

Covid-19 has had a huge impact on health care services. A Lancet Oncology paper has estimated that by 2025 there may be \sim 3,500 excess cancer related deaths from just four cancer sites – with other sources estimating somewhere between 7,000 and 35,000 for all cancers.

The Department of Health are encouraging the use of cancer risk tools in General Practice to help identify undiagnosed cancers in the community. The ERICA Trial is a large randomised controlled trial assessing the clinical and cost effectiveness of six electronic risk assessment tools (eRATs) for bladder, kidney, lung, colorectal, ovarian and oesophago-gastric cancers in general practice. Our trial offers the opportunity for intervention practices to access these electronic risk tools.

Both intervention and control practices will make a critical contribution to the evaluation of the eRATs. Practices are still eligible to use other tools to improve cancer care, e.g., 'C the Signs' or 'Ardens'—we just ask that pop-up tools that automatically alert GPs to the possible risk of cancer are not used.

For this two-year trial we will recruit 530 English practices to compare the effect of eRATs (vs usual care) on: cancer staging at time of diagnosis, cost to the NHS, patient experience of care, and service delivery. We hope to see a 4-5% increase in the proportion of early stage cancers diagnosed if the intervention is successful. This equates to saving 6,000 lives per year.

Trial details:

- The eRATs are cloud-based software available for **EMIS** and **SystmOne** practices.
- A pop-up activates in patients aged 40+ with a 2+% risk of one of the six cancers.
- We estimate one to two pop-ups per GP per week (these can be switched off in some patients).
- A symptom checker allows for recording additional clinical events, leading to the recalculation of a new risk score. The risk score is not recorded on the patient record.
- GPs decide the next appropriate course of action themselves.
- We don't ask practices to collect data The main trial outcome data is provided by National Cancer Registration and Analysis Service (NCRAS).

Practices may choose to take part in nested studies involving giving feedback on the eRATs. Intervention arm practices receive £470.55 and control practices £204.40. Some CRNs have contributed an additional payment but this is at their discretion.

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Trial website: ERICA trial Twitter: @ EricaTrial

Watch our introduction videos here: http://erica-hub.co.uk/

You can review the local document pack here: https://www.theericatrial.co.uk/gp-resources/