

**Use of cancer e-referral data to monitor health-seeking behaviours during the COVID-19 pandemic**

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At the outset of the pandemic, concern arose that people with concerning symptoms would not attend their GP and delayed presentations would impact cancer survival. Ireland lacks a national database of GP attendances from which to observe

this. Ireland has rapid access clinics in designated cancer centres, providing a streamlined pathway for the diagnosis of certain common cancers. Referral to these clinics can be made electronically from primary care, using a national messaging system Healthlink. Healthlink agreed to report on the volume of referrals at weekly intervals, given the concern regarding non-presentation. Rolling descriptive analytics included the comparison of referral numbers to pre-pandemic weeks in 2020 (Weeks 2-11) and to corresponding time periods in 2019. A marked reduction was observed in wave 1 of the pandemic. Weekly e-referrals dropped by more than 60% in weeks 12-14 (breast 62.5%; lung 57.9%; prostate 61.1%). This was not replicated in subsequent waves. By end-2020, the volume of referrals equated to 112.4% of total referrals in 2019. The objective demonstration of a fall in cancer referrals prompted a media campaign to highlight the importance of early diagnosis and to reassure that cancer diagnostic and treatment services continued to operate. It also prompted national communication in relation to other essential health services. Challenges identified included occasional misinterpretation of referral data as reflective of attendance and investigation at clinics and the potential influence of increased uptake of e-referral systems. While caveats exist in relation to interpretation, e-referral data from primary care to cancer centres is a useful tool to monitor trends in patient presentations with suspected cancer. Automated collection of cancer e-referral data at a national level provides real-time information, compared to manual data collection systems within hospitals which were challenged through redeployment of staff to the Covid response.

**Key messages:**

- Monitoring of e-referral rates provided a useful and timely proxy measure of health-seeking behaviour during the Covid pandemic.
- The significant drop in referrals during the first wave of the pandemic was not repeated, suggesting an improved understanding among the public of the need to investigate symptoms of possible cancer.