PE2193/B: Address dangerous delays in paediatric cancer diagnostics

Petitioner written submission, 13 November 2025

Every year in Scotland, around 180 children and up to 200 teenagers are diagnosed with cancer.

Yet, most GPs might only see one case of childhood cancer in their entire career.

Because of this, I believe too many children's diagnoses are slipping through the net. Symptoms in children are often not taken as seriously as they would be in adults, and vital tests are sometimes delayed or not done at all.

I believe the guidelines must change and tests should always be carried out, even if the GP doesn't initially think cancer is likely. Early diagnosis saves lives, and every child deserves that chance.

If a clinician suspects cancer in a child or young person, an urgent suspicion of cancer referral should always be made.

In Isla's case, this referral was made, but it was downgraded to routine, all because of the current guidelines.

This delay can mean the difference between life and death. The system needs to change so that when there's even a small suspicion of cancer in a child or teenager, the referral remains urgent and the necessary tests are done immediately.

There was once a clear understanding that children showing symptoms of cancer should be treated as quickly as possible, and that it would not be appropriate to subject these urgent cases to the longer 62-day target.

However, as it was in Isla's case and sadly, in many others, if the referral is downgraded to routine, these young patients are not seen urgently, which can cause devastating delays in diagnosis and treatment.

There is also a grey area for 16-year-olds, where clinicians are often uncertain whether to follow adult or child pathways.

This confusion existed in Isla's case, and it highlights the urgent need for clearer, child-focused guidance to ensure no young person falls between the cracks.