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**Wednesday 19<sup>th</sup> April 12.20 – 12.50**

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<b>E-Session 1</b>	<b><i>Wolfson Hall</i></b>
	<p><b><i>GASTROINTESTINAL CANCERS</i></b></p> <p>E-01: Diagnosing colorectal cancer in general practice: a mixed methods approach <u>Daan Brandenburg</u>, University of Groningen</p> <p>E-02: Use of immunochemical faecal occult blood test in general practice on patients presenting non-alarm symptoms of colorectal cancer <u>Jakob Sjøgaard Juul</u>, Aarhus University</p> <p>E-03: “I’m always anaemic”: Insights into colorectal cancer diagnosis using GP records <u>Daniel Jones</u>, Hull York Medical School</p> <p>E-04: Live implementation of ColonFlag as an adjunct for population management allowing practitioners to identify non-compliant individuals at risk of harboring pre-malignant and malignant colonic lesions <u>Ran Goshen</u>, Medical Early Signs</p> <p>E-05: Positive predictive value and sensitivity of selected abdominal symptoms in relation to some major abdominal forms of cancer, with a discussion of the data basis for calculations. Examples from bladder, kidney and colorectal cancer in a cohort study with prospective registration of cancer <u>Knut Holtedahl</u>, Tromso University</p> <p>E-06: Frequency and diagnostic timeliness of abdominal symptoms before a cancer diagnosis in primary care <u>Minjoung Monica Koo</u>, University College London</p> <p>E-07: Clinical characteristics, diagnostic investigations and diagnoses of patients referred with non-specific, serious symptoms. <u>Esben Næser</u>, Aarhus University</p>
<b>E-Session 2</b>	<b><i>Wadsworth Room</i></b>
	<p><b><i>SCREENING</i></b></p> <p>E-08: Motives for not undergoing a colonoscopy after an unfavourable result in the Dutch population-based screening for colorectal cancer: preliminary results of the ARCUS study <u>Lucinda Bertels</u>, University of Amsterdam</p> <p>E-09: Health Beliefs, Illness Perceptions and Determinants of Breast Screening Uptake in Malta: A Cross-Sectional Survey <u>Danika Marmarà</u>, University of Stirling/ Malta Cancer Care Pathways Directorate</p> <p>E-10: Beliefs about cancer and participation in screening for colorectal cancer. Danish results from the International Cancer Benchmarking Partnership (ICBP) <u>Line Hvidberg</u>, Aarhus University</p> <p>E-11: Creating a Toolkit to Support Implementation of a Systems-based Colorectal Cancer Screening Program Across Diverse Primary Care Practices <u>Allison M. Cole</u>, University of Washington</p>

	<p>E-12: Quality assurance of evidence-based gastric cancer screening in Japanese communities <u>Chisato Hamashima</u>, National Cancer Center, Japan</p> <p>E-13: Improving bowel screening uptake: Lessons from higher uptake of breast and cervical screening <u>Katie Robb</u>, University of Glasgow</p> <p>E-14: Why do people who agreed to participate in lung screening change their mind? <u>Hannah Scobie</u>, University of Glasgow</p>
<b>E-Session 3</b>	<b><i>Tausend Room</i></b>
	<p><b><i>SURVIVORSHIP</i></b></p> <p>E-15: BETTER WISE: Building on Existing Tools to Improve Cancer and Chronic Disease Prevention and Screening in Primary Care for Wellness of Cancer Survivors and Patients <u>Donna Manca</u>, University of Alberta</p> <p>E-16: The evolution of loneliness in older cancer patients until three years after diagnosis <u>Marjan van den Akker</u>, KU Leuven and Maastricht University</p> <p>E-17: Choose Wisely, a consultation with the general practitioner between diagnosis and therapy choice for cancer patients <u>Eveline Noteboom</u>, University Medical Center Utrecht</p> <p>E-18: Reasons for GP consultation after surgical treatment of prostate cancer <u>Kristel van Asselt</u>, University of Amsterdam</p> <p>E-19: Feasibility and acceptability of follow-up for prostate cancer in primary care <u>Marianne Heins</u>, NIVEL - Netherlands institute for health services research</p> <p>E-20: Living with and beyond cancer with comorbid illness: reflecting on a research prioritisation exercise <u>Debbie Cavers</u>, University of Edinburgh</p> <p>E-21: Effect of a transitions program on perceptions of continuity of care by colorectal cancer survivors at discharge to primary care. <u>Jeffrey Sisler</u>, University of Manitoba</p>
<b>E-Session 4</b>	<b><i>GB Ong Room</i></b>
	<p><b><i>DOUBLE THEME: RISK, AND AWARENESS</i></b></p> <p>E-22: Exploring the relationship between socioeconomic status, risk factors and typical pathways to late cancer diagnosis <u>Weiqi Liao</u>, University of Southampton</p> <p>E-23: Excess body weight as a risk factor for skin cancer: a meta-analysis <u>Margaret Ryan</u>, Cancer Research UK</p> <p>E-24: Are patients with high normal platelet counts at increased risk of cancer? The NORMA study. <u>Sarah Bailey</u>, University of Exeter</p> <p>E-25: Birth Cohort Analysis of Body Mass Index (BMI) and Bowel Cancer Incidence in England. <u>Jessica Sheppard</u>, Cancer Research UK</p>

	<p>E-26: Variation in cancer risk among Lesbian, Gay and Bisexual men and women: evidence from patient surveys in England <u>Catherine L Saunders</u>, University of Cambridge</p> <p>E-27: Evaluation of an online toolkit to improve early diagnosis of oral cancer <u>Lucy Ironmonger</u>, Cancer Research UK</p> <p>E-28: Encouraging the early presentation of oral cancer <u>Tunmise Awojobi</u>, King's College London Dental Institute</p>
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**Wednesday 19<sup>th</sup> April    16.45 – 17.10**

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<b>E-Session 5</b>	<b><i>Wadsworth Room</i></b>
	<p><b><i>DOUBLE THEME: INTERNATIONAL, AND SMOKING CESSATION</i></b></p> <p>E-29: The Role of Omani Patients and their Families in Cancer Treatment Decision-Making: A cross sectional study <u>Mohammed Al-Azri</u>, Sultan Qaboos University</p> <p>E-30: Cancer Education in Nigeria: Findings from a Community-Based Intervention by a Physicians' Association <u>Kelechi Eguzo</u>, Department of Academic Family Medicine, University of Saskatchewan.</p> <p>E-31: The SUCCESS study - Smoking Reduction by a Smoking Cessation Strategy in the National Cervical Cancer Screening Program <u>Marthe Mansour</u>, University of Amsterdam</p> <p>E-32: A smoking cessation discussion after cervical cancer screening: a qualitative study amongst screening participants <u>Marthe Mansour</u>, University of Amsterdam</p>
<b>E-Session 6</b>	<b><i>Wolfson Hall</i></b>
	<p><b><i>MAINLY OVARIAN</i></b></p> <p>E-33: Trends in Cancer Antigen 125 testing in primary care in Oxfordshire 2003-2014. <u>Jason L Oke</u>, University of Oxford</p> <p>E-34: A systematic review of the use, quality and effects of pelvic examination in primary care for the detection of gynaecological cancer. <u>Pauline Williams</u>, University of Aberdeen</p> <p>E-35: Utility of biomarkers for ovarian cancer risk assessment in primary care: a feasibility study protocol <u>Garth Funston</u>, University of Manchester</p> <p>E-36: Actively approaching women with a history of ovarian cancer for genetic counselling by GP, desirable and feasible? <u>Charles Helsper</u>, University Medical Center Utrecht</p>

	<p>E-37: Stage at Diagnosis and Clinical Activity in General Practice in the Year before Ovarian Cancer Diagnosis  <u>Peter Hjertholm</u>, Aarhus University</p>
<b>E-Session 7</b>	<b><i>Tausend Room</i></b>
	<p><b><i>SURVIVORSHIP AND PALLIATIVE CARE</i></b></p> <p>E-38 Pathways to diagnosis of a second primary cancer: a mixed methods systematic review  <u>Lovney Kanguru</u>, University of Edinburgh</p> <p>E-39: Throughout the cancer patient's journey, there ought to be a discussion about work': GP Provision of Work-Related Advice to Cancer Patients in Scotland  <u>Sara MacLennan</u>, University of Aberdeen</p> <p>E-40: Using a computer search in primary care practices to screen people for generalist palliative care: AnticiPal  <u>Bruce Mason</u>, University of Edinburgh</p> <p>E-41: 'Good' palliative primary care according to advanced cancer patients and their relatives: an interview study on needs  <u>Gé Donker</u>, Netherlands Institute for Health Services Research (NIVEL), Utrecht</p> <p>E-42: Palliative care for patients with cancer: do patients receive the care they consider important?  <u>Marianne Heins</u>, NIVEL - Netherlands institute for health services research</p> <p>E-43: ABSTRACT WITHDRAWN</p>
<b>E-Session 8</b>	<b><i>GB Ong Room</i></b>
	<p><b><i>DOUBLE THEME: EMERGENCY PRESENTATION, AND SIGNIFICANT EVENT AUDIT</i></b></p> <p>E-44: Does emergency presentation of cancer result represent poor performance in primary care: new insights from a comprehensive primary care dataset  <u>Peter Murchie</u>, University of Aberdeen</p> <p>E-45: Defining, measuring and preventing the diagnosis of cancer as an emergency: a critical review of current evidence  <u>Yin Zhou</u>, University of Cambridge</p> <p>E-46: Time-trends in diagnosis through emergency presentation among cancer patients in England: Evidence from population-based data, 2006-13  <u>Annie Herbert</u>, University College London</p> <p>E-47: Trends in socio-demographic inequalities in the risk of a cancer diagnosis through emergency presentation: Evidence from population-based data for England, 2006-13  <u>Annie Herbert</u>, University College London</p> <p>E-48: Comparison of Significant Event Audits of Patients Diagnosed with Cancer in two areas in the UK  <u>Jennifer Yiallourous</u>, Cancer Research UK &amp; Qualjenuity Ltd</p> <p>E-49: 'Half-baked': Are Significant Event Audits for cancer diagnoses completed in the way they were designed?  <u>Jennifer Yiallourous</u>, Cancer Research UK &amp; Qualjenuity Ltd</p>

<b>E-Session 9</b>	<b><i>Wolfson Hall</i></b>
	<p><b><i>DIAGNOSIS IN PRIMARY CARE</i></b></p> <p>E-50: Diagnostic safety: Chest X-ray referral in a Safety-II perspective <u>Lotte Linnemann Rønfeldt</u>, The Danish Cancer Society</p> <p>E-51: The effect of a normal chest x-ray on the diagnosis of lung cancer: in-depth analysis of Significant Event Audits. <u>Daniel Jones</u>, Hull York Medical School</p> <p>E-52: The Help-Seeking Experiences of People with Symptoms of Lung or Colorectal Cancer: a Contextual Model of the Patient Interval <u>Christina Dobson</u>, University of Durham</p> <p>E-53: The LUCAS Study: A qualitative study of delayed presentation of potential symptoms of lung cancer in smokers. <u>Annie Hendry</u>, Bangor University</p> <p>E-54: Ethnic variations in the use of primary care among men with symptoms suggestive of prostate cancer: a multi-methods study. <u>Tanimola Martins</u>, University of Exeter</p> <p>E-55: Development of the Pathways to Healthcare Questionnaire (PaTH-Q): Content and Face Validation <u>Sonja Kummer</u>, King's College London</p> <p>E-56: A qualitative study of cancer presentation and diagnostic management within primary care: the influences of the lay community and the formal health-care delivery system <u>Hong Chen</u>, Hull York Medical School</p>
<b>E-Session 10</b>	<b><i>Tausend Room</i></b>
	<p><b><i>UNDERSTANDING HEALTH SYSTEMS AND INTERVENTIONS</i></b></p> <p>E-57: Describing the methodological steps to develop an evaluation of the Detect Cancer Early Programme in Scotland <u>Natalia Calanzani</u>, University of Edinburgh</p> <p>E-58: The characteristics of national health initiatives promoting earlier cancer diagnosis among adult populations: a systematic review <u>Natalia Calanzani</u>, University of Edinburgh</p> <p>E-59: Qualitative evaluation of ACE interventions <u>Ingrid Ablett-Spence</u>, Durham University</p> <p>E-60: Pathways to lung cancer diagnosis and treatment – a retrospective medical record audit in NSW, Australia. <u>Nicole Rankin</u>, University of Sydney</p> <p>E-61: The RoaDmaP pilot study: testing the feasibility and acceptability of a primary care</p>

	<p>intervention for referral of potential lung cancer cases to specialist care <u>Nicole Rankin</u>, University of Sydney</p> <p>E-62: 'WICKED' (Wales Interventions and Cancer Knowledge about Early Diagnosis): The development and evaluation of primary care interventions to expedite the diagnosis of symptomatic cancer in Wales <u>Andrei Stanciu</u>, Bangor University</p>
<b>E-Session 11</b>	<b><i>GB Ong Room</i></b>
	<p><b><i>INTERVALS AND OUTCOMES</i></b></p> <p>E-63: Time to referral after alarm symptoms for colorectal cancer in primary care. <u>Charles Helsper</u>, University Medical Center Utrecht</p> <p>E-64: Geographic variation in diagnostic time intervals <u>Line Flytkjær Jensen</u>, Aarhus University</p> <p>E-65: Ovarian cancer outcome and variation in referral rates for transvaginal ultrasound examination from general practice <u>Marie-Louise Ladegaard Baun</u>, Aarhus University</p> <p>E-66: Do the characteristics of general practice workforce in England predict practice level-variation in use of urgent referrals for suspected cancer and endoscopies in English primary care? <u>Gary A Abel</u>, University of Exeter</p> <p>E-67: Comparing the literal cancer journey for colorectal cancer patients between Denmark, England and Scotland <u>Peter Murchie</u>, University of Aberdeen</p> <p>E-68: The story of melanoma in primary care: presentation, policy and its association with diagnostic duration. <u>Charles Helsper</u>, University Medical Center Utrecht</p> <p>E-69: Safety in primary care relating to melanoma diagnosis – what can we learn from interviews with patients recently diagnosed with melanoma? <u>Nadia Llanwarne</u>, University of Cambridge</p>
<b>E-Session 12</b>	<b><i>Wadsworth Room</i></b>
	<p><b><i>SURVIVORSHIP</i></b></p> <p>E-70: How do health system factors affect cancer survival? Results from the Örenäs Research Group study. <u>Michael Harris</u>, University of Bath</p> <p>E-71: Examining the Impact of Diabetic Status on Multiple Psychosocial Outcomes in a Nationally Representative Sample of U.S. Cancer Survivors <u>Denalee O'Malley</u>, Rutgers School of Social Work</p> <p>E-72: Life and the body after cancer: an anthropological study of socially disadvantaged cancer survivors' experiences of their bodies and interactions with the health care system. <u>Camilla Hoffman Merrild</u>, Aarhus University</p> <p>E-73: Correspondence about patients with cancer between primary and secondary care: a qualitative analysis</p>

Annette Berendsen, University Medical Center Groningen

E-74: The significance of GPs in cancer care from the oncologists' perspective  
Jennifer Engler, Goethe-Universität Frankfurt am Main

E-75: Cooperation of GPs with other physicians in cancer care  
Insa Koné, University of Basel

E-76: The influence of culture on cancer survival using the Hofstede dimensions  
Gordon Taylor, University of Bath