Reviewer's report

Title: Pathways to the diagnosis of lung cancer in the UK: a cohort study.

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Reviewer: Jessica Corner

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Pathways to the diagnosis of lung cancer in the UK: a cohort Study

This paper provides useful data regarding the pathway to diagnosis in lung cancer that has not been previously reported. Little work has been undertaken to date into the reasons for diagnosis in lung cancer being late into the course of the disease and when there is no prospect of curative treatment. The commonly held view that late diagnosis in lung cancer is inevitable has recently been challenged and this has led to recognition of the importance of developing a detailed understanding of the factors involved in late diagnosis.

This paper reports findings from a retrospective case note review from GP records of the route to diagnosis of people attending GP surgeries who have been diagnosed with lung cancer initially identified through cancer registries. The finding that only 45% of patients’ route to diagnosis was through the ‘traditional’ and expected route ie GP referral for chest x-ray and to a respiratory specialist, is important and suggests that current clinical guidelines may be ineffective. Referral to another specialist and often without an accompanying chest x-ray or via emergency admission being common routes to diagnosis is also important and warrants further consideration if earlier diagnosis is to be achieved.

The study is limited because data for the analysis relies solely on GP recorded case notes this means that symptom and event histories cannot be verified and will inevitably lack detail. The authors should make more of this limitation within the paper. It is also relatively small in size and restricted to one locality. The data table (table 1) does not include all the data referred to in the text and should include p values and details of statistical tests.

Although a small study with limited breadth of information, since there is such a dearth of information on this important subject it is worth of publication and does contribute new knowledge to this important disease pointing to the need for research studies into how patients can be encouraged to attend GP surgeries when they have a lung cancer symptom.

What next?: Accept after minor essential revisions

Level of interest: An article whose findings are important to those with closely related research interests
Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests