## Patient and provider delays in breast cancer patients attending a tertiary care centre: a prospective study

Arushi Devgan, Chintamani, Amita Tuteja, Rohan Khandelwal, Megha Tandon, Rahul Bamal, Siddharth Jain, Nikhil Narayan, S. Srinivas, Yeshavant Kumar

Vardhman Mahavir Medical College and Safdarjung Hospital

E-mail: arushiavni@gmail.com

## Introduction

To find out factors that are responsible for the patient or provider delays in the diagnosis of breast cancer in India.

Design

This prospective study was designed to be conducted over a period of two years including a cohort of 100 patients with locally advanced breast cancer. The delays were assessed using questionnaires prepared according to the Indian scenario.

Setting

A prospective study in an Indian setting.

**Participants** 

One hundred patients with locally advanced breast cancer receiving neoadjuvant chemotherapy were included after providing informed consent and receiving ethical committee clearance.

Main outcome measures

The most common factor responsible for delays in diagnosis was observed to be the health providers,

although illiteracy and lack of adequate healthcare services also contributed significantly. Unregistered medical practitioners or quacks contributed significantly to the delays in reporting and diagnosis of the disease.

## Results

One hundred patients of locally advanced breast cancer were evaluated using standardized questionnaires to assess the delays in diagnosis. Provider delays were found to be significant (the unregistered doctors or quacks being a significant cause of delays). The average time lapse before diagnosis for rural patients was higher (67.5 days) compared to urban patients (53.7 days). The literacy levels of the patients also had a significant impact on the delays at diagnosis. The delay in illiterates was 60.6 days compared to 49.5 days for literates.

## Conclusion

The most common factor responsible for delays in reporting and diagnosis was observed to be at the end of the health providers, although illiteracy and lack of adequate healthcare services also contributed significantly. Unregistered medical practitioners or quacks contributed significantly to the delays in reporting and diagnosis of the disease.