**ANNEX 10**

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**AN IMPACT OF TREATMENT DELAY ON SURVIVALS OF PATIENTS WITH LUNG, BREAST, COLON, PROSTATE AND CERVICAL CANCERS IN SELECTED REGIONS OF POLAND**

The Polish module:

The EUROPEAN CANCER HEALTH INDICATOR PROJECT (ECH)

Field: „Care and Treatment”

Cancer Health Indicator (CHI): „Treatment and clinical aspects”

**SUMMARY**

**Introduction:**

Due to financial limitation and organizational difficulties in health care system in Poland as well as in many European countries, long waiting lists for medical care have become a problem.

It has been proven in many studies that the long waiting time affects results of treatment of cancer patients. Therefore, it has been included into high priority cancer control indicators by European Panel of Experts working on the European Cancer Health Indicator Project (ECH). The impact of long waiting time for treatment is not homogenous and depends on cancer site and certain prognostic factors: sex, age, advancement of the disease, histopathological diagnosis, as well as on type of treatment applied.

Evaluation of magnitude of this problem in Poland will enable to make a description of recommendations for shortening the waiting time and diminishing the unfavourable effects of treatment delay, if unavoidable. These recommendations should be included into the National Cancer Control Project (linked to strategic aim No.3, of The National Health
Program) entitled “Reducing Inequalities in Health and Access to Health Care” between the regions.

In the nomenclature of ECH, it is “Intervention”.

**Aim:**

1. Evaluation and an analysis of treatment delay and its impact on survivals of lung, breast, colon, prostate, and cervical cancer patients, in relation to selected prognostic factors.
2. Elaboration of recommendations for the maximum waiting time for treatment.
3. Development of the data base to be incorporated into the general data base in order to enable further analyses based on a big population (among others, an analysis of prognostic factors, monitoring of trends, etc.).

**Materials and Methods**

Indicators will be worked out on the population data on incidence of lung, breast, colon, prostate, and cervical cancers in 2000-2001 in selected regions of Poland (Warsaw City and former voivodships of Kielce and Opole) and made complete with data from the clinics wherein the patients received their first treatment.

The data will be grouped according to uniform protocols that were previously used in the EUROCARE 3 –HR¹ Project and in similar study funded by State Committee for Scientific Research (KBN 6PO5D 059 20)², in the same regions of Poland, in the years 1990 – 96. Due to application of the same methodology and the same population, it will be possible to evaluate some changes in indicators and in prognostic factors related to time.

 Based on the collected data, the “Intervention” will be prepared and will contain recommendations aimed at shortening waiting time for oncological treatment leading to

１HR (High Resolution Study) covers the data on prognostic factors, first treatment and follow-up

improvement of cancer survival in Poland. A method of promotion of “Intervention” will be decided on.

As per EU recommendations, research should be carried out on a periodical basis and made available for further analyzing and publication, following the rules laid down in the ECH Project.

**Work schedule:**

1. Commencement of organizational work – 2004-11-02
2. Setting up a Polish Group of Experts, checking availability of data and selecting indicators – by the end of 2004.
5. Allocation of funds for promoting interventions.

**Project performance by 2005-01-17**

To Item 1. Preliminary talks were held and consent was obtained to make data available from Cancer Registers in Kielce, Opole, Warsaw, and from medical records.

To Item 2. A Polish Group of Experts gathered (Annex 1), and verified accessibility of data.

To Item 3. A pilot study of data availability. An application to the Office of President of Warsaw for financial support for data collection.

**Projected number of cases**

Table 1 gives the annual number of registered new cancer cases broken down into the three regions of Poland under investigation. Because of insufficient data of cervical cancer
cases from former voivodships of Kielce and Opole, incidents from the two years should be included in the analysis.

The projected cohort is about 6300 cases.

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