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Conference Briefing: Closing the Deadly Cancer Gap



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Closing the Deadly Cancer Gap

Six of the less survivable cancers - lung, pancreatic, liver, brain, oesophageal and stomach are responsible for around 40% of all common cancer deaths in Wales, despite making up nearly a quarter of cases.

People diagnosed with these six cancers have a shockingly low life expectancy, the 5-year survival rate in Wales is around 14%, compared to 63% for other common cancers.

For all types of cancer, those in most deprived areas are 20% more likely to develop cancer than those in the least deprived. For the less survivable cancers, the deprivation gap is much bigger; people in the most deprived parts of Wales are nearly twice as likely to develop one of the six cancers than people in the least deprived areas.

This is the deadly cancer gap.

Historically, we have not seen progress to improve diagnosis, early treatment and survival for people who are diagnosed with a less survivable cancer compared to other common cancers. Focused attention, investment and research contributed to the breakthroughs across other common cancers, we can replicate this with less survivable cancers.

Now is the time to close the deadly cancer gap.

What do we need?

Earlier diagnosis:

We need a specific commitment to improve early diagnosis rates for less survivable cancers. Innovative, evidence led interventions like targeted lung cancer screening, increased public information and vague symptom awareness.

Faster diagnosis:

Delays in pathways contribute to poor outcomes. People have reduced treatment options if their diagnosis is delayed due to long waits for scans and appointments, meaning they no longer have a chance of being cured. The Suspected Cancer Pathway 62-day target may be beneficial for many cancers, but it remains too long for LSCs. The pathway from suspected cancer to confirmed diagnosis must be swift.

Optimal Pathways:

An optimal pathway should cover the whole spectrum of care - from presentation of symptoms to diagnosis and access to best treatment and supportive care for those living with cancer. Diagnosing and treating people faster can help ensure more people diagnosed now get better outcomes, receive treatment, survive longer and have a better quality of life.

Better supportive care:

There is a dearth of information about the patient experience and quality of life of patients with a less survivable cancer; fewer people survive long enough to contribute to national survey work such as the Wales Cancer Patient Experience Survey (WCPES). The Welsh NHS can only effectively improve what they can understand and measure, failing to understand and improve the experiences and quality of life of most people diagnosed with a less survivable cancer.

Boost investment in research:

Investment is needed in new diagnostic technologies and tests that can help to diagnose less survivable cancers earlier or help to triage people needing further investigation. Investment is also needed to find better ways to successfully treat the less survivable cancers.

Cancer services across Wales must transform to improve cancer patient outcomes; to recover from the pandemic and reduce cancer inequalities.

You can support our work by asking questions and speaking in Senedd debates to express your support for clear action to improve outcomes for people with a less survivable cancers.

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