

**Background:** In recent years around 1,800 people are diagnosed with lung cancer annually – approximately 1,100 men and 700 women. Incidence rates are decreasing for men but increasing for women. Less than 1% of all new cases occur before the age of 40. More than 90% of patients are symptomatic at presentation. Currently over a third of patients have distant metastases by the time of diagnosis.

**Risk Factors:** Smoking, including passive smoking and smoking marijuana; radon exposure; exposure to heavy metals such as arsenic; radiation; asbestos dust; previous history of cancer (e.g. head & neck cancer). Smoking avoidance/ cessation is the most important preventive strategy as over 90% of lung cancer can be attributed to cigarette smoke. However lung cancer can occur in patients without any of the listed risk factors.

## ABOUT RAPID ACCESS SERVICES FOR LUNG CANCER

Rapid Access Services provide initial investigations, such as CT and bronchoscopy, to patients with suspected lung cancer, usually within one or two hospital visits. This reduces multiple hospital visits and patient anxiety and shortens the time period to diagnosis.

Patients should be assessed in the lung cancer rapid access service by a respiratory physician within **2 weeks** of receipt of request.

### Who can refer your patient to the rapid access service?

- you, the GP
- a radiologist (in conjunction with GP)
- another hospital based clinician, e.g. from the Emergency Department

### Who should you refer to the Rapid Access Service?

- a patient whose **chest x-ray is suspicious of lung cancer**.  
Please include details on the referral of the hospital in which the investigation was carried out. If this was a different hospital/ clinic, please fax or post a copy of the result to the clinic and request a copy of the film for the patient to bring with them if possible.
- a patient who has **haemoptysis**, or other symptoms which are concerning or persistent, even if their chest x-ray is normal.

### When is referral to the rapid access service not appropriate?

If a patient presents with life threatening symptoms, an emergency referral should be made in the usual manner.

## Table 1: Indications for Urgent Chest X-ray<sup>1</sup>

A patient with the following signs or symptoms should be referred for urgent chest x-ray. A report should be back to the GP within one week of request.

### Symptoms

- Haemoptysis
- New onset unexplained or persistent cough (>3 weeks)
- Alteration in character/severity of chronic cough
- Unexplained chest pain or dyspnoea
- Unexplained weight loss/cachexia
- Unexplained bone pain/neurological symptoms

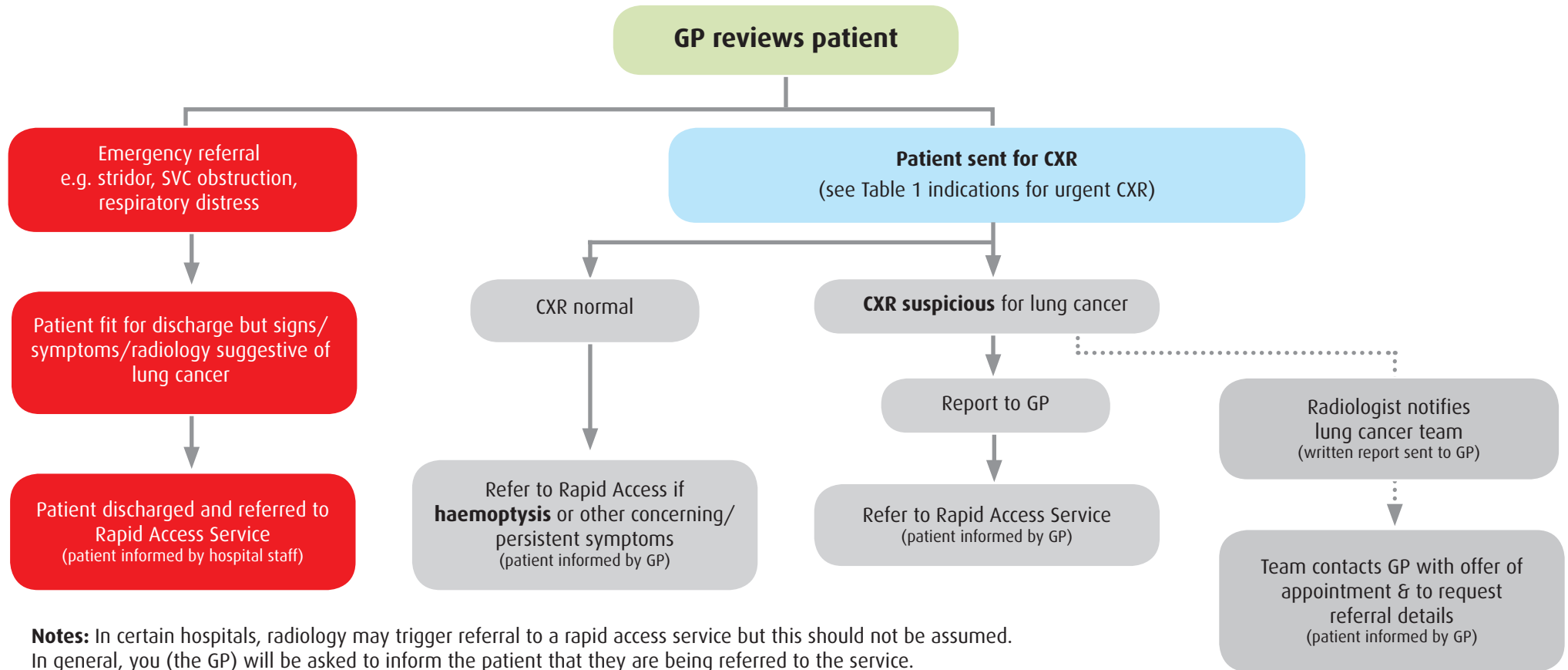
### Signs

- Clubbing
- Lymphadenopathy
- Focal chest signs
- Hepatomegaly

**Note: if there is a suspicion of lung cancer, it is not advisable to delay referral by ordering an outpatient CT. A rapid access service can arrange both imaging and bronchoscopy.**

1. Irish Thoracic Society Lung Cancer Sub-committee. Guidelines for the diagnosis and treatment of Lung Cancer. 3rd ed. Irish Thoracic Society 2009.

# REFERRAL PATHWAY



**Notes:** In certain hospitals, radiology may trigger referral to a rapid access service but this should not be assumed. In general, you (the GP) will be asked to inform the patient that they are being referred to the service.

## GENERAL RECOMMENDATIONS

A patient who presents with symptoms suggestive of lung cancer should be referred to a team specialising in the management of lung cancer. To make a referral, send (preferably FAX) a **National Lung Cancer Rapid Access Service Referral Form** or submit an electronic referral form via Healthlink ([www.healthlink.ie](http://www.healthlink.ie)). **Electronic referral systems are currently under development.** Additional referral forms can be obtained by phoning the National Cancer Control Programme at (01) 8287100 or logging onto **[www.cancercontrol.hse.ie](http://www.cancercontrol.hse.ie)**

**GPs should refer any patient they consider to have a high likelihood of lung cancer.**

## LUNG CANCER RAPID ACCESS SERVICES

Beaumont Hospital, PO Box 1297, D 9	Tel: (01) 8092544	Fax: (01) 7974780
Cork University Hospital, Wilton, Cork	Tel: (021) 4920189	Fax: (021) 4922391
Galway University Hospitals, Galway	To open in mid 2010	
Mater University Hospital, D7	Tel: (01) 8032644/8032295	Fax: (01) 8034036
Mid Western Regional Hospital, Dooradoyle, Limerick	To open in mid 2010	
St. James's Hospital, D 8	Tel: (01) 41 62196	Fax: (01) 4103549
St. Vincent's University Hospital, D 4	Tel: (01) 221 3702	Fax: (01) 221 3576
Waterford Regional Hospital, Dunmore Road, Waterford	Tel: (051) 848988	Fax: (051) 848844