

<i>ECHIM Indicator name</i>	D) Health interventions: health services 83. Cancer treatment delay
<i>Definition</i>	Cancer treatment delay is defined as the average time (in days) between the date of first visit to general practitioner and the date of first treatment, by cancer site (breast, colon and rectal cancer).
<i>Key issues and problems</i>	Topic needs much further development. The keys issues are: 1) Is it appropriate to choose the following cancers: breast, colon and rectal cancer. 2) Are first visit to general practitioner and first treatment the most appropriate starting and end points to measure treatment delay? For each cancer patient, five (six) dates in his/her patient history can be distinguished: 1) First visit to general practitioner, 2) First request for a clinical/hospital appointment, 3) First clinical/hospital appointment, 4) Date of definitive diagnosis, 5) Date of first treatment (surgery, systemic therapy or radiotherapy), And for colon and rectal cancers, also 6) Information on elective or emergency surgery. Based on Eurochip (see under remarks), we propose time between first GP visit and first treatment. 3) Are they any data available to calculate “delay of cancer treatment” as the difference between “date of first treatment” and “date of first visit to general practitioner”.
<i>Preferred data type and data source</i>	Preferred data type: Population-based national Cancer Registries Preferred data source: Not decided yet.
<i>Data availability</i>	Eurostat, WHO-HfA and OECD: No data available. European Cancer Health Indicator Project, EUROCHIP: Pilot data available.
<i>Rationale</i>	Indicator for the quality of cancer care. Indicators on cancer treatment quality are necessary to investigate the determinants of inequalities across Europe in terms of care. Explains part of the differences in cancer survival.
<i>Remarks</i>	<ul style="list-style-type: none"> - In most systems with national cancer registers the first recorded date for incidence and survival calculations is the day of diagnosis. Thus to use instead the date of first visit to general practitioner or the date of first treatment, is problematic. - EUROCHIP-2 has organizing pilot studies in 12 European countries to find out if it is possible to collect these indicators using CR as data source. The EUROCHIP Pilot Studies protocol is available in internet at the web-site: www.tumori.net/eurochip. The EUROCHIP-2 final report's Annex 3 includes the results of the pilot studies. - According to the pilot study: in reference to indicator “Delay of cancer treatment”, the “date of first visit to general practitioner” is the most available one of the 3 pre-diagnostic dates. Indicator based on this definition is collectable in some countries but it needs specific developments according to different national health systems to improve comparability. Thus, in order to collect the necessary data, some modifications in Cancer Register organisation might be necessary. - In some MSs Cancer Registry covers the entire population, in others one ore more Cancer Registries cover a fraction of the population. - EUROCHIP-3 project: years 2008-2010.
<i>References</i>	<ul style="list-style-type: none"> - European Cancer Health Indicator Project, EUROCHIP: www.tumori.net/eurochip - EUROCHIP-2. Final Scientific Report – Annex 03 – report of EUROCHIP-2 Pilot Studies, March 2008; http://www.tumori.net/eurochip/material/Report/EUROCHIP-2_Final_report/Annex_03_EUROCHIP_Pilot_Studies.pdf - EUROCHIP-2. European Cancer Health Indicator Project-II. The Action. FINAL SCIENTIFIC REPORT 31/03/2008; http://www.tumori.net/eurochip/material/Report/EUROCHIP-2_Final_report/Annex_00_EUROCHIP-II_FINAL_REPORT.pdf
<i>Work to do</i>	- Monitor EUROCHIP–project with regards to indicator development and data availability.