

Organizational factors delaying cancer diagnosis: general practitioners' perspectives

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Background

- 22% of new cancer cases are diagnosed at an advanced stage (SEER Registry)
- Possible risk factors:
 - Patients
 - Healthcare system → primary care

Objective

To identify general practitioners' perceptions of key organizational factors that might delay cancer diagnoses

Methods

- Exploratory study
- Semi-structured interviews with 15 general practitioners
- Interview guide covers organizational factors that impede or facilitate key steps on the cancer diagnosis journey

Results

Respondents' characteristics

- Age: 48 years (range: 29-61)
- Males: 53%
- Years of practice: 22 (range: 3-30)
- Practice setting:
 - Private Clinic: 26%
 - Community Health Center: 26%
 - Family Medicine Group: 33%
 - Family Medicine Unit: 13%

Screening

- « *No doctor, no screening* »
- Factors influencing use of tests
 - Ambiguous guidelines
 - Physician training
 - Limited confidence in the tests
 - Delays in access to testing

Consultation with a physician

- « *Most often, you find the advanced cancers when you do walk-in clinics* »
- Facilitating factors
 - Being a known patient
 - Pressures exerted by patients
 - Training of secretaries
 - Offering a mix of consultation options (e.g. walk-in, appointments)

Access to tests and specialists

- Impeding factors
 - Limited availability of diagnostic services in hospitals
 - Costs of tests in the private system
 - Delays in transmitting requests and test results

Access to tests and specialists

■ Facilitating factors

- Formal corridors of access to tests and specialists
- Socio-professional network
- « *If the physician isn't known to the radiologist, he'll be told to send his patient to the ER* »
- Relationships of trust
- Clinic's affiliation with a hospital

Conclusion

- Having a family physician is an important factor
- Primary care models appear better equipped for timely diagnosis of cancer
- Further research is needed...



■ **Thanks for your attention!**