

Cancer in the UK

Wales Overview 2025



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About this report

Reference

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About Cancer Research UK

We're the world's leading cancer charity, dedicated to saving and improving lives with our research, influence and information. In the last 50 years, we've helped double cancer survival in the UK. And today it's continuing to save lives, here and around the world.

Our vision is a world where everybody lives longer, better lives, free from the fear of cancer. And step by step, day by day, our researchers are making this vision a reality thanks to our dedicated community of supporters, partners, donors, fundraisers, volunteers and staff.

Together we are beating cancer.



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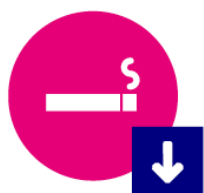
Cancer in Wales

This summary provides an overview of key metrics and data across the cancer pathway in Wales, as part of the *Cancer in the UK: Overview 2025* report, which provides the full UK picture. It looks at where progress is being made and what challenges remain in Wales.



Overview of key cancer statistics in Wales

Over the last 10 years...



Proportion of adults who smoke has **decreased**
23% to 13% [1]*^



Proportion of adults who are obese has **increased**
23% to 26% [2]*^



Proportion participating in bowel screening has **increased**
48% to 66% [3]



Proportion diagnosed at an early stage has **not changed**
53% to 52% [4]*†

Over the last 50 years...



Incidence rates have **increased**
482 to 618 per 100k [5]



5-year survival has **increased**
54% to 63% [6]



Mortality rates have **decreased**
316 to 265 per 100k [7]

Time periods:

1. 2012–2022/23
2. 2012–2022/23
3. 2012/13–2022/23
4. 2016–2021
5. 1974/76–2018/19+21
6. 2002/06–2017/21
7. 1971/73–2021/23

Figures are for all cancers combined.

*Change in direction over time based on point estimates.

^The national health survey changed across this time period, so the data source for the 2012 and 2022/23 estimates are different.

†Among cancer cases where stage is known.

For further details about terminology used here, please see [Cancer statistics terminology explained, CRUK](#)

Cancer incidence rates have increased by almost a third

Cancer incidence rates have increased by almost 30% in Wales over the past 47 years, meaning around 20,200 new cases every year – that’s around 55 per day [1]. More than half (54%) of new cancer cases in Wales are prostate, breast, lung and bowel cancers. Rates in females have increased by around 35%, while rates in males have increased by 15%. This sex difference is mainly driven by smoking-related cancer types, where incidence rates have been falling for some time in men but not yet in women, because smoking prevalence started falling earlier in men than in women.

This will place an unprecedented pressure on an overstretched healthcare system.

Cancer mortality rates have decreased over the past 50 years, but the number of deaths per year has risen

Over the past 50 years mortality rates have fallen by 16%, but there is considerable variation across cancer sites [2]. Among the ten most common causes of cancer death in Wales in the early 1970s rates have risen for prostate cancer, fallen for five sites (lung, bowel, stomach, breast and ovary) and remained stable for four (pancreas, oesophagus, bladder and leukaemia). Despite these changes, the ranking of cancer sites has remained fairly consistent over the past half-century [3]. Improvements in earlier detection, new treatments and reduced prevalence of infections have affected many of the most common causes of cancer mortality.

Despite the overall decrease in cancer mortality, around 25 people die from cancer every day in Wales [4], resulting in nearly 127,000 years of life lost due to cancer each year [5]. Cancer is the leading cause of death in Wales, causing 25.4% of all deaths – more than circulatory system diseases like heart disease (24.7%) or mental and behavioural disorders including dementia (7%) [4].

Survival is improving but the rate of improvement has slowed

More than 6 in 10 (63%) of people survive their cancer for at least five years in Wales [6]. Five-year survival has improved over time, from around 54% for people diagnosed in 2002–2006 to around 63% for those diagnosed in 2017–2021. But the rate of improvement has slowed over time. There is also variation in five-year survival by site. For example, 9 in 10 (91%) women in Wales survive their breast cancer for at least five years, and more than 9 in 10 (98%) men survive their prostate cancer. But for lung cancer, around 2 in 10 (19%) people survive their disease for five years or more.

Smoking and excess weight are the two biggest preventable causes of cancer

Smoking

Smoking causes around 20% of cancer deaths each year in Wales [7], and around 3,100 cases of cancer every year [8].

Smoking levels are currently at their lowest recorded point – but still more than 1 in 10 (13%) of the Welsh adult population smoke [9]. And levels aren't declining fast enough. Wales isn't yet on track to meet its target to be smoke-free (less than 5% adult smoking prevalence) by 2030 [10]. If actions within the Smokefree Wales tobacco control strategy are not effectively implemented, and the pace of change does not increase – it is estimated that Wales will not reach smokefree until the early 2040s.

Tackling cancer through prevention requires support from government and health professionals to help individuals make changes to their lives. Smoking rates decline with government action. The *Tobacco Control Strategy for Wales* contains important measures that must be implemented. The age of sale legislation proposed within the Tobacco and Vapes Bill offers a historic opportunity to prevent young people from suffering a lifetime of addiction, ill health and premature death, both in Wales and across the UK. Cancer Research UK urges MSs to vote to pass this bill in the Senedd and to implement it as quickly as possible. They must also commit to sustainably funded smoking cessation programmes, which should be available to everyone who needs support to quit.

Overweight and obesity

Overweight and obesity causes around 6% of cancer deaths each year in Wales [7]. Around 6 in 10 (61%) adults in Wales are overweight or obese (BMI 25+) [11]. Obesity (BMI 30+) is at its highest recorded level (26%). A quarter (25%) of children aged 4 to 5 in Wales are overweight or obese [12].

The *Healthy Weight, Healthy Wales* strategy includes important measures which must be implemented. We welcomed the action the Welsh Government has recently taken introducing and passing a new law which will address how products high in fat, salt and sugar are disproportionately promoted to consumers in comparison to healthier items.

Screening programme participation

There are currently three national screening programmes in Wales, for bowel, breast and cervical cancer. Uptake of breast cancer screening is 70% [13] and coverage of cervical screening is 70% [14]. More than a third (36%) of cervical cancer cases in Wales are diagnosed through screening [15].

Bowel cancer screening previously had uptake rates below 60% [16], but rates have increased since 2018/19, likely driven by the introduction of the faecal immunochemical test (FIT) in September 2019 that is easier for people to complete at home. Following the introduction of FIT, uptake rates increased to 67% in 2020/21 and has remained relatively stable since then.

In 2022, the UK National Screening Committee recommended UK-wide targeted lung screening for people aged 55 to 74 with a history of smoking, as they are at an increased risk of lung cancer [17]. A Targeted Lung Health Check programme has been piloted and evaluated in Cwm Taf Morgannwg University Health Board in Wales. If fully implemented across the nation and uptake reached 50%, Cancer Research UK estimates that around 240 extra patients each year across Wales could be diagnosed at an early stage rather than a late stage [18], and that around 100 lung cancer deaths could be avoided each year through the programme [19].

Expediting the implementation of lung screening and ensuring 100% coverage as soon as possible, alongside continuing to optimise the existing screening programmes, must be a priority. This must also include ensuring smoking cessation is sustainably funded and an integral part of the lung screening programme. Crucially, the Welsh Government must provide investment and support for resources, like diagnostic capacity and data infrastructure, to make this happen.

People recognise many potential signs and symptoms of cancer, but too many face barriers to seeking help

Cancer Research UK data from 2024 shows that in Wales, people recognise on average 14 out of 18 common cancer symptoms [21]. The most commonly recognised symptoms were change in the appearance of a mole and an unexplained lump/swelling.

While 45% of people had experienced a potential symptom of cancer in the last twelve months [21], around a third (34%) of those had not contacted their GP surgery/ practice within six months. The biggest barriers to seeing a health professional included thinking it would be or finding it difficult to get an appointment (including with a particular healthcare professional), deciding to manage the symptom(s) themselves, thinking the symptom was unlikely to be anything serious and not wanting to be seen as someone who makes a fuss.

The Welsh Cross-Party Group on Cancer's *All Things Being Equal* report highlights barriers to help-seeking for people in more deprived areas, which contribute to stark health inequalities [22]. These barriers include understanding the signs and symptoms of cancer.

The Welsh Government should invest in regular public campaigns to support positive behaviour change and encourage timely help-seeking. These should be targeted and tailored to groups that face barriers to help-seeking and include awareness of cancer signs and symptoms and barriers to contacting a GP. Evaluation should be embedded into campaigns to

help strengthen future campaigns and other interventions aiming to address inequalities.

This should be matched with continued efforts to improve access to primary care, including increasing capacity and developing more accessible routes into healthcare.

Earlier diagnosis saves lives

There is variation between cancer sites in the proportion diagnosed at an early stage (stages 1 and 2). In Wales, around 28% of lung cancer cases, 42% of bowel cancer cases, 59% of prostate cancer cases and 83% of breast cancer cases are diagnosed at an early stage [20].

There must be concerted efforts to make sure more people are diagnosed with cancer at earlier stages. The Welsh Government should deliver on their commitment to earlier and faster diagnosis made in the *Cancer Improvement Plan* and set a specific target for reducing the proportion of cancers diagnosed at a late stage.

Too many people with cancer are diagnosed through emergency routes

In Wales, for eight major cancer types, over a third (37%) of patients are diagnosed after an emergency hospital admission [23]. This is concerning, as people diagnosed through an emergency presentation compared to those diagnosed through more managed routes are more likely to be diagnosed at a late stage and have poorer survival, even accounting for stage at diagnosis [24].

Encouraging the public to seek help for changes that are not normal for them is critical together with ensuring barriers to accessing health care are removed. Supporting primary care to be alert to the possibility of cancer in their patients, and timely referral for tests and specialist advice, could help make sure fewer patients are diagnosed as an emergency.

Cancer services are struggling to keep up with demand

At the end of January 2025, around 41% of people waiting for key diagnostic tests that can be used to diagnose cancer had waited more than eight weeks [25] – that's around 36,600 people – a symptom of the huge pressure that diagnostic services are currently facing.

NHS Wales uses the Suspected 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 January 2025, only 57% of eligible patients started treatment within 62 days [26].

The Welsh Government must continue to direct focus and investment to address the capacity issues contributing to poor cancer waits in Wales.

In particular, additional investment should be steered towards growing a multi-skilled and future-fit cancer workforce, diagnostic facilities to reduce long waits and evidence-based innovations within cancer diagnostic services.

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. But data from the National Lung Cancer Audit shows that 14% of lung cancer patients in Wales received surgery in 2022, below the standard of 17%, with some variation between health boards [27]. The drivers of this are likely to be complex and include health system, health professional and patient factors. As efforts to reduce late-stage diagnoses result in increased demand for surgery – e.g., following rollout of targeted lung screening – services must be equipped to deliver the required increase in surgical activity. National audits for other cancer sites do not have any standards for treatment.

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

In 2021 people in Wales scored their overall care experience positively, with an overall rating of 8.7 out of 10 [28]. Patients felt respected by staff and believed their choice of treatment was explained well. Improvements could be made in the primary care support offered after their treatment and more detail could have been given around the potential impact cancer could have on their day-to-day activities.

Concerningly, in 2024 in Wales, 84% of people don't think the health service has enough staff or equipment to see all the people with cancer that need to be diagnosed, while 81% don't think the health service has enough staff or equipment to treat all the people with cancer that need to be treated [21].

Together we are beating cancer in Wales

Important progress has been made over the decades to improve cancer outcomes in Wales, but considerable and urgent challenges remain. Despite this, if the right solutions are prioritised and funded for more cancer research, better prevention, earlier diagnosis and quicker access to treatment, people in Wales will live longer, better lives.

This is crucial as cancer is the leading cause of death and around 20,200 people are diagnosed with cancer in Wales every year [29]. With the number of cancer cases only set to grow in the coming years, the Welsh Government must make sure improving cancer outcomes is a priority, as well as broader health policy.

Longer term cancer strategy: Cancer Research UK welcomed the publication of the 3-year *Cancer Improvement Plan for Wales*, published in January 2023, but is calling for a longer-term cancer strategy to be introduced from 2026 when the current plan expires. Evidence from the International Cancer Benchmarking Partnership shows the positive impact of longer-term cancer strategies, backed up by dedicated implementation plans and the required funding [30].

Funding: The cancer strategy 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.

This is needed 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. This would build on work conducted by Health Education and Improvement Wales.

Earlier diagnosis: Despite the best efforts of committed NHS staff, waiting times for diagnosis and cancer treatment are not being met. For people 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, so addressing regional variation must be a priority for the Welsh Government and NHS Wales.

For eight major cancer types in Wales, almost 40% of cancers are diagnosed through an emergency route [23]. 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 Wales' plans for cancer services. For example, the Welsh Government should commit to implementing a targeted lung screening programme, in line with the UK National Screening Committee's recommendation.

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.

Prevention: Given that a substantial proportion of cancer cases are preventable, there must be a clear focus from the Welsh Government on promoting public health – particularly in relation to implementing policies on tobacco reduction and overweight and obesity.

Tobacco: The *Tobacco Control Strategy for Wales* contains important measures that the Welsh Government must implement.

Continued efforts to stop people taking up smoking in the first place and supporting people to quit smoking are critical. Cancer Research UK urges MSs to pass a Legislative Consent Memorandum in the Senedd, to implement the Tobacco and Vapes Bill in Wales. The Welsh Government should also commit to sustainably funded smoking cessation programmes, which should be available to everyone who needs support.

Overweight and obesity: It is vital that the *Healthy Weight. Healthy Wales* strategy is effectively implemented. We welcomed the action the Welsh Government has recently taken introducing and passing a new law

which will address how products high in fat, salt and sugar are disproportionately promoted to consumers in comparison to healthier items.

Research: The scale of the cancer challenge is incomparable. Cancer places a significant pressure on individuals, society, the NHS and the economy with nearly 1 in 2 people still affected by cancer [31]. Significantly more potential years of life are lost to cancers than to other major non-communicable diseases.

Investing in cancer research not only saves lives, but also yields significant economic benefits, with a return of around £2.80 for every £1 invested, including job creation, increased earnings through improved survival and contributions from spin-off companies [32].

Cancer research and innovation must be prioritized by the Welsh Government to tackle the growing and complex health challenges. Cancer Research UK is fully supportive of the highest quality cancer research and innovation in Wales.



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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 Welsh Cancer Intelligence and Surveillance Unit (WCISU), which is maintained by Public Health Wales.