Supporting local health service decision-making in Wales with profiles of cancer incidence and prevalence at Primary Care Cluster Network level

Long T[1], Wright C[1], Huws DW[1], White C[1], Thomas R[1], Shiell-Davis K[2], Oddy A[2], Egan D[2]

[1] Welsh Cancer Intelligence and Surveillance Unit, Health Intelligence Division, Public Health Wales
[2] Macmillan Cancer Support

INTRODUCTION

In Wales, 60 Cluster Networks of GP practices and partner organisations support local health needs assessments to improve local primary care and other services. For the first time, we linked and analysed cancer registry and other data to profile the incidence and prevalence at Cluster Network level. This will support their health service planning, and to better-understand the cancer burden across Wales.

This project was part of a partnership between Macmillan Cancer Support and the Welsh Cancer Intelligence and Surveillance Unit, Public Health Wales. Funding was provided by Macmillan Cancer Support.

METHODS

We extracted Welsh Cancer Intelligence and Surveillance Unit cancer registry data from 2011-2015 for incidence, 1995-2015 for prevalence. We linked cases to Cluster Networks. Patients were assigned to area deprivation quintile (Welsh Index of Multiple Deprivation 2014) and a 2011 Rural Urban Classification category. We calculated Cluster Network incidence and proportion in each category by cancer type, sex, age band, area deprivation, rurality and stage at diagnosis. We calculated percentage prevalence for cases alive on 31 December 2015, with a diagnosis up to 21 years previously for Cluster Networks by cancer type, sex, age band, area deprivation and rurality.

RESULTS

The results of this analysis were presented in an interactive online dashboard, see footnote below.

There was wide variation in incidence and prevalence between Cluster Networks when considering sex, rurality, deprivation and stage at diagnosis. Cancer diagnoses were most common in the 75+ age group, with proportions ranging from 29% to 43%. However, two Cluster Networks in Cardiff were found to have high proportions of diagnoses in the youngest age group (0-49 years) at 15% and 17%.

Overall, more than a third of new cancer patients live in rural areas in Wales. Large variation in rurality between the Clusters highlights the challenge faced in planning cancer care and provision of services in rural areas.

Figure 1: Incidence proportions by Cluster Network and rurality
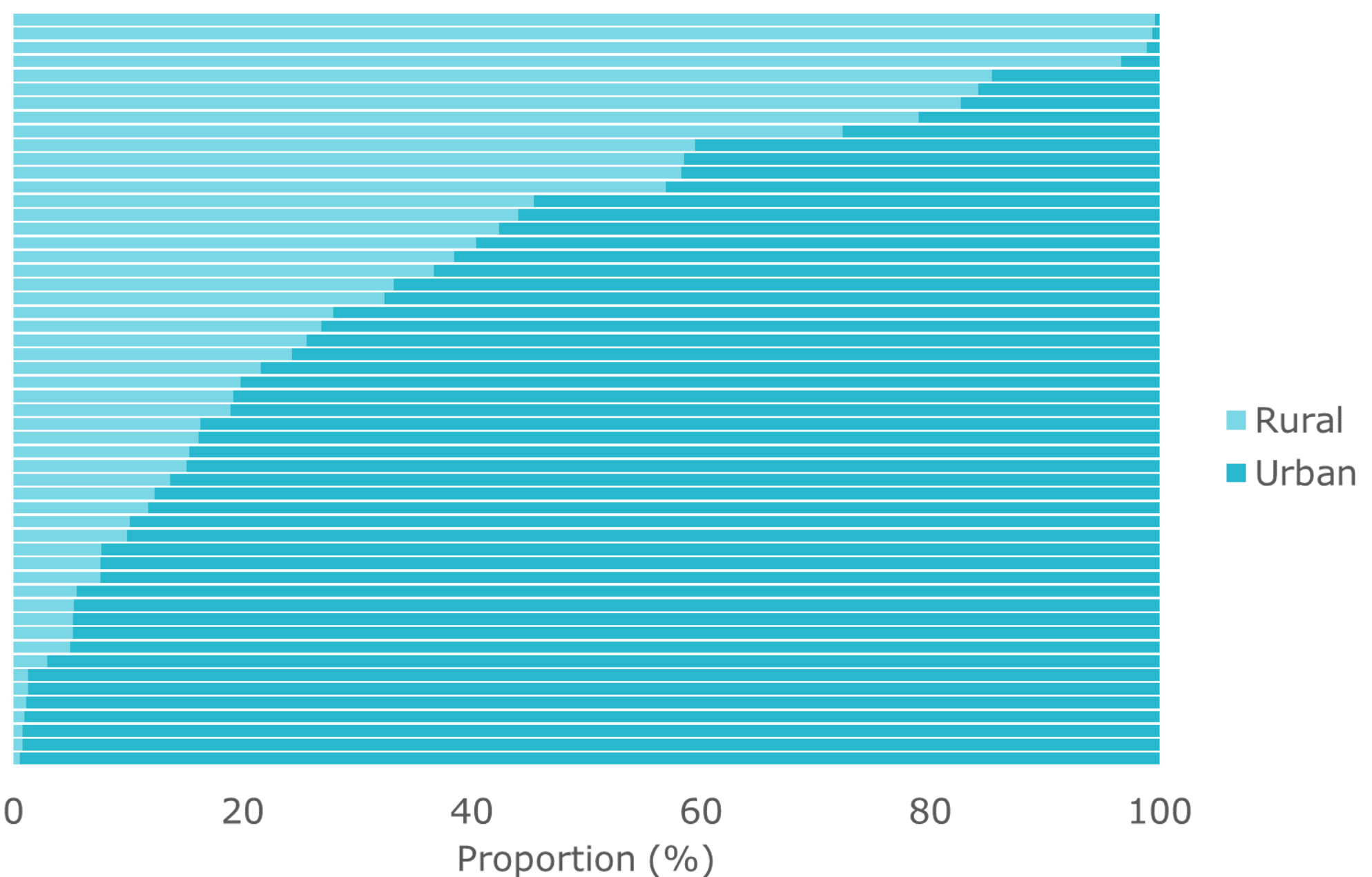
One year prevalence ranged from 9% to 18% for men and 7% to 15% for women. However, 21 year percentage prevalence in women (23% to 36%) was higher than in men (18% to 31%).

Figure 2: Prevalence for men by Cluster Network and time since diagnosis
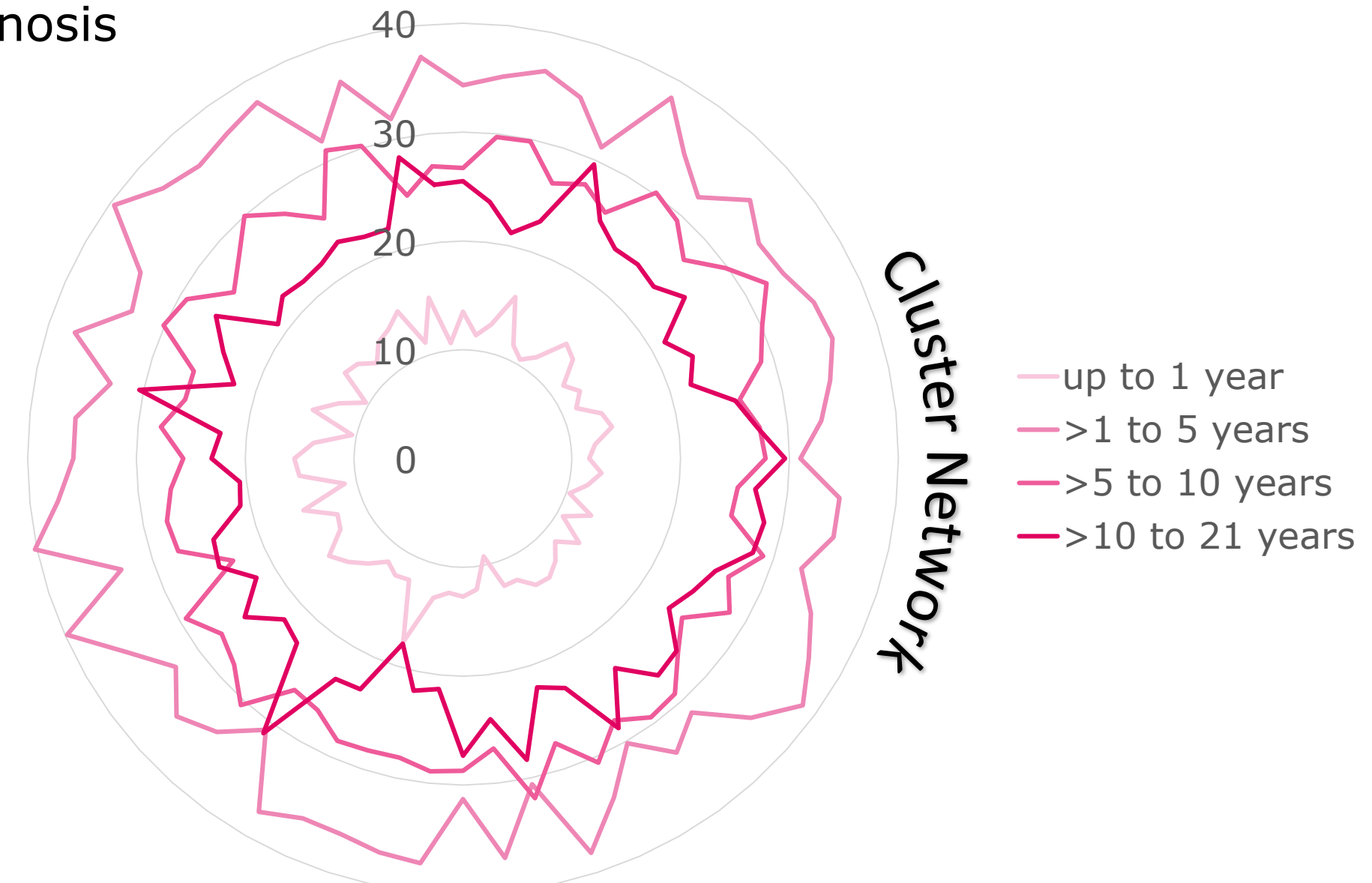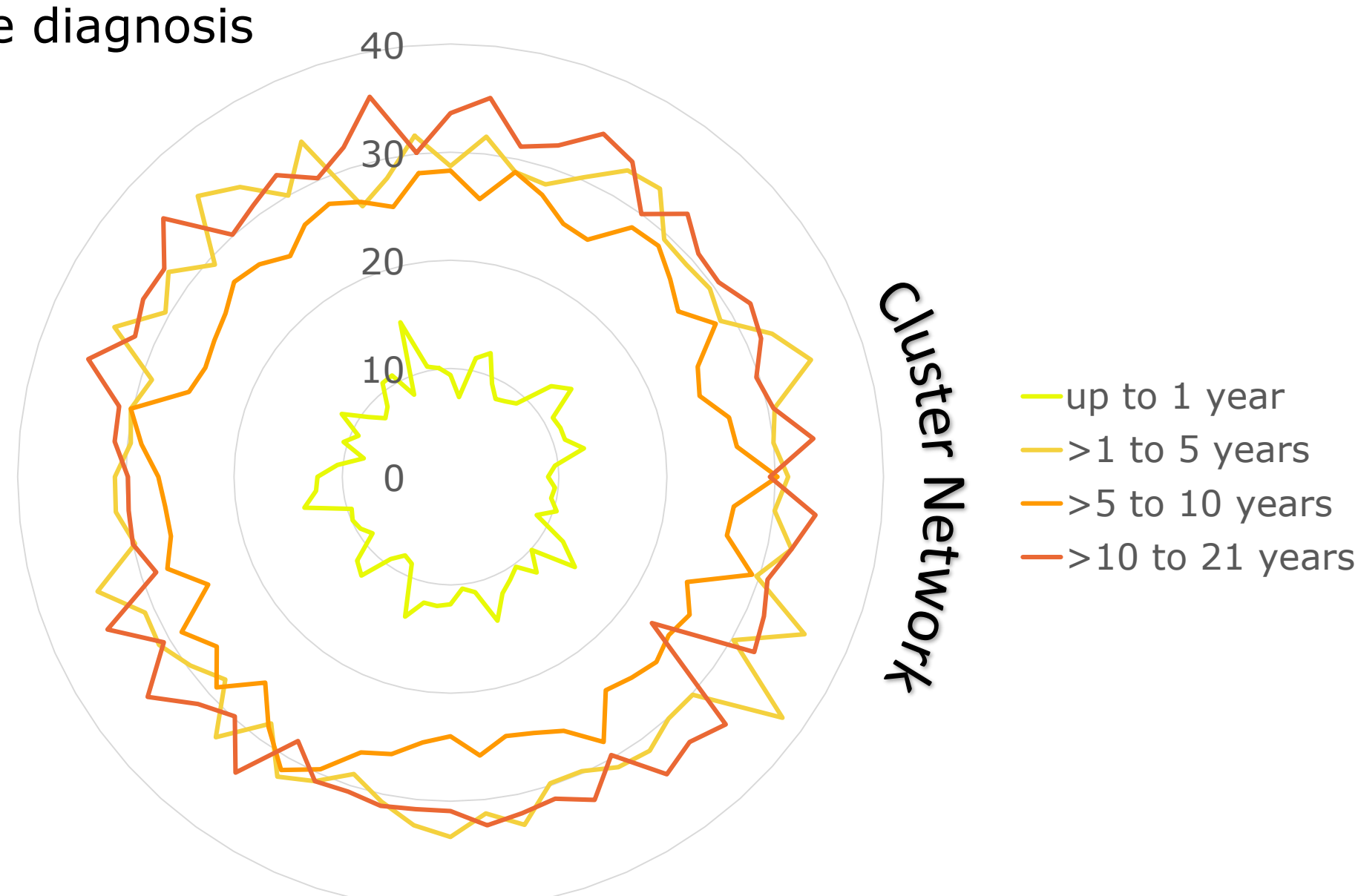

Figure 3: Prevalence for women by Cluster Network and time since diagnosis

DISCUSSION AND CONCLUSION

This work will prove useful for Cluster Networks to understand the overall burden of cancer and potential services needed by cancer patients in Wales. Further analysis is required in this area as to develop a fuller picture of the cancer population in Wales.

This work uses data provided by patients and collected by the NHS as part of their care and support.