



CANADIAN ASSOCIATION OF GASTROENTEROLOGY
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GASTROENTEROLOGY WAIT-TIMES PROGRAM: RESULTS

Gastroenterology Wait Times Program is a practice audit in gastroenterology. With this program, the Canadian Association of Gastroenterology (CAG) is able to measure wait times from:

- initial Primary Care Physician referral to Gastroenterologist consultation;
- Gastroenterologist consultation to a procedure;
- initial Primary Care Physician referral to Gastroenterologist procedure.

Nearly 200 GI specialists captured data on 5,500 patient visits from across the country.

RESULTS

- Two out of 4 patients referred by Primary Care Practitioner (Family Doctor) wait more than 2 months to see a GI doctor. One in 4 waits more than 4 months.
- Once patients are seen by the GI specialist, 2 out of 4 wait another six weeks for a diagnostic test while 1 in 4 waits nearly another 4 months.
- Wait times are long regardless of whether patients are referred to community or university hospitals.
- Total wait times are worse in medium sized communities, with populations ranging from 100,000 to 500,000. In these communities, 1 in 4 patients waits more than 8 months.
- 80% of participating specialists offer colonoscopy for colon cancer prevention in average risk people. However, more than 50% of patients wait over 2 months (55 days) and up to one year (354 days) for a procedure.
- Over one third of referrals to GI specialists have alarm symptoms, which may indicate serious underlying disease such as cancer. 50% of these patients wait at least two months (56 days) and 1 in 4 waits up to 8 months for a Gastroenterologist consultation.
- Two out of 4 patients with alarm symptoms wait nearly 2 months to see a specialist and have a test performed. One in 4 waits more than 4 months.

- One in 4 people with a family history of colon cancer has to wait almost 9 months from initial referral to procedure. Canadians with a family history of colon cancer, who have reached 50 years of age, are at up to four times more likely than the average Canadian of developing the disease.
- Two out of 4 patients classified as urgent and who ought to be seen in 7 days wait 14 days while 1 in 4 waits more than 5 weeks.
- Overall, the results show a high proportion of patients with urgent symptoms, major restriction on preventative care and excessive wait times for more than half of all referrals.