

Cancer Updates for GPs – 16th September 2020

As with many areas of the NHS, cancer services have been significantly impacted by COVID-19. Referral pathways, diagnostics and treatments have had to change in order to protect patients and prioritise limited resources.

The situation is evolving and as such, guidance and information may change as needed. Please keep up to date with the latest information by reviewing the https://selondonccg.nhs.uk/covid_19/ website, as well as the contents of this update.

We want to keep you as informed as possible, and hearing from GPs and practice staff telling us what you need to know is key to this. You can contact the SEL Cancer Alliance on: gst.tr-selca@nhs.net

Contents

SUSPECTED CANCER REFERRALS (2WW)	2
UPDATED URGENT SUSPECTED CANCER (2WW) REFERRAL FORMS	2
CHANGES TO SUSPECTED CANCER CHEST X-RAY PATHWAY AT KINGS HOSPITAL (DENMARK HILL SITE)	3
PATIENT INFORMATION	3
SAFETY NETTING	3
GP WEBINARS	4
EARLY DIAGNOSIS PCN DES SPECIFICATION	4
CANCER SCREENING SERVICES	4
PATIENT SUPPORT & WELLBEING	5
YOUR GP CANCER LEADS	5

SUSPECTED CANCER REFERRALS (2WW)

There have been a number of changes to the referral pathways for certain cancers in response to COVID-19, summarized [here](#) and below:

LOWER GI CANCER – GP information on use of FIT for USC/2WW referrals	
ALL suspected cancer referrals must include a FIT test result, EXCEPT where the patient presents with a rectal or anal mass, or anal ulceration, who can be referred regardless of FIT.	
If FIT +ve ≥10µg/g:	Refer on 2WW Pathway, with FIT result and full clinical details.
If FIT –ve <10µg/g:	<p><0.4% chance of bowel cancer, Consider one of the following:</p> <p>1) Safety netting and review at 4-6 weeks to consider need for referral; 2) Consider an alternative suspected cancer pathway that may be more appropriate for the patients symptoms e.g. upper GI, urological, gynaecological or to Rapid Diagnostic Centre (RDC); 3) Seeking advice from a specialist via Advice & Guidance, Consultant Connect or a similar service; 4) Refer on LGI 2WW pathway but with <u>FULL</u> clinical information explaining suspicion of LGI cancer.</p> <p>IMPORTANT: The Rapid Diagnostic Centre (RDC) is available for situations where a patient may not meet criteria for a 2WW referral, but GP is still concerned about possible cancer (e.g. FIT<10, no bowel symptoms)</p>
GP FAQs for use of FIT in the Lower GI suspected cancer referral pathway have been produced by NHS England - LINK	
PROSTATE CANCER:	
GPs should undertake PSA testing in symptomatic patients in line with NICE guidelines (new lower urinary tract symptoms, visible haematuria, unexplained non-visible haematuria WITH dysuria or raised WCC on blood test). Those with positive PSA, or negative PSA <u>but</u> abnormal DRE, should be referred as per NICE guidance. If the patient is not suitable for radical treatment (e.g. elderly, frail, >75 years) and has a PSA <20 the likely treatment is likely to be “watchful waiting”. Please see referral advice algorithm .	
LUNG CANCER	
All patients need to have a CXR prior to referral. If this is suspicious of cancer then refer on 2WW pathway as usual. If it is normal but the patient is over 40 with <u>unexplained</u> haemoptysis you should refer. Otherwise if you have ongoing concern then either request advice and guidance or safety net as per the referral advice algorithm .	
ALL OTHER SUSPECTED CANCER REFERRALS	
Please continue to refer as per NG12 criteria. Please be advised that virtual/telephone assessment is being used wherever possible currently, and it is possible waits for certain investigations/assessments may be longer than usual.	
All referrals should still abide by NG12 criteria for suspected cancers. The changes above help identify and prioritise high risk patients given the extremely limited resources in secondary care. <u>Patients with a low risk of cancer will likely experience delays for investigations.</u> Please carefully consider the balance of risk for your patient before making a referral and follow advice on safety netting where appropriate.	

UPDATED URGENT SUSPECTED CANCER (2WW) REFERRAL FORMS

Please be advised that the **Lung, Lower GI and Breast suspected cancer referral forms have been updated** on DXS and are available on the Healthy London Partnership [website](#). The forms have been updated in light of the changes agreed on a Pan-London level during COVID-19 and should be used for all patients when making a suspected Lung, Lower GI or Breast cancer referral. Patient information is also available to support patients referred during the COVID-19 pandemic.

Lung, Lower GI and Breast suspected cancer referral forms have been updated – Please ensure you are using the correct version when making a referral.

CHANGES TO SUSPECTED CANCER CHEST X-RAY PATHWAY AT KINGS HOSPITAL (DENMARK HILL SITE)

The chest X-ray pathway and radiology request form at Kings' Denmark Hill site will change from the 21st September, the changes mean that patients with an abnormal chest X-ray will be referred directly for a CT scan and not referred back to the GP practice. The radiology request form has also been updated and is available via DXS and will be sent to practices by the primary care team.

What does this mean for the referring GP?

When requesting a CXR, check the patient has had their renal function checked within the last 3 months. If not, then **please request** this at the same time to facilitate a contrast CT being performed if necessary.

What should you tell a patient?

If there is a need for further tests after your CXR, you may be contacted by the hospital instead of the GP practice. Please ensure your contact details are correct.

How do you access the new radiology form?

The form is available via DXS, however, if you do not use DXS you should import the EMIS Web form onto your GP IT system which will be sent to practices by the primary care team. Support on how to do this can be provided by your local GP federation.

PATIENT INFORMATION

Endoscopy – A video aimed at patients who are undergoing an endoscopy at this time has been produced by the West London Cancer Alliance and made available Pan-London. Its purpose is to help answer common questions patients might have as well as give more information on what to expect and encourage attendance. This has been hosted on the SEL Cancer Alliance YouTube channel ([link](#)) and provided to Trusts to include in relevant patient communications.

SAFETY NETTING

This is an incredibly difficult time for General Practice with changes in ways of working that may be causing considerable stress.

In order to support out primary care colleagues, the SEL Cancer Alliance has created advice for GPs on the changes to cancer pathways in response to COVID-19 and guidance on safety netting for patients that require tracking or re-referral.

- [SEL Advice to GPs on Cancer Pathway Changes & Safety Netting](#)
- [Algorithm for GPs on Cancer Pathway Changes and Safety Netting during COVID-19](#)
- Please be aware that the SEL [Rapid Diagnosis Service](#) remains open for referrals where cancer is suspected but not fitting a 2WW pathway, as well as being available for advice and guidance.

It is recommended that GPs should review any 2WW referrals made since 01/03/2020 to check the status of the referral.

GP WEBINARS

Changes in Cancer Pathways and Safety-netting

The SEL Cancer Alliance held two 1 hour online webinars to give a summary of the changes made to cancer pathways and services in response to the COVID-19 outbreak, as well as answer questions from GPs. You can view the webinars online here:

- [Lewisham, Greenwich & Bexley – Tuesday 12th May 2020](#)
- [Lambeth, Southwark & Bromley – Wednesday 13th May 2020](#)

We are really keen to host more sessions and would welcome any ideas you had on subjects you would like us to cover – please email gst-tr.selca@nhs.net with any suggestions.

EARLY DIAGNOSIS PCN DES SPECIFICATION

Webinar Series

The South East London Cancer Alliance has developed a series of Educational Webinars on Cancer for Primary Care to support PCNs in delivering the Early Cancer Diagnosis PCN DES Specification. The webinars are open to all PCN members and cover a series of topics, including screening, safety netting, difficult to diagnose cancers and many more – [see flyer for more information](#).

- [Recording of Screening Webinar – Thursday 27th August 2020](#)

PCN DES Support Guide

Dr Winnie Kwan, GP lead for Bexley has produced a practical support guide to facilitate the understanding of the requirements of the PCN DES. The guide includes a number of approaches for PCNs to consider in order to deliver the early diagnosis elements of the DES specification – *see support guide for further information*.

CANCER SCREENING SERVICES

Cervical Cancer Screening

From 8th June, women across London have been receiving invitations inviting them to their cervical screening appointments. FAQs and further information has been created to support GPs and practices as the Cervical Cancer Screening Programme is restarted, which can be [found here](#).

Bowel Cancer Screening

New invitations for Bowel Cancer Screening (BCS) using FIT have restarted. Bowel Scope Screening (BSS) continues to be paused indefinitely. All screening centres in SEL have prioritised those patients with a positive screening FIT kit who had their investigations delayed due the pause in endoscopy services in response to COVID-19. The next priority group that are being contacted are those patients pending appointments with screening practitioners and those who have been delayed invitations. If your patients have any questions in regards to Bowel Cancer Screening, please ask them to contact the Bowel Cancer Screening Helpline on 0800 707 60 60.

Breast Cancer Screening

The screening service at King's College Hospital has completed all outstanding assessments for women as well as carrying out some surveillance in one of their static sites. The service has procured capacity

from the independent sector to screen women, within a 'COVID-minimal' green pathway, who have a higher risk of breast cancer due to family history. A Pan-London recovery group are meeting weekly, ensuring that services are prepared to resume as soon as it is safe to do so.

A breast pain educational video has been produced by RM Partners to try and reduce the number of women being referred into secondary care because of breast pain. The video explains why breast pain occurs and practical steps that can help in order to reduce it, it is available via youtube and is suitable for use by both primary and secondary care services - <https://youtu.be/v0FkthTQggc>.

PATIENT SUPPORT & WELLBEING

- The Cancer Wellbeing London website has now been launched to help support self-management and healthy living for those affected by cancer. The website includes a series of [patient information videos which](#) cover a range of topics, including emotional wellbeing, managing fatigue, diet and exercise, as well as many others.
- Also available is signposting to some of the [COVID-19 specific resources and support services](#) which are currently available. These cover psychosocial information and support services, as well as physical activity and bereavement information and support. <https://cancerwellbeinglondon.nhs.uk/>
- Macmillan have also developed a patient hub for patients with cancer who are worried about coronavirus (COVID-19): <https://www.macmillan.org.uk/coronavirus>

YOUR GP CANCER LEADS

Lambeth	Dr George Pavey	georgepavey@nhs.net
Southwark	Dr Nicola Weaver	nicola.weaver@nhs.net
Bromley	Dr Sophie Hallam	bromleygp.macmillancancer@nhs.net
Greenwich	Dr Caroline Hollington	carolinehollington@nhs.net
Lewisham	Dr Esther Appleby	estherappleby@nhs.net
Bexley	Dr Winnie Kwan	winnie.kwan@nhs.net
General	Dr Anthony Cunliffe	anthony.cunliffe@nhs.net