

**RECOGNISING THE DIFFERENT Cs: LUNG CANCER VS. COVID**

Urgent referrals for suspected cancer in general, and for lung cancer specifically, have fallen during the COVID-19 pandemic. It is likely this will lead to an increase in lung cancer mortality and morbidity as patients may present at a later stage of disease.

This is further complicated by overlapping symptoms between suspected lung cancer and suspected COVID-19, making timely referral extremely challenging during this time. There is also the additional problem introduced by messages to public necessary to control the COVID pandemic compromising the message of early symptom recognition in lung cancer.

In order to attempt to address this problem, the following guidance has been produced to support GPs when differentiating symptoms suggestive of possible suspected lung cancer and those of suspected COVID-19, especially cough, breathlessness and fatigue.

A FEATURES MORE SUGGESTIVE OF LUNG CANCER	B INDETERMINATE FEATURES	C FEATURES MORE SUGGESTIVE OF COVID-19
<p>Overlapping symptoms are <i>unaccompanied</i> by COVID-19 symptoms:</p> <ul style="list-style-type: none"> <li>• Unexplained persistent cough</li> <li>• Unexplained persistent breathlessness</li> <li>• Fatigue of duration &gt;4 weeks</li> <li>• Persistent or recurrent chest infection</li> </ul> <p>May be <i>accompanied</i> by more specific red-flag symptoms of lung cancer including:</p> <ul style="list-style-type: none"> <li>• haemoptysis,</li> <li>• chest pain</li> <li>• weight loss</li> <li>• appetite loss</li> </ul> <p>And examination / other findings:</p> <ul style="list-style-type: none"> <li>• Finger clubbing</li> <li>• Supraclavicular lymphadenopathy or persistent cervical lymphadenopathy</li> <li>• Chest signs consistent with lung cancer</li> <li>• Thrombocytosis.</li> </ul> <p>Also consider risk factors for lung cancer:</p> <ul style="list-style-type: none"> <li>• Smoking history / Age / Asbestos exposure</li> </ul>	<p>Cough, unclear onset and persistence</p> <p>Breathlessness, unclear onset and persistence.</p> <p>Unclear if any fever.</p> <p>Flu-like symptoms lasting longer than 3 weeks.</p> <p>Feeling of chest tightness</p> <p>Difficulty in taking a deep breath</p> <p>Fatigue with duration &lt;4 weeks</p> <p>Recurrent chest infections with possible features of COVID-19</p> <p>No other clear red flag symptoms</p>	<p>Acute onset of:</p> <ul style="list-style-type: none"> <li>• Dry cough</li> <li>• Breathlessness</li> <li>• Fever</li> <li>• Myalgia</li> <li>• Loss of smell</li> <li>• Loss of taste</li> </ul> <p>Close contact with a confirmed/ highly suspected case of COVID-19</p> <p>Initial flu-like symptoms for 1-2 weeks with onset of respiratory symptoms from 7-10 days.</p>
<p><b>RECOMMENDED ACTION:</b></p>	<p><b>RECOMMENDED ACTION:</b></p>	<p><b>RECOMMENDED ACTION:</b></p>
<p><b>Refer patient for an urgent chest x-ray, arrange FBC &amp; U&amp;Es and discuss the possibility of a lung cancer referral with the patient.</b></p> <p>Use the Advice and Guidance service to discuss less clear suspicions with secondary care clinicians.</p> <p>If symptoms require urgent attention, consider emergency admission.</p>	<p>“People with symptoms of COVID-19 can apply for testing via the <a href="#">NHS website</a> or by calling 119.”</p> <p>Ask patient to self-isolate <a href="#">according to current guidance</a> and then review symptoms; if persistent refer for chest x-ray and follow actions for <b>A</b>.</p> <p>Use the Advice and Guidance service to discuss suspicions with Secondary Care clinicians.</p> <p>If symptoms require urgent attention, consider emergency admission.</p>	<p>“People with symptoms of COVID-19 can apply for testing via the <a href="#">NHS website</a> or by calling 119.”</p> <p>Manage patient according to the latest guidelines on the <a href="#">management of COVID-19</a>.</p> <p>Arrange follow-up with patient as appropriate.</p>