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KEY INTERVALS IN THE PATIENT JOURNEY OF MEN WITH PROSTATE CANCER: EVIDENCE FROM GREECE

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Objective / Aims

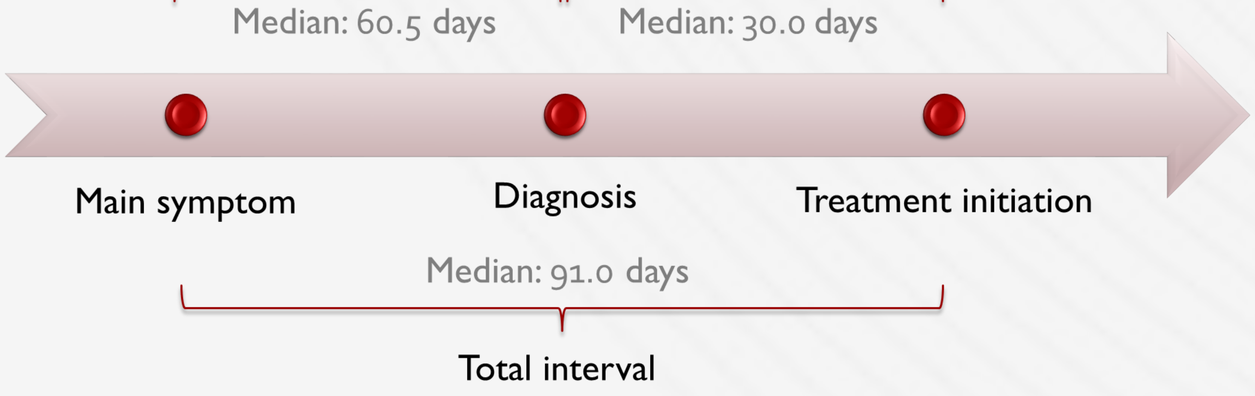
Assessment of time intervals in cancer diagnostic pathways constitute a key-input in cancer policy-making. The objective of this analysis was to assess time intervals from prostate cancer symptom recognition until treatment initiation, as well as patients' perceptions on delays in diagnosis in Greece.

Methods

A telephone survey, conducted from December 2018 to February 2019 with the use of a structured questionnaire, provided the primary data for the analysis. The survey tool was developed on the basis of the results of the preceding qualitative research. [1] Participants comprised a sample of patients with a diagnosis of localized prostate cancer after 2015, who had completed treatment. Participants were recruited through public and private hospital urology clinics and practices in Attica, Greece. We calculated the time-to-diagnosis (days from detecting an abnormal finding or a bodily change until diagnosis), time-to-treatment (days from diagnosis until treatment initiation) and total interval.

Results

Fig 1: *Time intervals in prostate cancer*



In total, 67 patients participated in the survey. For the majority of patients (71.6%), seeking consultation was initiated by a symptom whereas for the 28.4% by an abnormal finding in their screening tests. Median time-to-diagnosis was 60.5 days (mean=163.00, S.D.=356.811), while median time-to-treatment was 30.0 days (mean=143.51, S.D.=184.851). The median total interval was 91.0 days (mean=211.40, S.D.=380.160). Concerning participants' perceptions on delays in diagnosis and treatment, 41.0% replied that they could have received medical care earlier. Of those, 62.5% placed the delay primarily during the patient interval, 29.2% during the diagnosis interval and 8.3% during the treatment interval. The main reasons for those delays (multiple choice) were: not evaluating the symptoms as critical (52.0%), not being consistent with their check-up (32.0%) and physician(s) not understanding the problem (16.0%).

Table 1: *Patients' perceptions on delays*

Perceptions on the overall journey		
	n	**%**
I received timely medical care	36	59.0
I could have received medical care a little earlier	16	26.2
I could have received medical care a lot earlier	9	14.8
Total	*61*	*100.0*
At which interval would you attribute the longer delay?		
	n	**%**
Patient interval	15	62.5
Diagnostic interval	7	29.2
Treatment interval	2	8.3
Total	*24*	*100*
In your opinion, which are the reasons for these delays? (multiple choice)		
	n	**%**
I didn't consult the appropriate physician	2	8.0
I did not evaluate the symptoms as critical	13	52.0
I didn't get examined regularly	8	32.0
The physician(s) I consulted did not understand the problem	4	16.0
The physician(s) I consulted did not take the right decisions concerning my treatment	3	12.0
I received the results of histologic examination with a delay	2	8.0

Conclusions

This is the first study on the journey of patients with prostate cancer in Greece. Further investigation on the determinants of patient, diagnostic and treatment intervals is essential for the formulation of health policies that aim at early diagnosis and management of prostate cancer in Greece.

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References:

[1] Tsiantou V, Karampli E, Magoulas C, Maina A, Maina A, Naoum V, Delakas DS, Ntoumas K, Athanasakis K, Theodorou C, Kyriopoulos J. The Patient Journey of men with localised Prostate Cancer: Results from a qualitative study in Greece. Abstract no PCN294, Value Health 21(3): p. S64.