Cancer in the UK

Northern Ireland overview

2023

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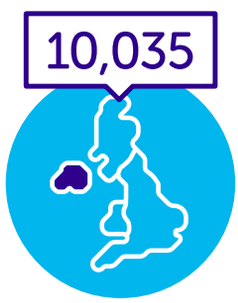
CANCER RESEARCH UK

Cancer in Northern Ireland

Summary

This summary aims to provide an overview of cancer metrics and data across the cancer pathway in Northern Ireland, 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.

Cases

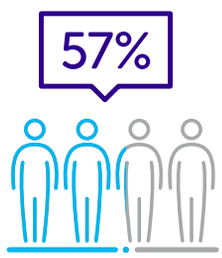


New cases of cancer in Northern Ireland (2017-2019)

Deaths

Deaths from cancer in Northern Ireland (2017-2019)

Survival



People with cancer in Northern Ireland surviving their disease for 5 years or more (2010-2014)

The number of cancer cases is rising in Northern Ireland

Every day, 27 people are diagnosed with cancer in Northern Ireland and 12 people die from the disease.[1,2] The number of cases is projected to rise by around half, to more than 14,000 new cases per year in 2040.[3]

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

Around four in ten cancer cases in Northern Ireland can be prevented

Smoking and excess weight are the two largest preventable causes of cancer in Northern Ireland. They cause around 1,300 and 570 cases of cancer each year in Northern Ireland, respectively.[4]

Smoking levels are at their lowest recorded point – around 2 in 10 (17%) of the Northern Irish adult population smoke.[5] But levels are not declining fast enough. If recent trends continue, Northern Ireland will not be 'smokefree' (less than 5% adult smoking prevalence) until the late 2040s.[6] Northern Ireland is the only part of the UK that does not have a specific target year by which to be smokefree.

Meanwhile, overweight and obesity is at its highest recorded level.[7] If recent trends continue, by 2040, 1.1 million people in Northern Ireland will be overweight or obese.[8]

Tackling cancer through prevention requires individuals to be supported to make changes to their lives. Urgent action is needed to minimise the catastrophic impact of smoking and an important first step must be to set a smoke free target for Northern Ireland.

Screening uptake varies between programmes

There are currently three national screening programmes in Northern Ireland, for bowel, breast and cervical cancer. Around 6% of all cancer cases in Northern Ireland are detected through these screening programmes.[9]

Around 54% of people take up their bowel cancer screening invitation[10] and around 76% their breast cancer screening invitation.[11] Coverage of cervical screening is around 68% but Northern Ireland is the only nation that is still not using HPV as the primary test in cervical screening, although it is due to be introduced in 2023.[12]

The Department of Health and the Public Health Agency must work to implement improvements to screening programmes and introduce new screening programmes (for example a targeted lung screening programme) more quickly and with enough diagnostic capacity.

People in Northern Ireland recognise many potential signs and symptoms of cancer, but too few seek help if they experience them.

CRUK data shows that in Northern Ireland, people recognise on average 12 out of 15 cancer symptoms. The most commonly recognised symptoms are an unexplained lump/swelling, change in the appearance of a mole, coughing up blood, and unexplained weight loss.[13]

In Northern Ireland, around 57% of people had noticed a potential cancer symptom in the last 6 months. However, less than half (45%) of those had contacted their GP. The biggest barriers to seeing a medical professional in Northern Ireland include finding it difficult to get an appointment, not wanting to be seen as someone who makes a fuss, not wanting to talk to the receptionist/ administrative person about symptoms, and being worried about wasting the health care professional's time.

We need to reduce the number of cases diagnosed at late stage.

In Northern Ireland, around 55% of cancer cases are diagnosed at an early stage.[14]

Nearly 1 in 5 people with cancer in Northern Ireland are diagnosed through emergency referral routes.[9] This is concerning as people diagnosed through an emergency presentation are more likely to have poor survival.[15]

Cancer services are struggling with demand

Northern Ireland reports on the performance of trusts against a waiting time target of 9 weeks for a diagnostic test. At the end of September 2022, 52.7% of people were waiting more than 9 weeks for a diagnostic test, highlighting the huge pressures the service is facing.[16]

The 62-day and 31-day cancer waiting times targets are two key ways to measure performance of cancer services.

The 62-day target advises that at least 95% of eligible patients wait no more than 62 days from an urgent suspected cancer referral to begin treatment. This includes the time for all tests to diagnose cancer. This important target has never been met and performance continues to decline steadily, with only 37.7% of patients starting treatment within 62 days at the end of June 2022.[17]

The 31 day target advises that at least 98% of eligible patients wait no more than 31 days from decision to treat to beginning treatment. This target has not been met since 2013, with only 86.2% of patients starting treatment within 31 days at the end of June 2022.

> **The Department of Health must urgently prioritise and progress investment in a multi-skilled, future-fit cancer workforce to address long waiting times.**

Data on treatments is lacking in Northern Ireland

There is no routine data available on the treatments received by cancer patients in Northern Ireland. If we are to understand whether patients are receiving optimal treatment, data on this must be reported.

Cancer patients feel generally positive about the care they receive, but too few are offered the opportunity to participate in research

People receiving cancer care in Northern Ireland in 2018 scored their overall care experience positively, with a rating of 8.97 out of 10. Patients felt supported by staff and believed their clinical needs were met and had an adequate care plan. Improvements could be made in the support primary care offered throughout their treatment and more detail could have been given around the side effects from treatment.[18]

In addition, only 15% of patients reported being asked about taking part in cancer research and clinical trials in 2018 compared to 18% in 2015 – and Northern Ireland compares negatively to other UK nations in this regard.

Survival in Northern Ireland

Nearly 6 in 10 people with cancer survive their disease for at least five years in Northern Ireland. This varies by stage of disease. 91% of people diagnosed at the earliest stage survive their disease for 5 years, compared to 13% at the latest stage. [19]

Beating cancer in Northern Ireland

Cancer is Northern Ireland's biggest killer. Each year around 10,000 people are diagnosed with cancer and around 4,500 die from it. And the demand on cancer services will only continue to grow with cancer incidence set to increase to more than 14,000 cancer diagnoses a year by 2040.

As the data shows, around 4 in 10 cancers in Northern Ireland are preventable. There must be a clear commitment from the Northern Ireland Executive to promote public health. While we welcome the commitment to publish new prevention strategies on tobacco and overweight and obesity, clear action plans and adequate budget must accompany the strategies if they are to have impact.

Despite the best efforts of Health and Social Care (HSC) staff, the COVID-19 pandemic had a large effect on the health service in Northern Ireland, and unsurprisingly cancer services have been impacted greatly – but the situation was poor long before the pandemic. In June 2022 just 38% of people started their treatment within 62 days of referral. This is far below the target of 95% and this target has never been met since it was introduced in 2010. Longstanding, chronic staff shortages are at the heart of delays and years of underinvestment in staff and equipment, particularly in diagnostics, have meant cancer services can't keep up with demand. 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. People in Northern Ireland deserve better.

Around 20% of cancers in Northern Ireland are diagnosed through an emergency route. This is a concern because these cancers are more likely to be late stage and survival is lower amongst patients whose cancer is diagnosed after being admitted to hospital as an emergency. The figures highlight the need for action across many areas including reducing barriers to people attending screening or speaking to their doctor about symptoms.

We welcomed the publication of a 10-year cancer strategy for Northern Ireland in Spring 2022. It contains 60 ambitious recommendations with the aim of transforming cancer services in Northern Ireland, tackling inequalities and helping more people survive the disease by preventing more cases, diagnosing the disease earlier and improving patient care.

We also welcomed the funding plan published along with the strategy and the allocation of multi-year funding in the Executive's draft budget. However, political instability and failure to set up an Executive and agree a budget mean that implementation of the strategy has stalled. But cancer won't wait. Even in the absence of an Executive, actions identified within the strategy must be a priority for the Department of Health.

This report is a call to action – all of us must come together to make progress in our ambition to beat cancer. People affected by cancer deserve no less.

References

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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 Northern Ireland Cancer Registry, which is managed by Queens University Belfast.