

Lung cancer care in Saskatchewan and Ontario: An interprovincial analysis of healthcare resource utilization

INTRODUCTION

- Lung cancer (LC) is known to exert an enormous burden on healthcare systems across Canada. It is the leading cause of cancer mortality in the country.¹
- Limited research exists on healthcare resource utilization and treatment costs in Canada.
- No lung cancer studies have drawn interprovincial comparisons

DISCLAIMER
This study is based in part on de-identified data provided by the Saskatchewan Ministry of Health, eHealth Saskatchewan, and the Saskatchewan Cancer Agency. The interpretation and conclusions contained herein do not necessarily represent those of the Government of Saskatchewan, Cancer Agency or the Saskatchewan Ministry of Health.

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OBJECTIVE

To evaluate and compare healthcare resource utilization in Ontario and Saskatchewan among lung cancer patients.

METHODS

Study Design

- Retrospective cohort analysis
- Adult patients ages 30 years and older residing in Ontario (n=29,983) and Saskatchewan (n=2,889) with a primary diagnosis of non-small cell (NSCLC) or small cell lung cancer (SCLC) between January 1, 2008 and March 31, 2014.
- Patients were excluded if they had a preexisting or subsequent cancer diagnosis.

Data Sources

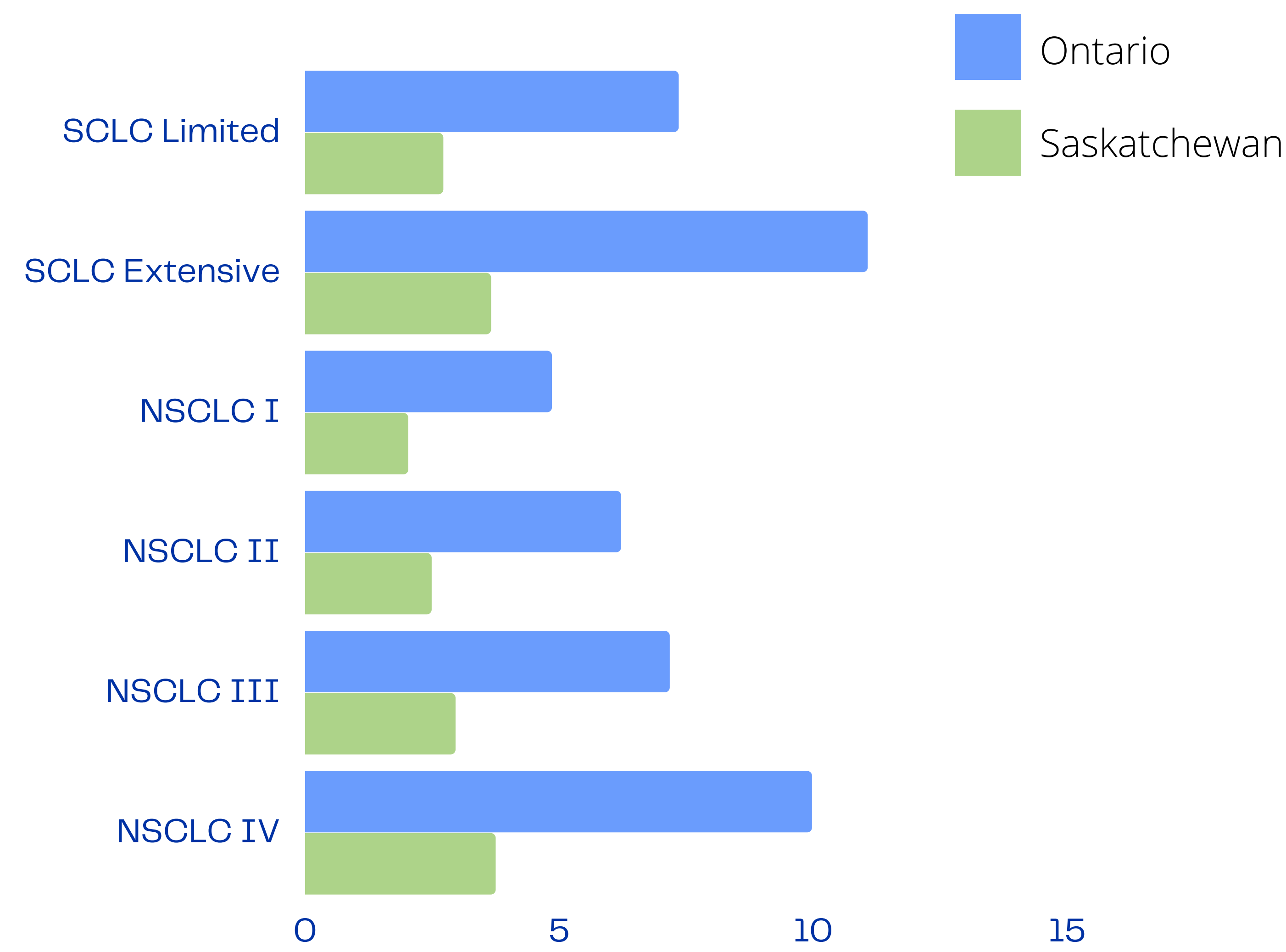
- linked provincial cancer registries and administrative databases

Variables

- Healthcare utilization measures included physician visits, hospitalizations, length of stay (LOS), and in-hospital mortality.

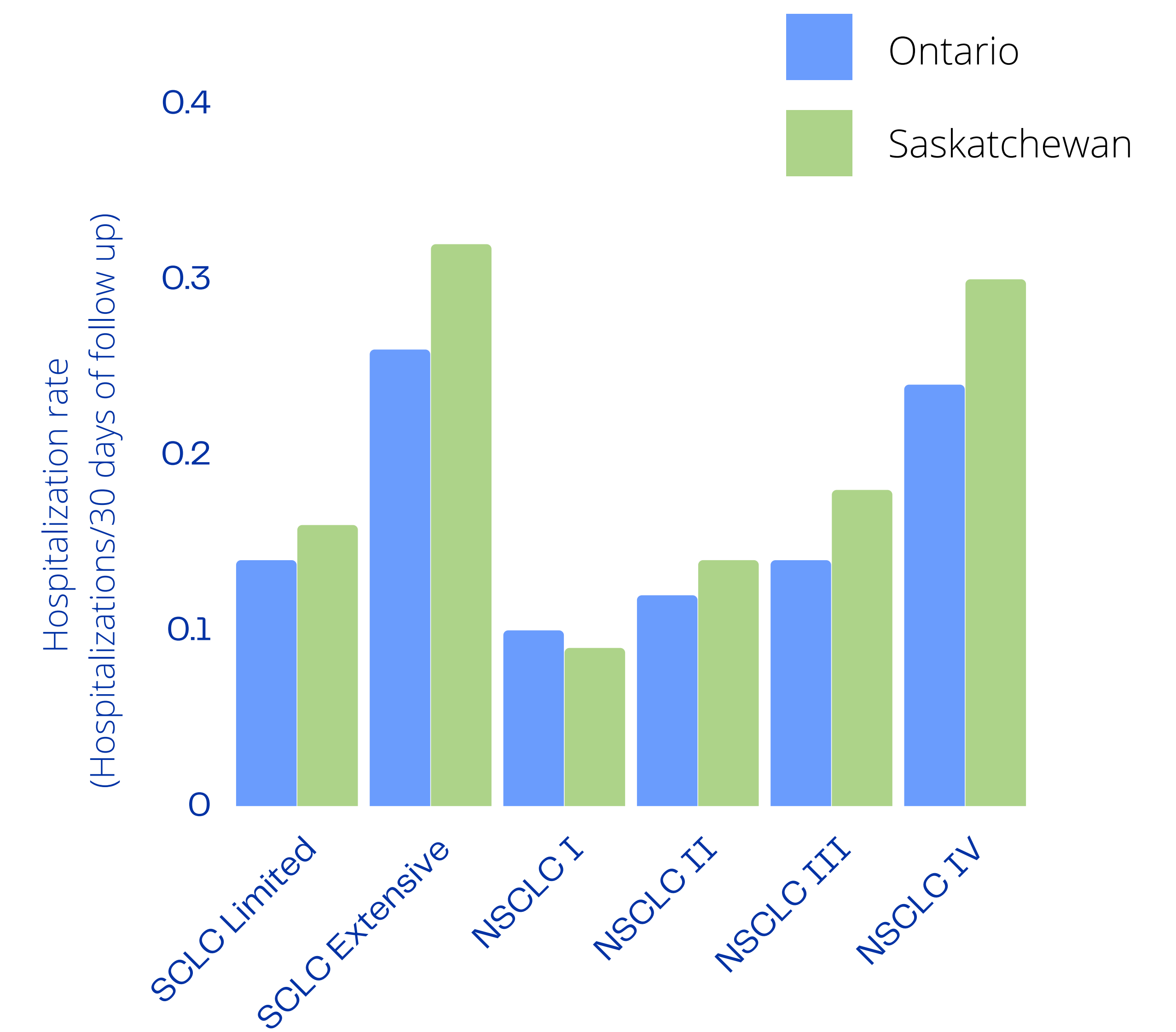
RESULTS

Total physician visits

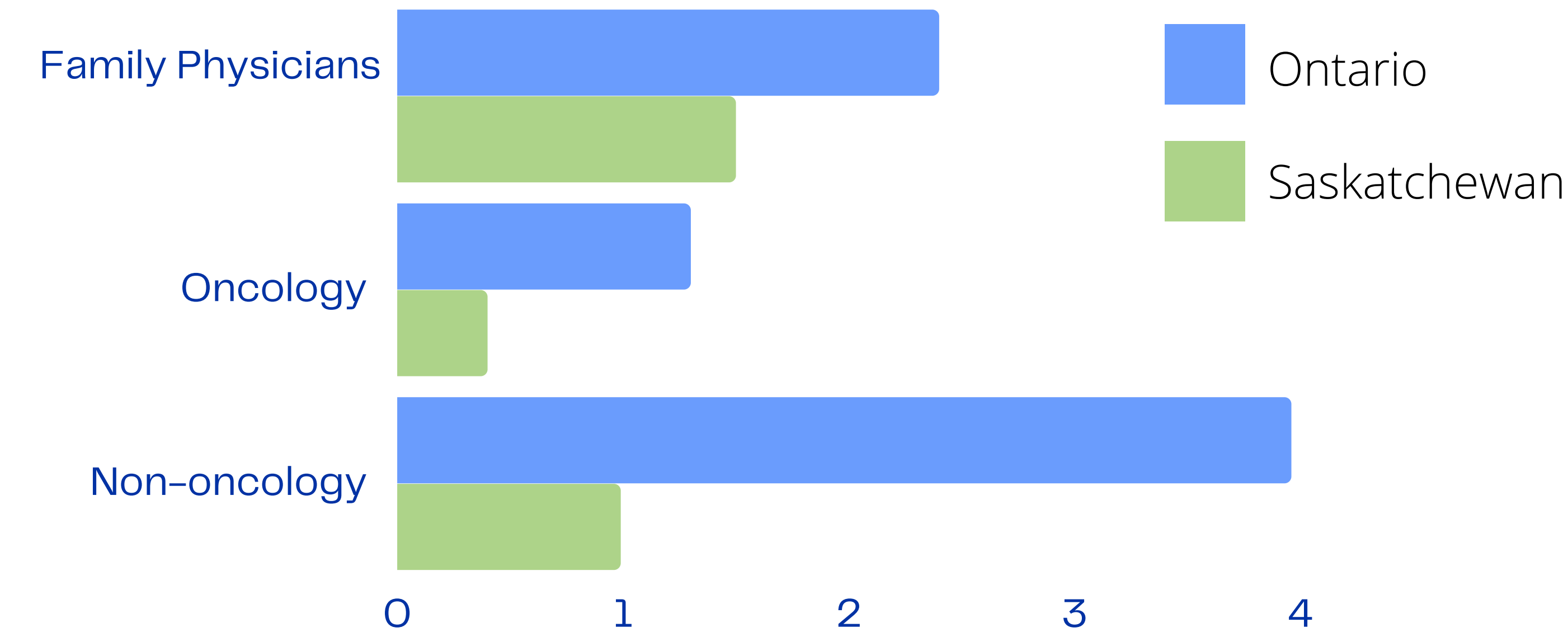


Physician visit rate (Physician visits/30 days of follow up)

Hospitalizations

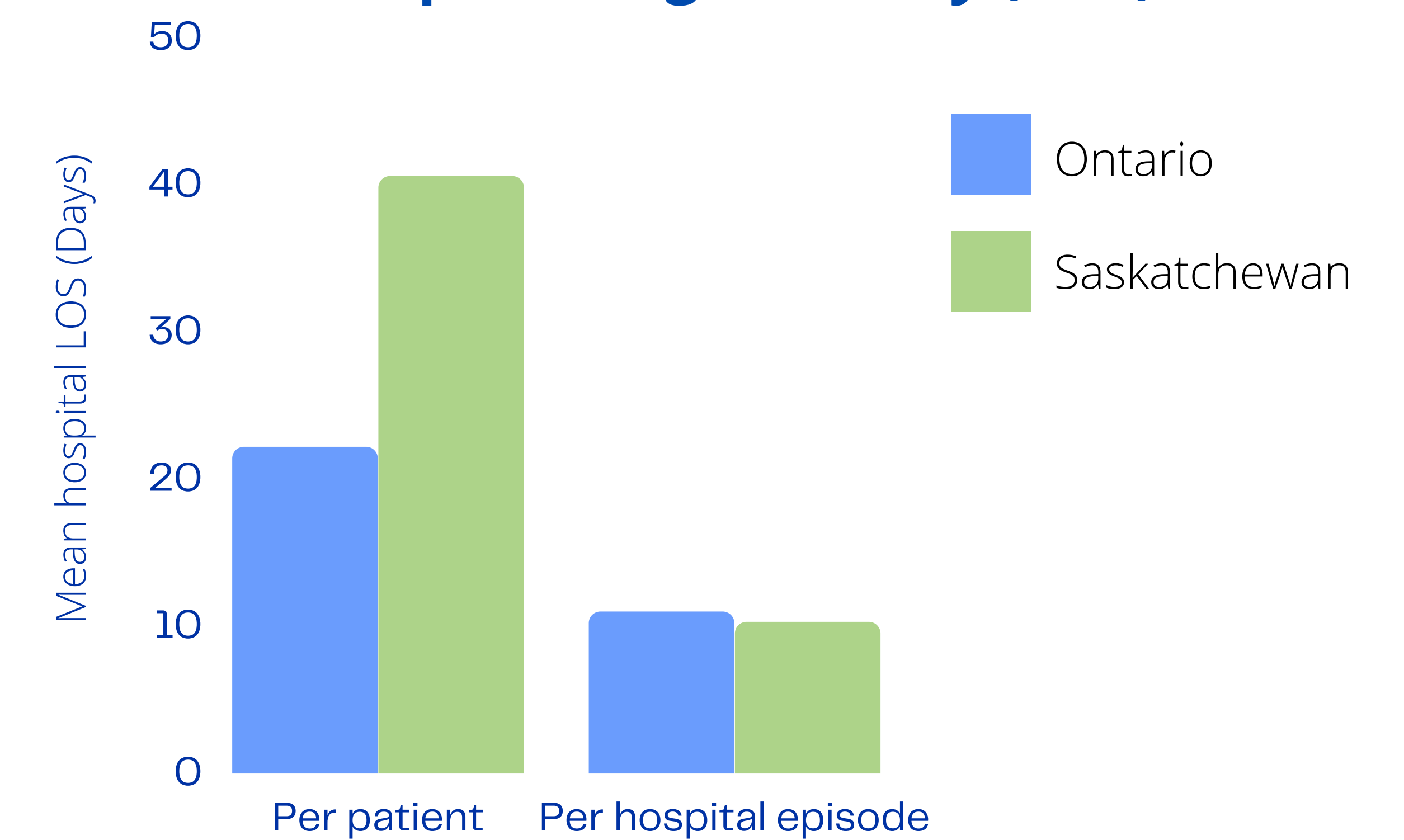


Specialist Visits

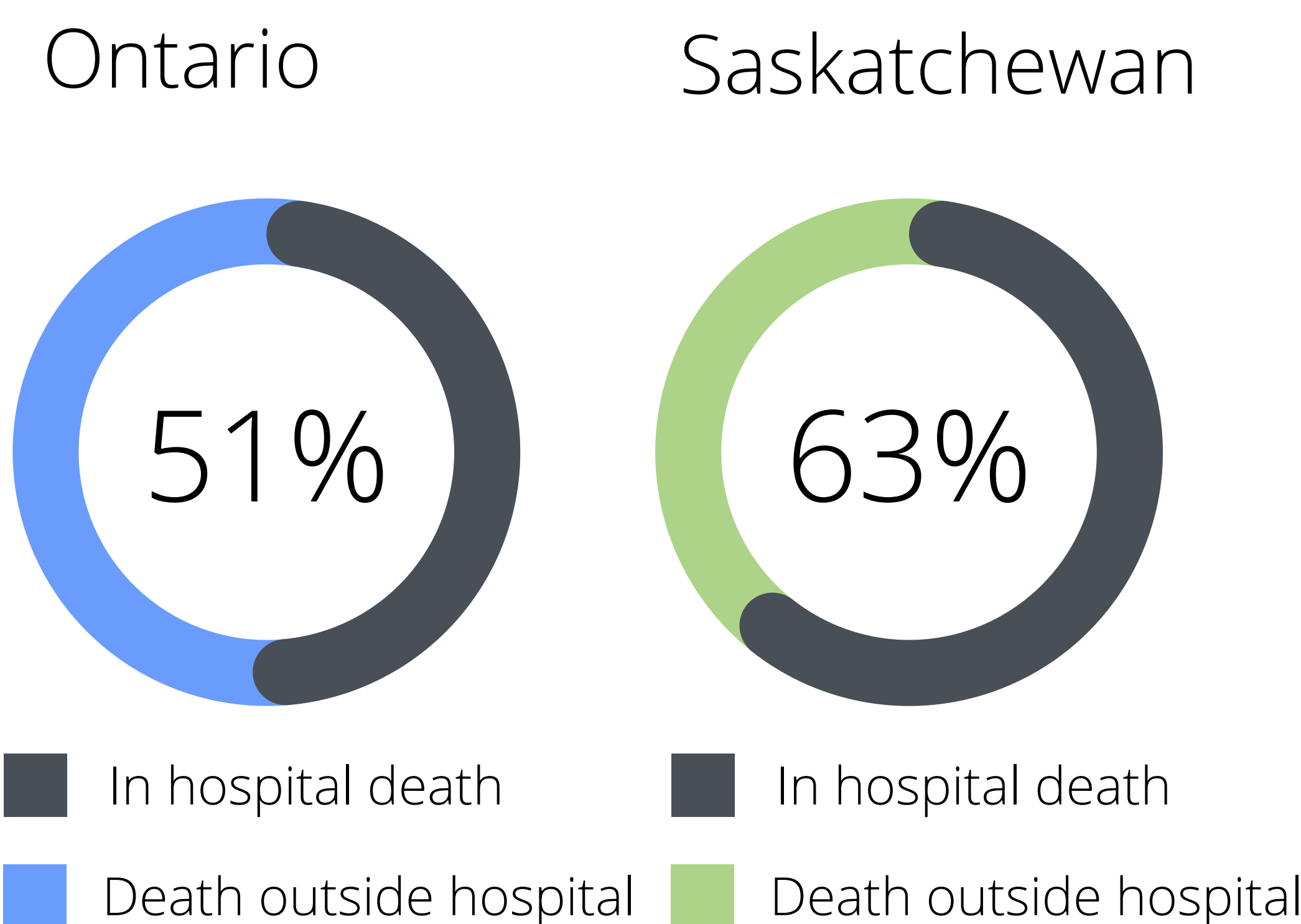


Physician visit rate (Physician visits/30 days of follow up)

Hospital length of stay (LOS)



In-hospital Death (decedents)



CONCLUSIONS

- Differences can be noted in the healthcare utilization patterns between Ontario and Saskatchewan
 - Physician visits
 - Hospital LOS
 - In hospital death
- May stem from patient demographic differences or interprovincial variations in healthcare systems, among other reasons.
- Future exploration of the factors contributing to the observed differences remains an important area of investigation

REFERENCES

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 2. DE OLIVEIRA, C., PATAKY, R., BREMMER, K. E., RANGREJ, J., CHAN, K. K. W., CHEUNG, W. Y., KRAHN, M. D. (2017). ESTIMATING THE COST OF CANCER CARE IN BRITISH COLUMBIA AND ONTARIO: A CANADIAN INTER-PROVINCIAL COMPARISON. HEALTHCARE POLICY, 12(3), 95-108.
 3. CANADIAN CANCER SOCIETY'S ADVISORY COMMITTEE ON CANCER STATISTICS. CANADIAN CANCER STATISTICS 2015. TORONTO, ON: CANADIAN CANCER SOCIETY; 2015