Confidence interval		32% 34%	28% 30%	15% 17%	2% 3%	15% 17%	0% 1%	4% 5%		
Female		30%	25%	13%	2%	25%	1%	4%	100%	2,172
Confidence interval		28% 32%	23% 27%	12% 15%	2% 3%	23% 27%	0% 1%	3% 5%		
Total		32%	28%	15%	2%	18%	0%	4%	100%	7,665
Confidence interval		31% 33%	27% 29%	14% 16%	2% 3%	18% 19%	0% 1%	4% 5%		_ ,

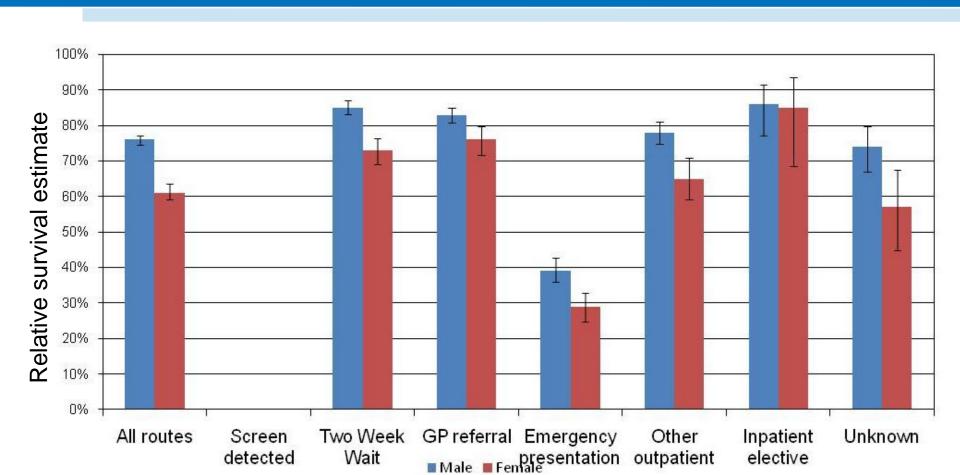
Bladder by age



Bladder	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
0-39		19%	19%	27%	3%	19%	0%	14%	100%	37
Confidence interval		10% 34%	10% 34%	15% 43%	1% 14%	10% 34%	0% 9%	6% 28%		
40-49		31%	29%	17%	1%	16%	1%	6%	100%	143
Confidence interval		24% 39%	22% 37%	12% 24%	0% 4%	11% 23%	0% 4%	3% 12%		170
50-59		36%	29%	16%	3%	10%	0%	6%	100%	598
Confidence interval		32% 40%	25% 33%	14% 19%	2% 5%	8% 13%	0% 1%	4% 8%		330
60-69		35%	30%	15%	3%	13%	0%	4%	100%	1,660
Confidence interval		32% 37%	28% 32%	13% 17%	2% 4%	12% 15%	0% 0%	4% 5%		1,000
70-79		33%	31%	16%	2%	14%	0%	4%	100%	2,520
Confidence interval		31% 35%	29% 32%	15% 18%	2% 3%	13% 16%	0% 1%	3% 5%		2,320
80+		29%	24%	13%	2%	27%	1%	4%	100%	2,707
Confidence interval		27% 30%	23% 26%	12% 15%	2% 3%	26% 29%	1% 1%	3% 4%		2,101
Total		32%	28%	15%	2%	18%	0%	4%	100%	7,665
Confidence interval		31% 33%	27% 29%	14% 16%	2% 3%	18% 19%	0% 1%	4% 5%		1,000

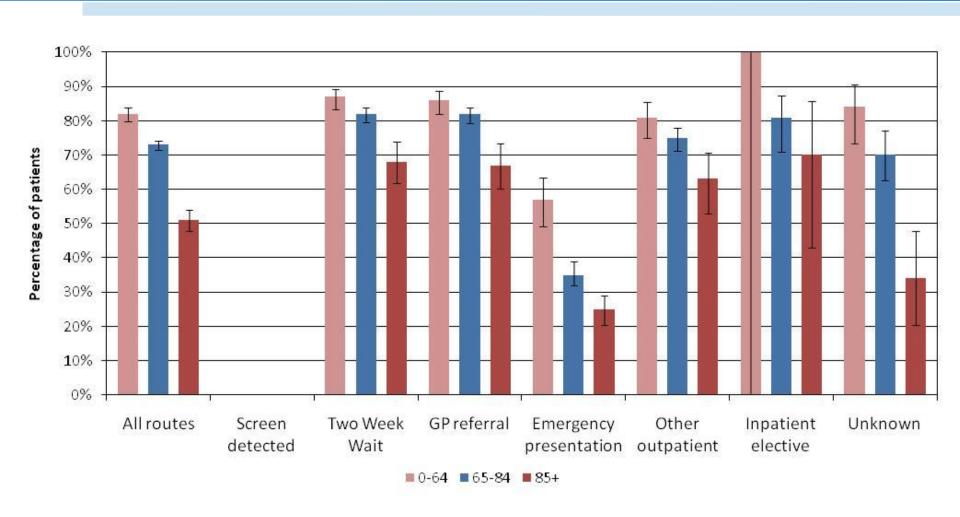
Bladder Survival





Survival by age





Results by network



Using int	formation	to imp	prove q	wality &	& choice
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Bladder	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
3 Counties		25%	32%	15%	2%	19%	1%	5%	100%	154
Confidence interval		19% 33%	26% 40%	10% 21%	1% 6%	14% 26%	0% 4%	3% 10%		134
Anglia		40%	25%	15%	1%	17%	0%	2%	100%	436
Confidence interval		35% 45%	21% 30%	12% 18%	1% 3%	14% 21%	0% 1%	1% 4%	10076	430
Arden		30%	25%	27%	1%	15%	0%	2%	100%	149
Confidence interval		23% 37%	19% 32%	20% 35%	0% 5%	11% 22%	0% 3%	1% 6%	10076	143
Avon, Somerset & Wiltshire		40%	26%	14%	2%	15%	1%	4%	100%	333
Confidence interval		35% 45%	21% 31%	11% 18%	1% 4%	12% 19%	0% 2%	2% 6%	10076	333
Central South Coast		29%	32%	13%	2%	20%	1%	4%	100%	284
Confidence interval		24% 34%	27% 38%	10% 17%	1% 4%	16% 25%	0% 3%	2% 7%		204
Dorset		43%	13%	20%	8%	13%	1%	3%	100%	160
Confidence interval		35% 50%	9% 19%	15% 27%	4% 13%	9% 19%	0% 4%	1% 7%	10076	100
East Midlands		37%	26%	14%	2%	18%	0%	3%	100%	624
Confidence interval		34% 41%	23% 30%	11% 17%	1% 3%	15% 21%	0% 1%	2% 5%	10070	027
Essex		27%	32%	15%	1%	22%	0%	3%	100%	206
Confidence interval		21% 33%	26% 38%	11% 21%	1% 4%	17% 29%	0% 2%	1% 6%		

Results for each network



Using information to improve quality & choice

North Trent	Screen detected	Two Week Wait	GP referral	Other outpatient	Inpatient elective	Emergency presentation	Death Certificate Only	Unknown	Total	Number of patients
All cancers	5%	26%	27%	10%	1%	27%	0%	5%	100%	8,823
Confidence interval	4% 5%	25% 27%	26% 28%	9% 11%	1% 2%	26% 28%	0% 1%	4% 5%	10070	0,020
Acute leukaemia		6%	10%	14%	1%	65%	0%	3%	100%	98
Confidence interval		3% 13%	6% 18%	9%23%	0% 6%	56% 74%	0% 4%	1% 9%	<u>%</u>	
Bladder		39%	26%	12%	2%	19%	0%	2%	100%	318
Confidence interval		34% 44%	21% 31%	9% 16%	1% 5%	16%24%	0% 1%	1% 4%	10070	010
Brain & CNS		1%	20%	8%	1%	65%	0%	5%	100%	175
Confidence interval		0% 4%	15% 27%	5% 13%	0% 4%	57% 71%	0% 2%	3% 10%	10070	
Cervix	21%	20%	23%	10%	0%	20%	0%	6%	100%	96
Confidence interval	14% 30%	13% 29%	16% 32%	6% 18%	0% 4%	13% 29%	0% 4%	3% 13%	10070	
Chronic leukaemia		15%	25%	12%	3%	31%	0%	15%	100%	110
Confidence interval		9% 22%	18% 34%	7% 19%	1% 8%	23% 40%	0% 3%	9% 22%	10070	110
Colorectal		31%	28%	9%	2%	26%	0%	4%	100%	1,020
Confidence interval		29% 34%	25% 30%	7% 11%	1% 3%	24% 29%	0% 1%	3% 5%	. 00 /0	
Kidney		16%	35%	14%	1%	30%	0%	4%	100%	237
Confidence interval		12% 21%	29% 41%	11% 19%	0% 3%	25% 36%	0% 2%	2% 7%		

What did we achieve?



2007 analyses produced:

- Percentage of patients by route for 21 cancer sites/groups
- Percentages by sex, age, deprivation quintile, cancer network
- 1-yr relative survival estimates by route and sex, age, deprivation quintile

Why are there differences with CN data?



Kidney	RtD 2007	CWT on NCDR	NCDR only
DCO	1%	0%	2%
Emergency presentation	24%	17%	37%
GP referral	29%	32%	27%
Inpatient elective	1%	1%	2%
Other outpatient	18%	19%	17%
2WW	20%	28%	0%
Unknown	6%	2%	15%
Proportion of patients		69%	31%

Why are there differences with CN data?



Prostate	RtD 2007	CWT on NCDR	NCDR only
DCO	0%	0%	1%
Emergency presentation	9%	6%	17%
GP referral	38%	40%	35%
Inpatient elective	3%	2%	4%
Other outpatient	16%	15%	17%
2WW	20%	27 %	0%
Unknown	14%	9%	26%
Proportion of patients		74%	26%

Why are there differences with CN data?



Bladder	RtD 2007	CWT on NCDR	NCDR only
DCO	0%	0%	2%
Emergency presentation	18%	14%	32%
GP referral	28%	27%	32%
Inpatient elective	2%	2%	3%
Other outpatient	15%	14%	18%
2WW	32%	42%	0%
Unknown	4%	1%	13%
Proportion of patients		77%	23%

All cancers



All cancers	RtD 2007	CWT on NCDR	NCDR only
DCO	1%	0%	2%
Emergency presentation	23%	16%	37%
GP referral	24%	24%	26%
Inpatient elective	2%	2%	2%
Other outpatient	14%	14%	14%
Screening	3%	4%	1%
2WW	25%	35%	1%*
Unknown	8%	5%	17%
Proportion of patients		72%	28%

So what next?



We are now:

- Expanding 2007 work to cover the three year period 2006-2008
- Ensuring all results will be publicly available
- Making slight changes to methodology based on feedback and further analyses
- Looking specifically at emergency presentations with the department of health
- Allowing results to be used for further analyses



With many thanks to Lucy Elliss-Brookes and to Alex Ives, Matt Greenslade and others at SWPHO