

[Diagnosis of physical and mental health conditions in primary care during the COVID-19 pandemic: a retrospective cohort study](#)

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What are the most important findings/conclusions in this paper? Why are they important?

In an area the size of Salford (population 250,000), each month we might expect roughly 80 people to be diagnosed with type 2 diabetes, 20 people to receive a diagnosis of cancer, and 700 to be diagnosed with common mental health problems such as depression or anxiety.

We have found that during March, April and May 2020 (the start of the coronavirus outbreak in the UK) far fewer people became ill with these conditions. This does not mean that people are healthier. This means that people were avoiding doctors and hospitals, possibly for fear of catching coronavirus, and they will not be receiving the treatment they need.

What did you do?

We picked a list of diseases/conditions that we wanted to investigate. The list included type 2 diabetes, heart attacks, strokes, cancers, depression and anxiety.

We used electronic health data from Salford to find out how many people were diagnosed with these conditions each month from January 2010 up to May 2020. Based on the numbers up to February 2020 we predicted how many diagnoses we would have expected to see between March and May and then compared it with how many were actually seen.

Why did you conduct this research?

We do not want people to be living with undiagnosed (and therefore untreated) conditions. To avoid this, we needed to find out how severe the problem is.

What was known before your paper was published?

During the pandemic, there had been some news reports that people were avoiding doctors and hospitals. There were fewer A&E visits, and referrals for conditions such as cancer were also reduced. However, no-one had tried to work out how many people had undiagnosed conditions as a result.

What is next? What is the potential impact of the work in this paper? What will change as a result of this paper (or the study it describes)?

We have called on healthcare services (such as GPs) to work out how they can identify and prioritise the patients living with undiagnosed illnesses. They should also get ready for a surge in patients as people get more comfortable about accessing healthcare services again.

We think more research should be done to work out the effect on peoples' health caused by any delays to their diagnoses.

Does this paper link in to a particular study / project? If so, please summarise the study and explain how this paper has improved understanding, or will move the study forward.

N/A