

Delay in the diagnosis of cancer

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The PhD dissertation was accepted by the Faculty of Health Sciences of the University of Aarhus, and defended on January 25, 2008.

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Dan Med Bull 2008;55:86

ABSTRACT

The PhD dissertation is based on the project Cancer in general practice conducted in a 1-year period from 2004 to 2005 in the County of Aarhus, Denmark. All newly diagnosed cancer patients and their general practitioners (GPs) were included. Data were collected as questionnaire data from patients as well as GPs.

The length of patient, doctor and system delay was measured for all cancer types. We found a median total delay of 98 days. Most of the total delay was caused by system delay (median 55 days) and patient delay (median 21 days), while the median doctor delay was zero days. For all delay components, long delays were experienced by the fourth quartile of patients. We found considerable variation in delay by cancer type.

The project analysed the associations between patient characteristics and delay and hypothesized the existence of social inequalities in the distribution of delay as, in particular, economically privileged female patients had shorter doctor and system delay than male patients.

Male patients experienced longer doctor delay than female patients while, surprisingly, no gender differences were found with respect to patient delay.

Furthermore, we analysed the associations between delay and specific GP and practice characteristics and found that patients attending female GPs had shorter patient delay than patients attending male GPs while no associations were found between delay and GP age, practice organisation, participation in continuing medical education or job satisfaction.