

## **LUNG CANCER SURGERY PATIENT FLOWS AND DISTANCE TRAVELLED FOR TREATMENT IN QUEENSLAND**

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### **Background**

This study describes for the first time the treatment-related flows of lung cancer patients across Queensland and the distance that these patients travel to receive treatment.

### **Methods**

Queensland Hospital and Health Services (HHS) coverage and distances between residence and hospital of treatment were determined for all Queensland residents who were diagnosed with non-small cell lung cancer (NSCLC) between 2001 and 2010 and underwent lobectomy, partial resection, or pneumonectomy to treat lung cancer. Patients were classified as metropolitan, regional, or rural based on residence at diagnosis mapped via the Australian Standard Geographical Classification 2011 Edition.

### **Results**

Of 2,570 Queensland patients who underwent surgery to treat lung cancer, 45% received treatment outside their residence health services boundaries and 43% travelled more than 50 km from home to receive treatment. All lung cancer surgeries in Queensland were performed in metropolitan centres, hence all regional and rural patients went outside their health service boundaries for treatment and 79% travelled more than 50 km for surgery. In contrast, only 23% of urban patients crossed health services for treatment and just 8% travelled more than 50 km for surgery.

### **Conclusion**

Rural lung cancer patients in Queensland travel much greater distances for surgery. The contribution of travel distance to the poorer cancer outcomes and lower treatment rates in rural areas warrants further study.