The well-being and concerns of patients are at the centre of cancer management programmes. Patients understand cancer in terms of how it might affect their lifespans and the quality of their lives. They fear that their lives may be shortened and that they may encounter pain, be physically compromised or face economic difficulties. They appreciate that there have been technological advances in management, but will wish to know what these mean to them. The management of patients with cancer therefore requires a sensitive and humane relationship between the multidisciplinary management team and the patient. This is best served by and mandates the inclusion of the GP in the multidisciplinary team.

Each new patient requires ongoing care, often over many years. Care should also be seen in the larger context of cancer control programmes. These have four components: prevention, early diagnosis, treatment, and palliation. These are interrelated. For example, prevention might require behaviour modification, such as smoking discontinuation. This is more likely to occur when patients see that the medical community cares for people with their disease. Also, patients are more likely to seek early diagnosis when their cancer can be successfully treated.

Patient care will occur in the course of general practice. Between a quarter and a third of the population will ultimately develop a carcinoma. The incidence of new patients with cancer is 3 - 4 per 1 000 population per year. The articles that follow describe the more common malignancies that will be encountered in general practice, and how care can benefit patients.