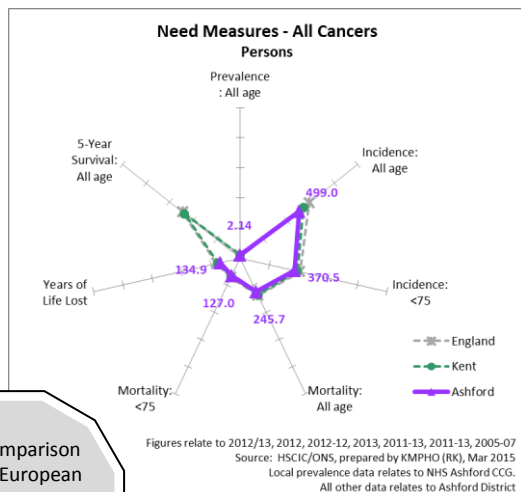


Cancer in Kent: Equity Review

Focus on NHS Ashford

This summary provides an overview of the findings of the 2015 Cancer Equity Review for Kent, with a particular focus on the NHS Ashford area. For a detailed analysis please see the main report. Some of the analysis is presented at Kent-level, but where data allows local analysis has been included or referred to. Local figures relate to the NHS Ashford CCG area wherever possible, but to Ashford District where indicated.

Need Levels – All Cancers



Incidence, mortality and years of life lost are all slightly lower in Kent than is the case for England as a whole.

Direction of Travel – Long Term Trends

Kent

UP

DOWN

- 5-Year Survival
- Incidence
- Mortality
- Years of Life Lost

There is some evidence to suggest that Mortality rates in Kent started rising again in 2013

There is some evidence to suggest that incidence rates in Kent may now stabilising or even decreasing

In comparison with European averages, survival rates in Kent are low

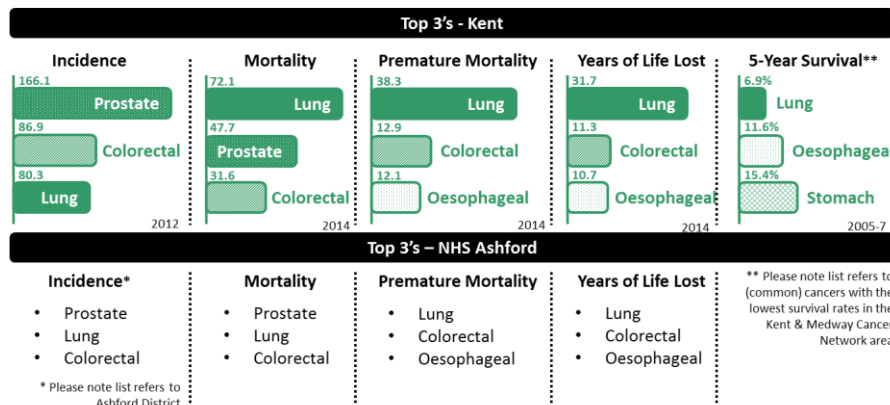
Incidence and mortality are lower in Ashford than is the case for England as a whole, but QOF prevalence rates are higher.

Need Levels – By Site: Men



In common with all Kent CCGs, premature mortality rates in Ashford for men are highest for lung cancer

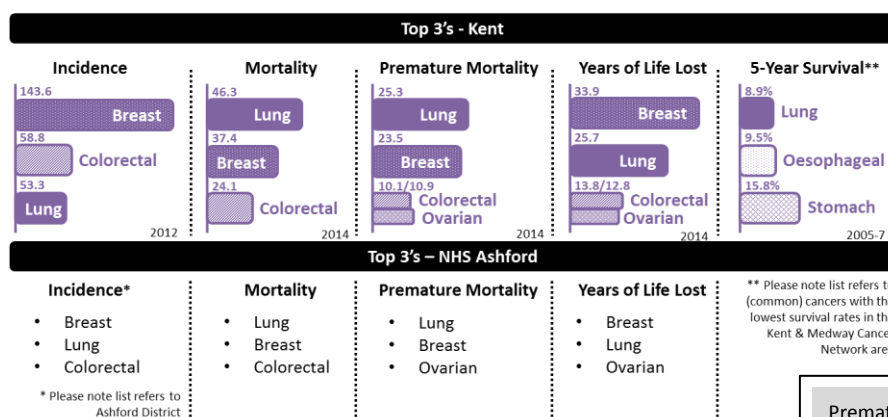
Premature mortality rates for oesophageal cancer amongst men are as high as for colorectal cancer



Need Levels – By Site: Women

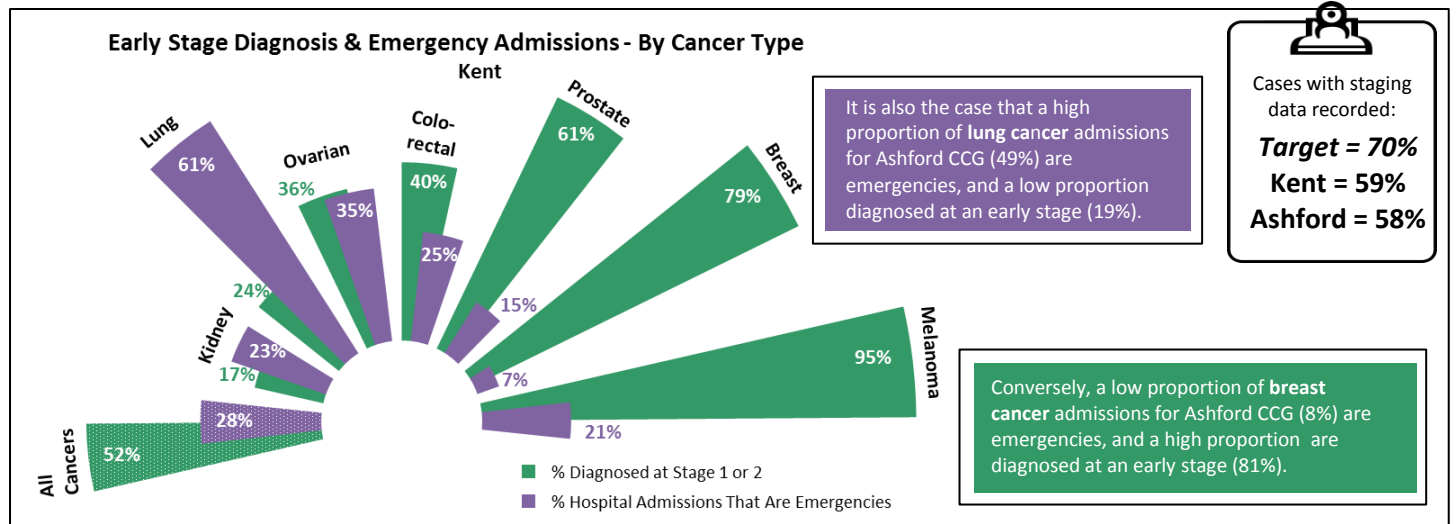
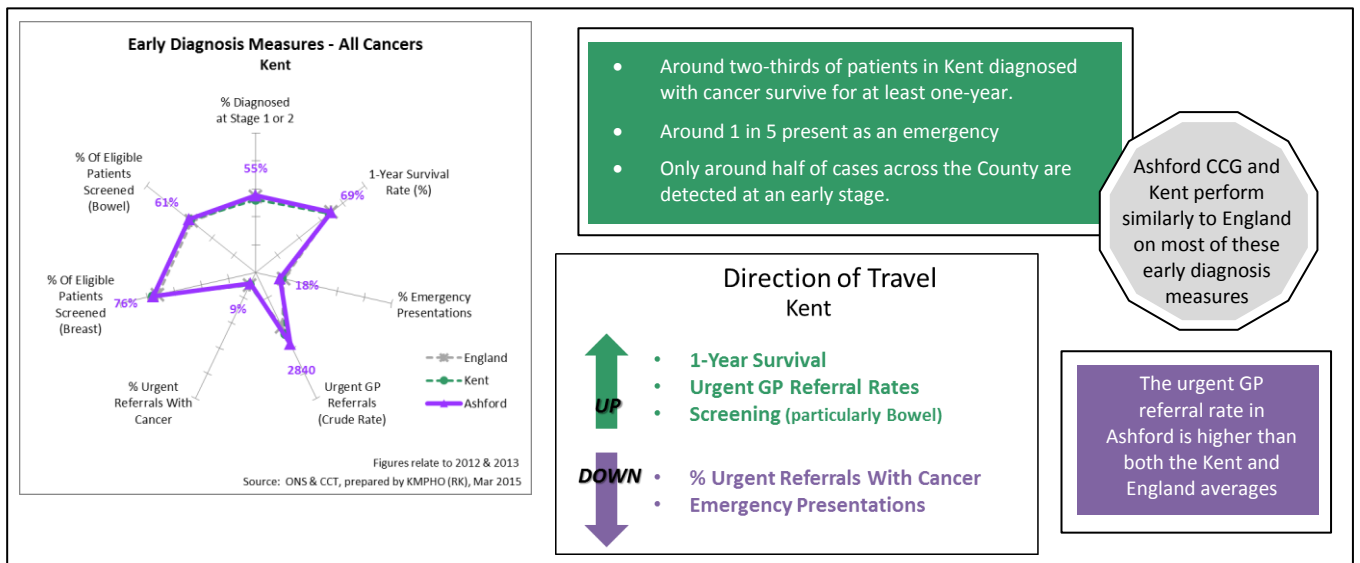


In common with all Kent CCGs, mortality rates in Ashford for women are highest for lung and breast cancer

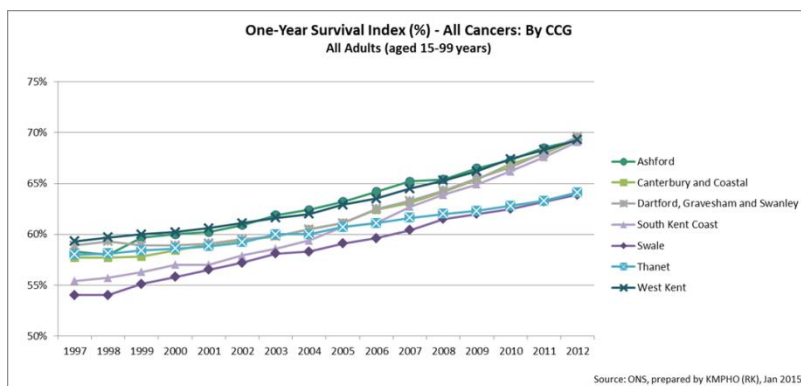


Premature mortality rates and years of life lost for ovarian cancer amongst women are as high as for colorectal cancer

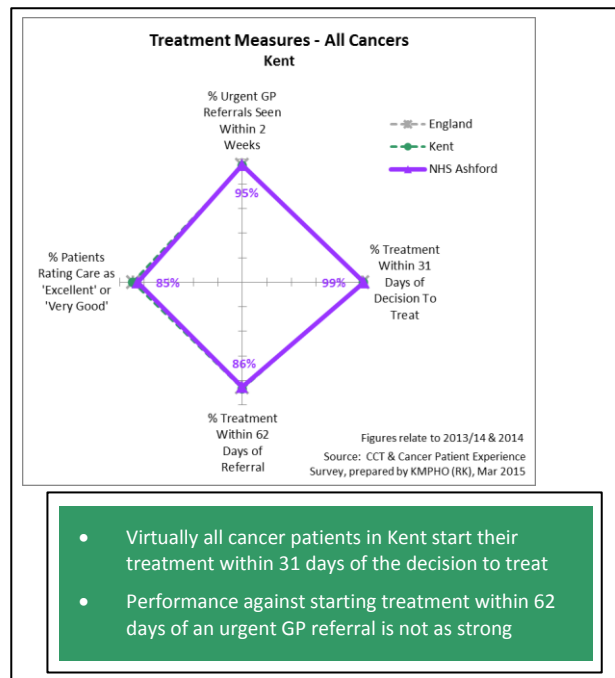
Service – Early Diagnosis



1-Year Survival Rates

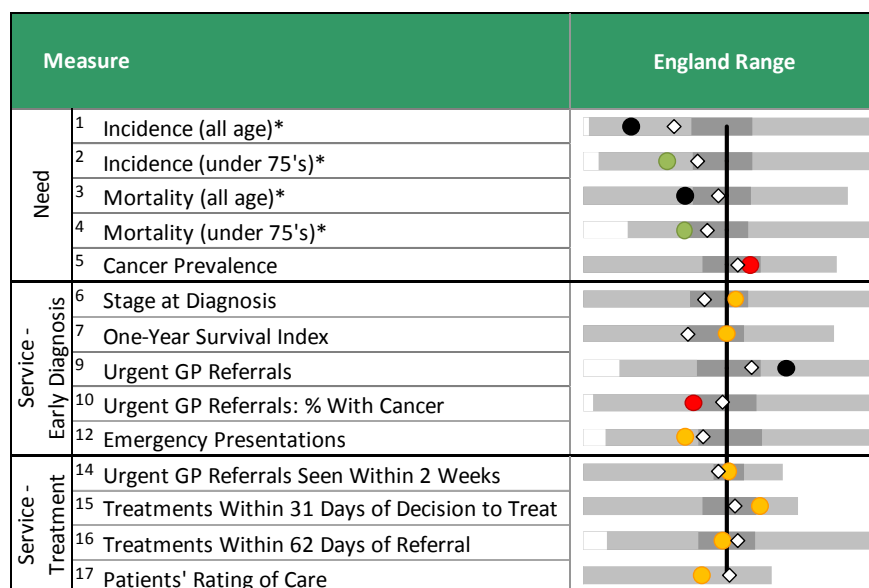


Service - Treatment



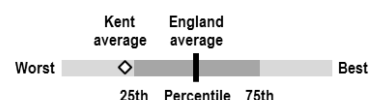
Cancer Summary – NHS Ashford

All Cancers



All cancer incidence and mortality rates in Ashford are low in comparison with the England average, but QOF prevalence is significantly higher.

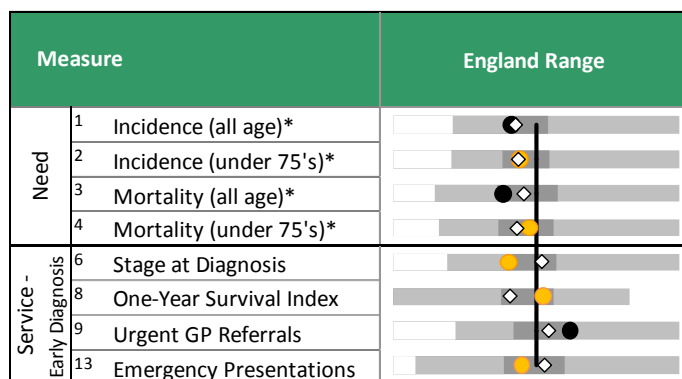
Screening rates for both breast and colorectal are higher than the England average



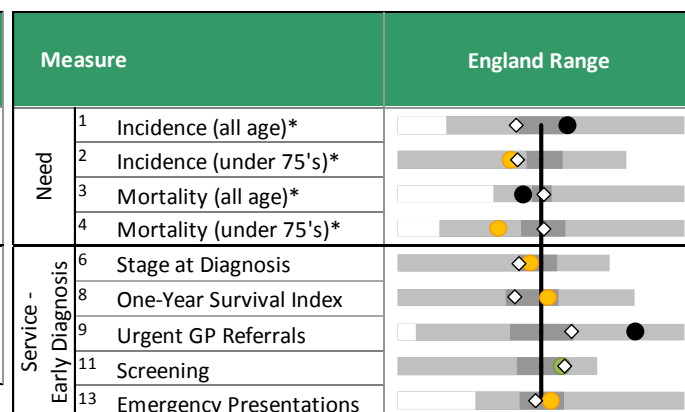
- Significantly better than England average
- Not significantly different from England average
- Significantly worse than England average
- No significance can be calculated

*Please note data relates to Ashford District

Lung Cancer

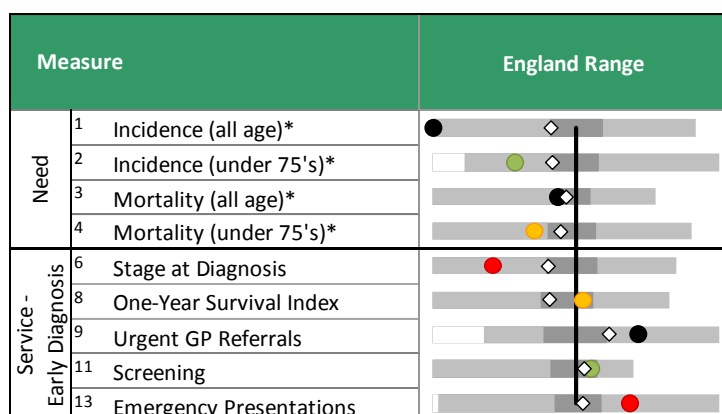


Breast Cancer



Colorectal Cancer

The proportion of colorectal cancers diagnosed early in NHS Ashford is lower than the England average, and the emergency presentation rate higher



1/2. Incidence: DSR – HSCIC, 2012. 3/4. Mortality: DSR – HSCIC, 2013. 5. Cancer prevalence (QOF) – HSCIC, 2012/13. 6. Stage at diagnosis: % diagnosed at Stage 1 or 2 – CCT, 2012. 7. One-year survival index – ONS, 2012. 8. One-year survival index: Breast, colorectal & lung cancers combined – ONS, 2012. 9. Urgent GP referrals: Crude rate – CCT, 2013 GP Profile. 10. Urgent GP referrals: Conversion rate (% with cancer) – CCT, 2013 GP Profile. 11. Screening: % of eligible patients screened – CCT, 2013 GP Profile. 12. Emergency presentations (%) – CCT, July-December 2012. 13. Emergency presentations (%) – 'Routes to Diagnosis 2006-2010', NAEDI. 14. Urgent GP referrals seen within 2 weeks (%) – CCT CCG Profile, 2013/14. 15. Treatments within 31 days of decision to treat (%) – CCT CCG Profile, 2013/14. 16. Treatments within 62 days of GP referral (%) – CCT CCG Profile, 2013/14. 17. Patients' rating of care: % cancer patients rating their care as 'excellent' or 'very good' – Cancer Patient Experience Survey 2014.

Equity By Gender

Need



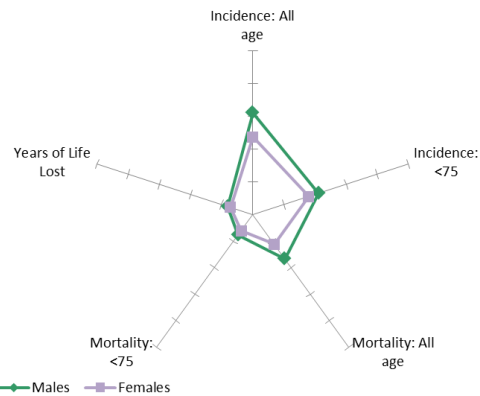
Men have:

- **Higher incidence rates**
- **Higher mortality rates**
- **And, lower survival rates than women**

The same inequalities by gender are evident for both colorectal and lung cancer.

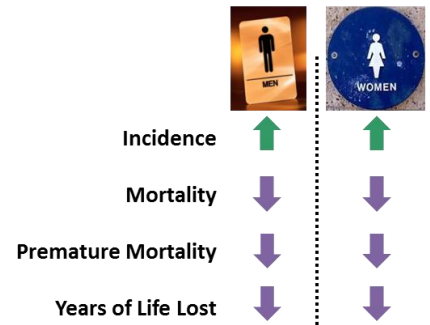
Only lung and colorectal cancer have been considered in this analysis by site.

Need Measures - All Cancers: By Gender Kent



Whilst cancer mortality rates are generally higher for men than women, the reverse is true for these aged under 55

Direction of Travel – Long Term Trends



Service



Men are:

- **More likely to die at home**

Equity By Age



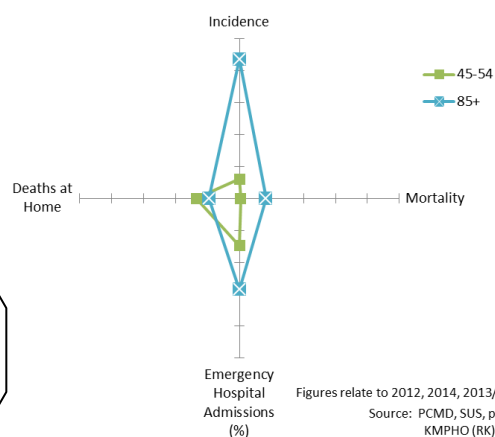
Older people in Kent have:

- **Far higher incidence rates**
- **And, far higher mortality rates than younger people**
- **But, a lower proportion die at home**

The same inequalities by age are evident for all of the key cancer sites analysed (lung, breast and colorectal).

The magnitude of the differences between older and younger people is smaller for breast cancer than lung and colorectal cancers.

Need & Service Measures - All Cancers: By Age Kent



Older people who are admitted to hospital with a cancer primary diagnosis are more likely to be admitted as an emergency

Direction of Travel – Long Term Trends



Call to Action – NHS Ashford

NHS Ashford CCG

- Communication of the need to focus on male patients and those from more deprived backgrounds to manage higher need levels and improve outcomes is required.
 - Inequalities by deprivation in Kent for lung cancer appear to be widening.
- Reinforcement of the importance of early diagnosis in achieving improved survival rates and reducing emergency presentations.
 - The data suggests that only 55% of all cancer cases in Ashford are detected at an early stage (1 or 2) and just 19% of lung cancer cases.¹
 - In Ashford, the proportion of colorectal cancers diagnosed early (30%) is lower than the England average, and the emergency presentation rate is higher.
- Work is needed to help support efforts to improve uptake of bowel cancer screening. There is a link between GP practices with low approval ratings from patients and low screening rates.
- Further work is needed to understand the high levels of urgent GP referrals seen in the East Kent CCGs, including Ashford.

This summary has been produced by Malti Varshney, Consultant in Public Health and Rachel Kennard, Senior Analyst in April 2015. Please direct any enquiries to Malti.Varshney@kent.gov.uk or Rachel.Kennard@kent.gov.uk.

02/06/2015 – D3

¹ Based only on those cases with staging data recorded