

Cancer risk assessment tools for symptomatic individuals presenting to primary care: a systematic scoping review

Cancer Research UK (CRUK) 5th Biennial Early Diagnosis Research Conference, The Hilton Birmingham Metropole, 11-13th February 2019

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Background

- Cancer risk assessment tools designed to predict cancer risk in symptomatic individuals in primary care settings are being advocated to address the problem of late diagnosis of cancer in the UK
- Little is known about the use and implementation of cancer risk assessment tools to aid early detection of cancer risk in general practice
- We aimed to scope the evidence on the type of cancer risk assessment tools available for symptomatic individuals, and the current use of the tools including the benefits and barriers to their use.



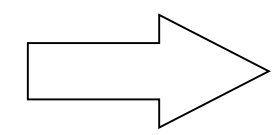
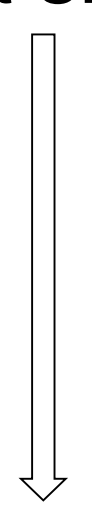
Methods

- Using Arksey and O'Malley's framework, we conducted a systematic scoping review of published literature in the English language from 2004 to 2017
- We searched six electronic databases (Medline, CINAHL, Scopus, Cochrane, Science Direct and Psych-INFO) and other sources using specific search terms e.g Cancer risk assess* tool* AND use or implement* AND symptom* or patient* AND clinician* or general Pract* or primary care or family practice) AND benefit or impact*
- A narrative synthesis was used to summarise the findings from the studies identified.

Results

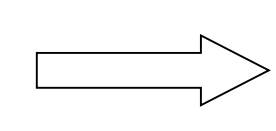
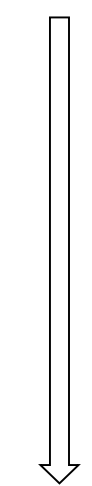
- We retrieved a total of 471 papers from the electronic databases and 43 studies matched the inclusion criteria following a title, abstract and full-text screen by three reviewers – one checking where there was disagreement (see flow chart below)

Title & abstract sift of 471 studies



415 studies filtered out after title & abstract sift

56 studies full text studies retrieved and sifted



13 studies excluded after filtering out duplicates

43 studies selected for the review

- Novel cancer risk assessment tools for symptomatic individuals in primary care identified from the review included the QCancer and RAT series
- While there was some evidence supporting use of some of the tools, there was limited evidence on the current use and the impact of using the tools on patient outcomes such as rates of cancer diagnosis and survival
- There was also some evidence on potential benefits and barriers to using the tools in primary care consultations (see Table below).

Benefits and barriers to implementing cancer risk assessment tools

Benefits

- Potential aid for clinicians to confirm investigations and referral decisions
- Reassurance of patients when investigation not needed
- Helping GPs to recognise symptoms of some cancers
- Useful for detecting cancer risk in patients with complex histories.

Barriers

- How to make the tools available to clinicians
- How best to communicate cancer risk information to patients
- Uncertainty about the threshold for action to be taken
- Extra consultation time requirement
- Potential for causing alarm to patients
- Potential burden on resources
- Challenge about integrating the tools into general practice workflow
- Potential for 'prompt fatigue'.

Conclusions

- The review revealed evidence of novel cancer risk assessment tools designed for symptomatic individuals in primary care
- There was also evidence on potential benefits and barriers relating to the use of the tools
- There is a need to address the barriers identified when implementing the tools in general consultations.