

# Senedd Briefing: Improving Stomach and Oesophagael Cancer Outcomes in Wales



**Estyn gobaith. Estyn llaw.**  
Give hope. Help cope.  
[tenovuscancercare.org.uk](http://tenovuscancercare.org.uk)

**Call our free Support Line**  
**0808 808 1010**  
Ffoniwch ein Llinell Gymorth rhadffôn

## Background

Cancers of the oesophagus and stomach (also known as Upper GI cancers) have some of the poorest cancer patient outcomes in Wales, so much so that they are considered two of the six “less survivable” cancers.

By the time people are diagnosed with these cancers, it is often in A&E when the cancer is at a later stage, spreading throughout the body and becoming less survivable.

Tenovus Cancer Care believes this is unacceptable and that greater concerted and coordinated action is required to improve outcomes. This briefing sets out facts concerning these cancers; the challenge; the solutions, and the activity Tenovus Cancer Care will be taking forward over the coming months.

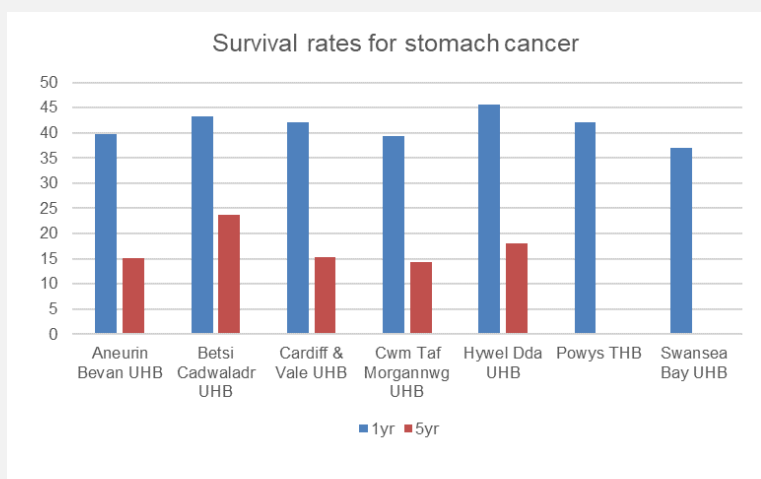
## Upper GI Cancers in Wales

### Stomach Cancer

In 2019, 425 people in Wales were diagnosed with stomach cancer, 163 women and 262 men,

Diagnosed at stage 1, 1yr survival is 82%, when diagnosed at stage 4, 1 yr survival from stomach cancer is 19%.

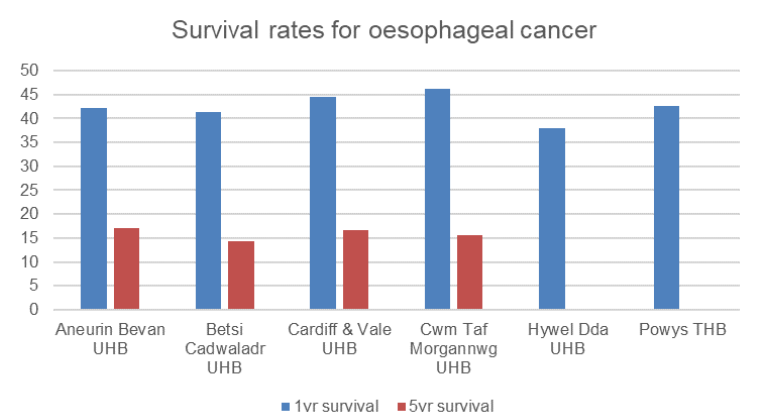
Variation in survival between health boards as well as between Wales and England tells us that a 5% increase in survival is achievable and could result in 105 people living longer.



### Oesophagael Cancer

In 2019, 446 people in Wales were diagnosed with oesophageal cancer - 309 men, 137 women.

42% of people are diagnosed at stage 4, fewer than 5% are diagnosed at stage 1.



## Why are Upper GI Cancers so Deadly?

The deadly nature of stomach and oesophagael cancers can be attributed to several, sometimes related, factors:

- Risk factors such as age, obesity, smoking, alcohol intake and H.pylori infection (a bacterial infection of the stomach).
- Diagnosis of these cancers is often via an emergency presentation at A&E when the cancer is at a late stage.
- These cancers are mostly asymptomatic until later stage and they spread quickly. The location near lymphatic tissue facilitates the spread to the nearby lungs and liver.
- Where it is a viable treatment option, surgery is complicated and can have lifelong repercussions.

## How do we Improve Outcomes?

Issue	Action
Prevention	Increase awareness of risk factors amongst key audiences
Patient delay in coming forward	Increase public awareness of symptoms. Encourage public to approach GPs with vague symptoms. Increase public knowledge of Rapid Diagnostic Centres, may encourage GP presentation with vague symptoms.
GP delay in referral	Increase GP awareness of symptoms. Awareness of Rapid Diagnostic Centres and the vague symptom pathway.
Diagnostic delay	Increase and improve access to Rapid Diagnostic Centres. Monitor Barrett's oesophagus patients. Rollout the use of transnasal endoscopy. Rollout the use of cytosponge to diagnose Barratts oesophagus.
Treatment delay	Ongoing optimisation and improvement of pathways.
Research and innovation	Support trials of new diagnostic tests, such as breath tests, and embed them into the diagnostic pathway if their effectiveness is proven.

## Next steps

Tenovus Cancer Care has prioritised the less survivable cancers as our main policy and campaign focus for the near future.

In deciding which of the less survivable cancers to focus on, consideration has been given to the support and profile of different cancer types in Wales and in particular the contribution made by third sector organisations in relation to each. We do not wish to duplicate activity and will always seek to add value.

**We have therefore turned our attention to stomach and oesophageal cancers, working in partnership with stakeholders who have an interest in improving outcomes and increasing the momentum.**

Tenovus Cancer Care wants to markedly improve public and political awareness of these cancers, a step towards the sorts of system-wide improvements patients need to improve outcomes.

On the 26<sup>th</sup> April Tenovus Cancer Care will host a virtual roundtable bringing clinical and non-clinical expert stakeholders into a digital space to discuss barriers and opportunities to activity that will improve the outcomes of patients with stomach and oesophageal cancer. The findings of the roundtable will inform a report, parliamentary activity, and a targeted public awareness campaign we wish to see occur across Wales.

**We urge Members from across the political spectrum to share their experience of today's briefing through their social media channels; and we look forward to sharing the findings of the roundtable in due course.**

**Thank you for your support.**

## **What are the Less Survivable Cancers?**

There are 6 “less survivable” cancers – cancers of the oesophagus, stomach, lung, brain, pancreas and liver. They have some of the poorest survival outcomes in Wales.

Despite making up 25% of all cancers, they contribute to 40% of all cancer deaths. *The deadly cancer gap.*

Tenovus Cancer Care is campaigning to raise awareness around these cancers through leadership of the Less Survivable Cancer Taskforce in Wales.

To learn more about the work of the Taskforce visit <https://lesssurvivablecancers.org.uk/>