

Cancer in the UK

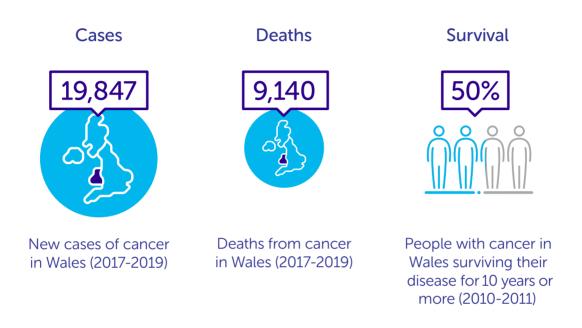
Wales overview 2023



Cancer in Wales

Summary

This summary aims to provide an overview of key cancer metrics and data across the cancer pathway in Wales, as part of the Cancer in the UK: Overview 2023 report which provides the full UK picture. It sets out the top line view of challenges facing cancer services and people affected by cancer today.



The number of cancer cases is rising in Wales

Every day, 55 people are diagnosed with cancer in Wales and around 24 people die from the disease. The number of cases is projected to rise by more than a quarter, to around 24,800 new cases per year in 2040.

This increase will place an unprecedented burden on an already stretched healthcare system.

Around four in ten cancer cases in Wales can be prevented

Smoking and excess weight are the two largest preventable causes of cancer in Wales. They cause around 3,100 and 1,000 cases of cancer each year in Wales, respectively.³

Smoking levels are at their lowest recorded point – around 16% of the Welsh adult population smoke.⁴ But levels are not declining fast enough. Wales is not yet on track to meet its recently introduced target to be smoke-free by 2030. If the new Tobacco Control Strategy is not properly implemented, we will continue along the current trajectory and Wales will not reach 5% average adult smoking prevalence until after 2037.⁵

Meanwhile, overweight and obesity is at its highest recorded level. 6 in 10 adults in Wales are overweight or obese.⁶ If current trends continue, by 2040, 1.8 million people will be overweight or obese.⁷

Tackling cancer through prevention requires individuals to make changes to their lives but support from governments and health professionals is crucial to facilitate those changes. The Tobacco Control Strategy for Wales and the Healthy Weight Healthy Wales strategy include important measures such as a proposed ban of price promotions on foods high in fat, salt and sugar (HFSS) and investment in smoking cessation support in secondary care settings. We need to see a renewed level of urgency given by Welsh Government to implementing these measures and going further to preventing more cancers.

Bowel cancer screening uptake has increased since the introduction of a new test

There are currently three national screening programmes in Wales, for bowel, breast and cervical cancer.

Coverage of cervical screening is around 69.5% and around 68.9% for their breast cancer screening invitation.9

Around 67.1% of people took up their bowel cancer screening invitation in the 20/21 financial year, an increase of nearly ten percentage points over two years and likely driven by the introduction of a new faecal immunochemical test (FIT) in September 2019 that is easier for people to complete at home.¹⁰

Public Health Wales should support evidence-led activity to address barriers to screening participation and reduce inequalities in all cancer screening programmes. Improvements to, and introduction of new screening programmes must be brought in on time and with enough diagnostic capacity.

For example, the Welsh Government should take action in response to the UK National Screening Committee's recent recommendation to introduce targeted lung screening across the UK, including ensuring smoking cessation is an integral part of the screening programme.

People recognise many common cancer symptoms, but too few seek help if they experience them

CRUK data from 2022 using a UK representative sample (including Welsh participants) found that people recognise 12 out of 15 common cancer symptoms. The most commonly recognised symptoms are lump/swelling, change in the appearance of a mole, unexplained weight loss, and coughing up blood.¹¹

Around 55% of people had noticed a potential symptom of cancer in the last 6 months. However, under half of those contacted their GP within 6 months which is concerning. The biggest barriers to seeing a health professional included finding it difficult to get an appointment, not wanting to be seen as someone who makes a fuss and worrying about wasting the healthcare professional's time.

Early diagnosis saves lives

There is variation between cancer sites in the proportion diagnosed at early stage. In Wales, 28% of lung cancer cases, 41% of bowel cancer cases, 59% of prostate cancer cases and 84% of breast cancer cases are diagnosed at an early stage.¹²

Too many people with cancer in Wales are diagnosed through emergency routes

In Wales, for eight major cancer types, over a third (37.3%) of patients are diagnosed after an emergency hospital admission.¹³ This is concerning when people diagnosed through an emergency presentation are more likely to have poor survival.¹⁴

Encouraging the public to seek help for unusual health changes, supporting primary care to be alert to the possibility of cancer in their patients, and timely referral for tests and specialist advice could help to ensure that fewer patients are diagnosed as an emergency.

Cancer services are struggling to keep up with demand

In September 2022, more than 66,000 people waited more than 8 weeks for key diagnostic tests, ¹⁵ a symptom of the huge pressure that diagnostic services are currently facing.

NHS Wales uses the 'Single Cancer Pathway' to monitor performance of cancer services, aiming to begin treatment for 75% of patients within 62 days of the point of suspicion. This target was introduced in 2019 and although it has yet to be met there are plans to increase this to 80% in 2026. In October 2022 52.2% eligible patients met this target, the lowest on record.¹⁶

The Welsh Government must urgently prioritise investment in a multi-skilled, future-fit cancer workforce to address long waiting times.

Data on treatments is lacking, but audits show Wales is not meeting treatment targets for lung cancer

There is no routine data available on the most common types of treatment for cancer patients in Wales. However data from the National Lung Cancer Audit shows that for 16% of lung cancer patients received surgery in 2019, below the target of 17%.¹⁷

Patients feel positive about the care they receive in Wales, but across the UK people are concerned about the NHS's resources

In 2016 people in Wales scored their overall care experience positively, with an overall rating of 7 out of 10. Patients felt respected by staff and believed their choice of treatment was explained well. Improvements could be made in the support primary care offered after their treatment and more detail could have been given around the impact cancer could have on their day- to- day activities.¹⁸

More recent data from CRUK during the pandemic found that 2 in 3 patients in Wales had their cancer care impacted, though the sample was small. It's not clear how the pandemic has affected patients views of their care long term.¹⁹

Concerningly, in 2022, across the UK, 79% of people don't think that the health service has enough staff or equipment to see, test and treat all the people that need to be.¹¹

Survival in Wales

In Wales and England around 1 in 2 people survive their cancer for at least ten years. 20 More recent data also shows that there is variation in survival by site. For example, in Wales, almost 9 in 10 women survive their breast cancer for at least five years and around 9 in 10 men survive their prostate cancer. But for lung cancer, less than 2 in 10 people survive their disease for five years or more. 21

Beating cancer in Wales

Cancer is the leading cause of death in Wales. With around 20,100 people diagnosed with cancer in Wales every year, and this is only set to grow in the coming years, the Welsh Government must ensure that improving cancer outcomes is a priority, as well as broader health policy.

Given that 4 in 10 cancers in Wales are preventable, we believe there must be a clear focus from Welsh Government on promoting public health – particularly on tobacco reduction and overweight and obesity. There have been strong commitments from Welsh Government in both of these areas. We have in Wales, for example, a Tobacco Control Strategy and the Healthy Weight, Healthy Wales strategy. However, given the scale of the challenges, more urgency is needed to reduce levels of smoking and tackle obesity to prevent more cancers.

Despite the best efforts of committed NHS staff, waiting times for diagnosis and cancer treatment are still recovering from the pandemic. But problems existed long before the COVID-19 – the target has not been met since its introduction in 2019. For those waiting for tests or those with a cancer diagnosis waiting to begin treatment, this time can be agonising and anxious for patients and those close to them. There is also large variation in cancer waiting times across Health Boards in Wales, and so addressing regional variation must be a priority for the Welsh Government and NHS in Wales.

For eight major cancer types in Wales, almost 40% of cancers are diagnosed through an emergency route. Diagnosis through this route is associated with late stage and poorer survival, so reducing emergency presentations and late stage disease should be at the heart of the Welsh Government and NHS in Wales' plans for cancer services. Investing in innovations must be at the forefront of this thinking.

Recent research from the International Cancer Benchmarking Partnership has highlighted the importance of consistent cancer policies backed up by implementation and funding, so we welcome the publication of the Cancer Improvement Plan. We will work to help move this plan forward and will continue to make the case for long-term transformation in cancer services. To make the biggest change for people affected by cancer in Wales, the challenges currently facing cancer services in Wales must be addressed, in particular:

Funding: The plan must be backed up with funding to help it deliver the improvements people affected by cancer deserve, as well as gain the confidence of the cancer community and wider public. Investment is needed to improve patient outcomes, unlocking the benefits of innovative approaches.

Action on workforce: the Welsh Government must set out long-term plans, building on recent investments in training, to deliver a sustained expansion of the cancer workforce to meet future demand for cancer services and tackle the chronic shortages in the workforce specialities key to diagnosing and treating cancer. This must be matched with sufficient and sustainable capital funding to ensure diagnostic and treatment capacity is meaningfully expanded across Wales. Better use of data: data is fundamental to driving our progress against cancer. The Welsh Government should prioritise making improvements in the collection and reporting of datasets to unlock better intelligence and data-driven action in the years to come.

The Cancer Improvement Plan for Wales, published in January 2023, is a detailed, three-year plan for improving cancer services in Wales. Whilst the Plan is not long-term, it has the potential to be a major milestone for people affected by cancer in Wales, signalling a renewed drive and setting an ambitious roadmap towards better cancer outcomes.

References

- ¹ Public Health Wales (2022) Cancer incidence in Wales 2022-2019. Available from: https://phw.nhs.wales/services-and-teams/welsh-cancer-intelligence-and-surveillance-unit-wcisu/cancer-incidence-in-wales-2002-2019/
- ² Cancer Intelligence Team, Cancer Research UK. February 2023. Cancer incidence and mortality projections for UK and constituent nations, using data to 2018.
- ³ Brown et al. (2018) The fraction of cancer attributable to modifiable risk factors in England, Wales, Scotland, Northern Ireland, and the United Kingdom in 2015; British Journal of Cancer; 118(8):1130-1141; doi: 10.1038/s41416-018-0029-6
- ⁴ Welsh Government. National Survey for Wales, 2019/20. Available from: https://gov.wales/national-survey-wales.
- ⁵ Cancer Research UK (2020) Smoking prevalence projections for England, Scotland, Wales and Northern Ireland, based on data to 2018/19. Available from: https://www.cancerresearchuk.org/sites/default/files/cancer_research_uk_smoking_prevalence_projections_february_2020_final.pdf
- ⁶ Overweight or obese is defined as Body Mass Index (BMI) 25 or above. Based on overweight and obesity prevalence in Wales Welsh Government. National Survey for Wales, 2019/20. Available from: https://gov.wales/national-survey-wales.
- ⁷ Cancer Research UK (2022) Overweight and obesity prevalence projections for the UK, England, Scotland, Wales and Northern Ireland, based on data to 2019/20. Available from: https://www.cancerresearchuk.org/sites/default/files/cancer-stats/adult_overweight_and_obesity_prevalence_projections_18-05/adult_overweight_and_obesity_prevalence_projections_18-05.pdf
- ⁸ Public Health Wales; Cervical Screening Programme Reports. Available from: https://phw.nhs.wales/services-and-teams/cervical-screening-wales/information-resources/programme-reports/
- ⁹ Public Health Wales; Breast Screening Programme Reports. Available from: https://phw.nhs.wales/services-and-teams/screening/programme-reports/
- ¹⁰ Public Health Wales; Bowel Screening Programme Reports. Available from: https://phw.nhs.wales/services-and-teams/screening/bowel-screening/programme-reports/
- 11 Cancer Research UK Cancer Awareness Measure Survey (September 2022) Unpublished findings. Data collected via the YouGov's online panel that surveyed 2387 UK representative adults
- ¹² Public Health Wales Welsh Cancer Intelligence and Surveillance Unit; Cancer Incidence in Wales. Available from: https://phw.nhs.wales/services-and-teams/welsh-cancer-intelligence-and-surveillance-unit-wcisu/
- ¹³ McPhail et al. (2022) Risk factors and prognostic implications of diagnosis of cancer within 30 days after an emergency hospital admission (emergency presentation): an International Cancer Benchmarking Partnership (ICBP) population-based study; The Lancet Oncology; 23(5) 567-600
- ¹⁴ Zhou Y, Abel GA, Hamilton W, Pritchard-Jones K, Gross CP, Walter FM, et al. Diagnosis of cancer as an emergency: a critical review of current evidence. Nat Rev Clin Oncol. 2017;14(1):45–56
- ¹⁵ Welsh Government (2022) Waiting times by month. Available from: https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Hospital-Waiting-Times/Diagnostic-and-Therapy-Services/waitingtimes-by-month
- ¹⁷ Welsh Government (2022) NHS cancer waiting times: April 2005-September 2022. Available from: https://www.gov. wales/nhs-cancer-waiting-times-april-2005-onwards
- ¹⁸ Royal College of Physicians (2022) National Lung Cancer Audit. Available from: https://nlca.rcp.ac.uk/
- Macmillan Cancer Support, Welsh Government & NHS Wales (2017) Wales Cancer Patient Experience Survey 2016. Available from: https://www.gov.wales/sites/default/files/publications/2019-01/wales-cancer-patient-experience-survey-2016.pdf
- ¹⁹ Cancer Research UK (2020) Cancer Research UK Cancer Patient Experience Survey 2020: The impact of COVID-19 on cancer patients in the UK. A sample size of 80 people was used in Wales.
- ²⁰ Quaresma M, Coleman MP, Rachet B. 40-year trends in an index of survival for all cancers combined and survival adjusted for age and sex for each cancer in England and Wales, 1971-2011: a population-based study(link is external). Lancet 2014 pii: S0140-6736(14)61396-9.
- ²¹ Public Health Wales. (2022) Cancer Survival in Wales, 2002-2019. Available from: https://phw.nhs.wales/services-and-teams/welsh-cancer-intelligence-and-surveillance-unit-wcisu/cancer-survival-in-wales-2002-2019/

Our ability to understand and tackle cancer is heavily dependent on the quality of data we have. Much of the evidence presented here uses data that has been provided by patients and collected by the health service as part of their care and support. The data is collated, maintained and quality assured by different organisations, including the Welsh Cancer Intelligence and Surveillance Unit (WCISU), which is managed by Public Health Wales.