

The Medical Post

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CDDW: Gastro wait times vary widely across provinces

David Hodges

Audit results don't come close to meeting targets

By David Hodges

BANFF, ALTA. | All provinces are struggling to deliver timely access to digestive disease health care, but some more so than others, according to findings presented at the meeting here.

Followup data from the 2005 Gastroenterology Wait Times Program—a six-month audit of nearly 200 Canadian gastroenterologists capturing data on 5,500 patient visits—shows Alberta has the longest wait times in Canada, with one-quarter of patients waiting more than 40 weeks before being seen by a gastroenterologist and undergoing a test or procedure.

By contrast, one in four patients in New Brunswick is waiting more than 32 weeks, while this figure is closer to 30 weeks in Ontario, 26 weeks in British Columbians, 21 weeks in Quebec and 12 weeks in Nova Scotia. (Provincial data for the remaining provinces were not available due to the very small number of audits.)

According to the Canadian Association of Gastroenterologists (CAG), the overall waiting time should be no more than eight weeks.

Dr. William Patterson, president elect of the CAG, said the shorter waits in Nova Scotia are misleading. "They have such a critical shortage of gastroenterologists at present that they are devoting their limited resources to handling emergency and urgent cases," he said. "Non-urgent referrals either are not being seen (for instance, referrals for average-risk colon cancer screening are no longer being accepted) or are waiting a very long period of time."

The CAG's audit, which was done over a one-week period, provides a brief snapshot of what gastroenterologists are doing in Canada, he added. "In Nova Scotia, that snapshot is heavily weighted toward seeing patients with urgent and emergent problems."

Alarm symptoms

Perhaps more distressingly, followup findings from the audit also show that total wait times for patients presenting with alarm symptoms (which raise the possibility of disease, such as cancer) vary considerably from one province to another.

In Ontario, one-quarter of patients with alarm symptoms are waiting more than 20 weeks from initial referral to procedure or test. In British, Columbia, Alberta and Quebec, one out of four are waiting over 16 weeks.

Again, these results don't come close to meeting the medically acceptable wait time targets, Dr. Patterson said.

Patients referred with features highly suggestive of cancer should be seen and, if indicated, endoscoped within two weeks. But in Canada, this target is met in only one-third of patients.

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