

EUROPEAN FEDERATION OF CROHN'S AND ULCERATIVE COLITIS ASSOCIATIONS (EFCCA)

MAY 2014

DIAGNOSIS AND HEALTH SERVICES

IMPACT on diagnosis and health services

- Most patients received a timely final diagnosis, but 18% waited over 5 years
- → An alarming majority (64%) needed emergency care before their diagnosis - a significant clinical risk
- Although 88% of patients have access to a specialist consultant and 45% to a specialist nurse, 24% still feel they do not have adequate access to specialists
- The quality of communication in consultations needs to be vastly improved - 53% of patients felt they were unable to tell the specialist

something that was important, and 65% said they wished they were asked more probing questions

64% of patients needed emergency care before their diagnosis

EFCCA recommends:

- Maintain good access to IBD specialists
- Review diagnostic protocols for those who wait over a year to reduce this divergence with otherwise good standards
- Investigate and find methods to prevent patient presentation to emergency care before diagnosis
- Raise awareness of emergency care colleagues that most patients with IBD are treated in this department
- Improve access, as well as provision, of specialist IBD healthcare professionals
- Increase the duration and frequency of specialist consultations, and improve consultation techniques (for both parties) to ensure depth and coverage of issues

85% of patients felt they were unable to tell the specialist something that was important

