



Public Health
England

Investigating the linked summary radiotherapy dataset for lung cancer

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Background

- NATCANSAT Radiotherapy Treatment Summary Record (TSR) dataset
- The details of each Radiotherapy episode were aggregated into one Treatment Summary Record
- TSR 2013: radiotherapy episodes between 1st April 2009 and 30th Sept 2012
- Includes palliative and radical treatments



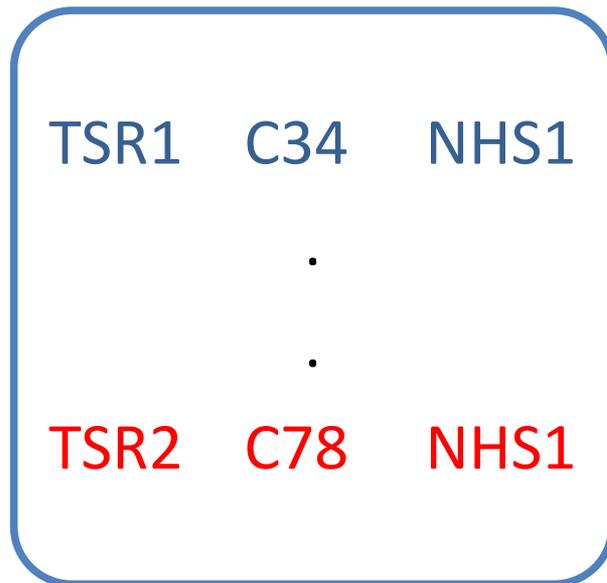
Background

- TSR dataset
 - Patient level dataset
 - All radiotherapy treatment, Apr 2009 – Sep 2012
 - Patients identified by NHS number or name, dob and postcode
- National Cancer Data Repository (NCDR 2010)
 - Cancer tumours diagnosed between 1990 – 2010
 - Tumour level dataset
 - Includes NHS number, name, dob and postcode



Background

Treatments (TSR)

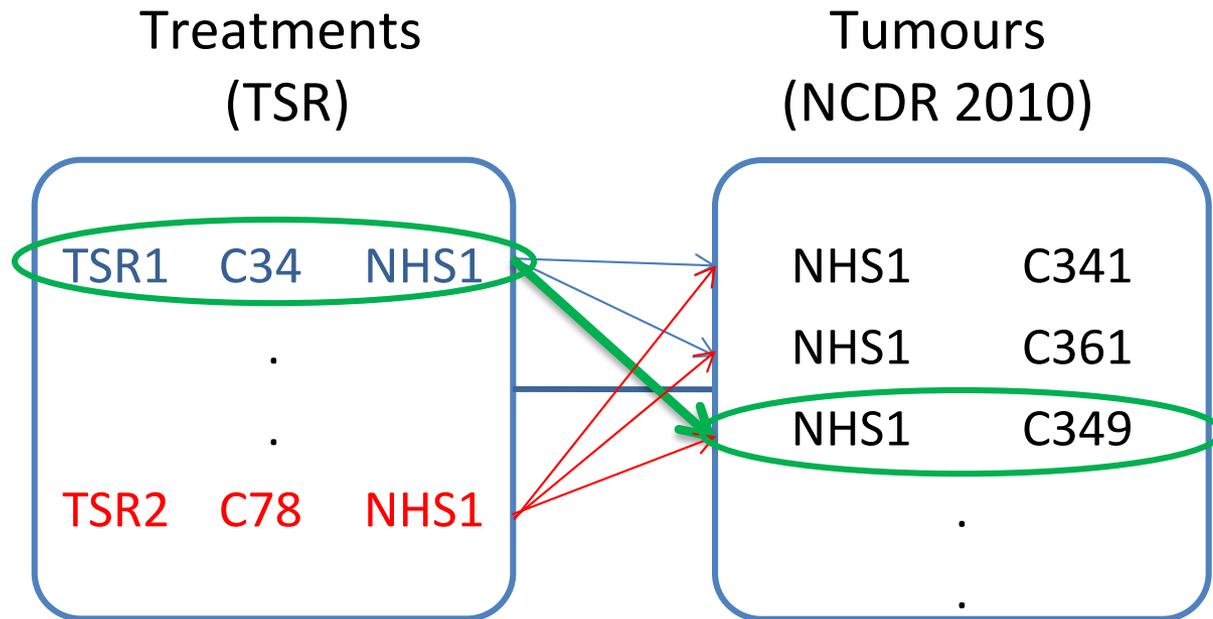


Tumours (NCDR 2010)





Aim



- To identify the correct linkages between radiotherapy treatment and lung cancer tumours (ICD10 C33-C34)



Lung cancer linkages

- 43,075 linkages to a lung cancer tumour (ICD10 C33-C34)
- To consider:
 - the primary site codes



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Lung cancer linkages

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- To consider:
 - the primary site codes
 - time from diagnosis to treatment
 - treatment region: primary, metastatic, regional nodes, prophylactic

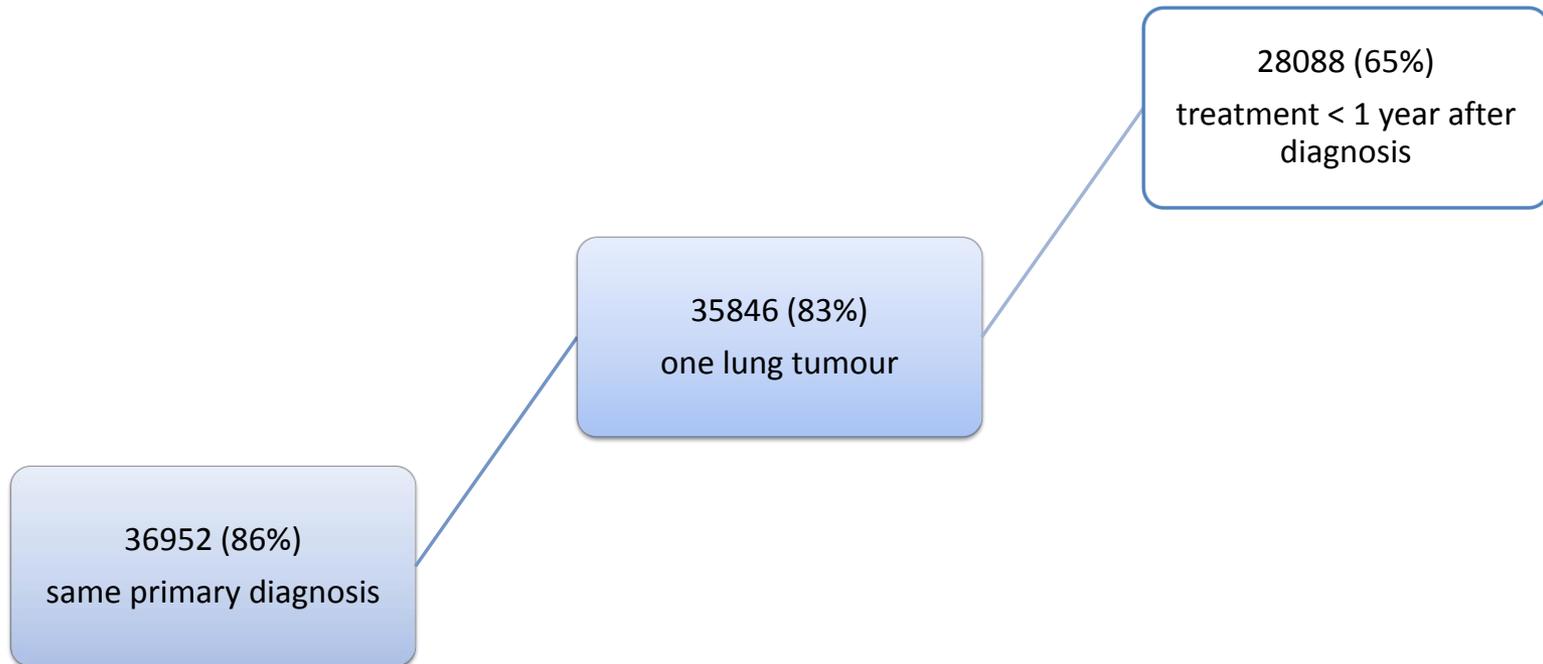


Lung cancer linkages

- 43,075 linkages to a lung cancer tumour (ICD10 C33-C34)
- To consider:
 - the primary site codes
 - time from diagnosis to treatment
 - treatment region: primary, metastatic
 - multiple lung tumours

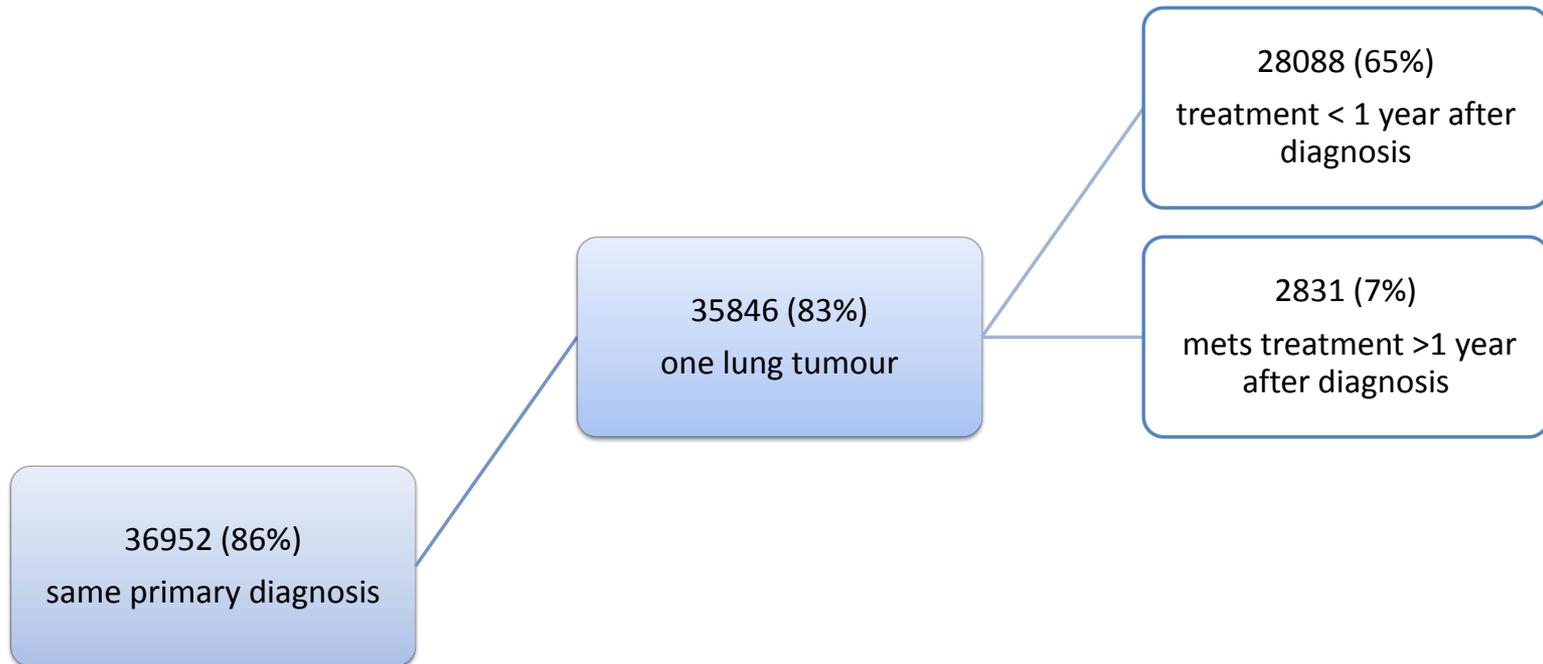


Lung cancer linkages – primary site agreement



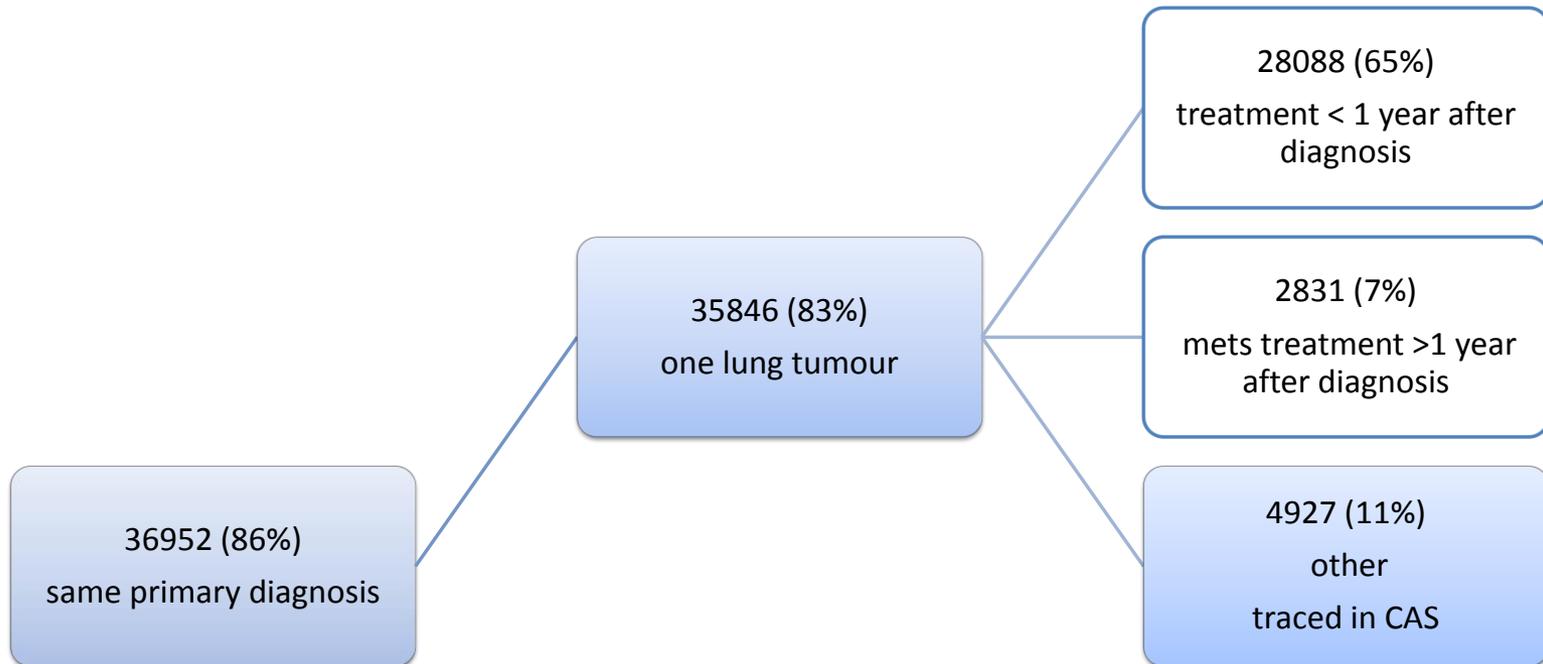


Lung cancer linkages – primary site agreement



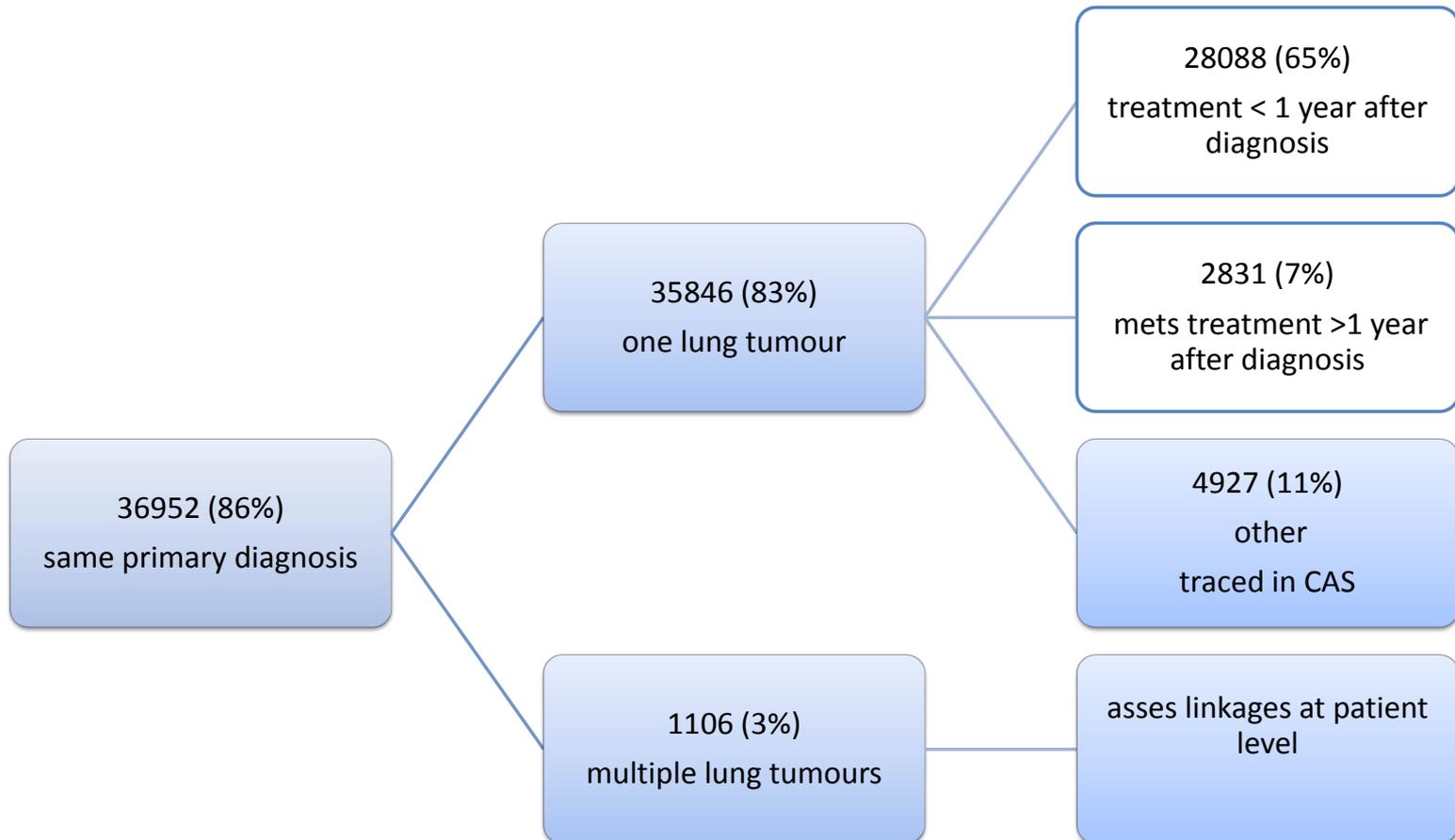


Lung cancer linkages – primary site agreement



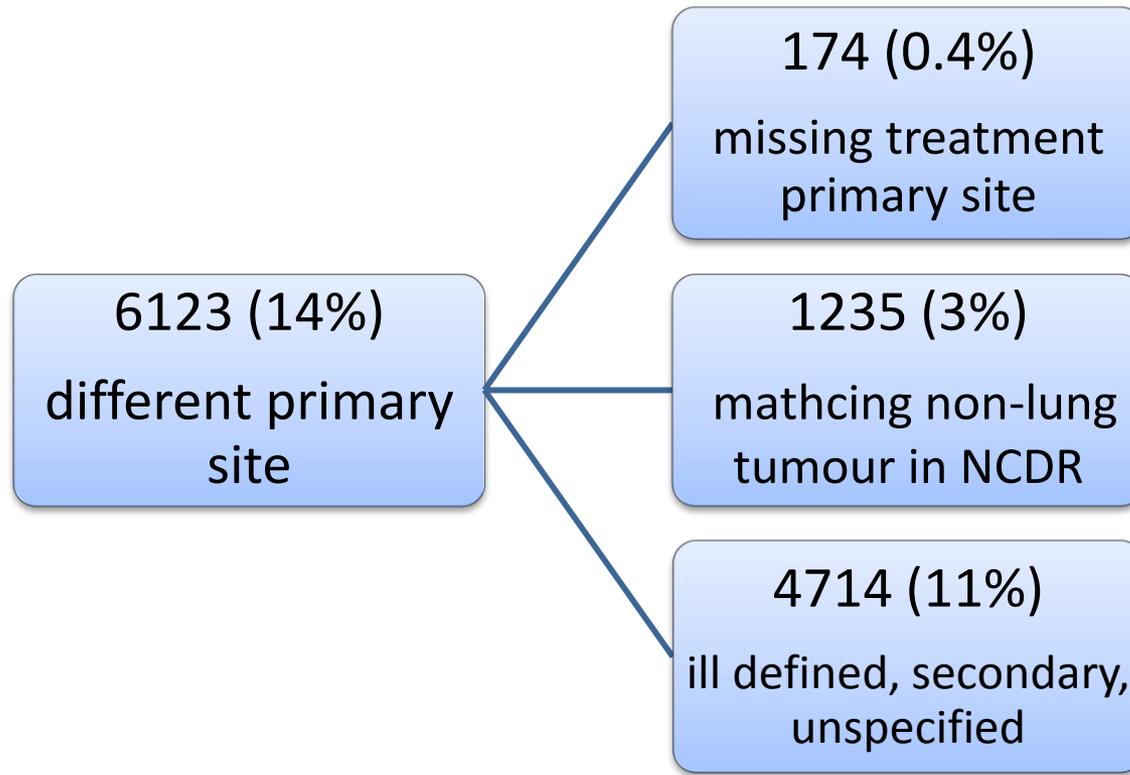


Lung cancer linkages – primary site agreement



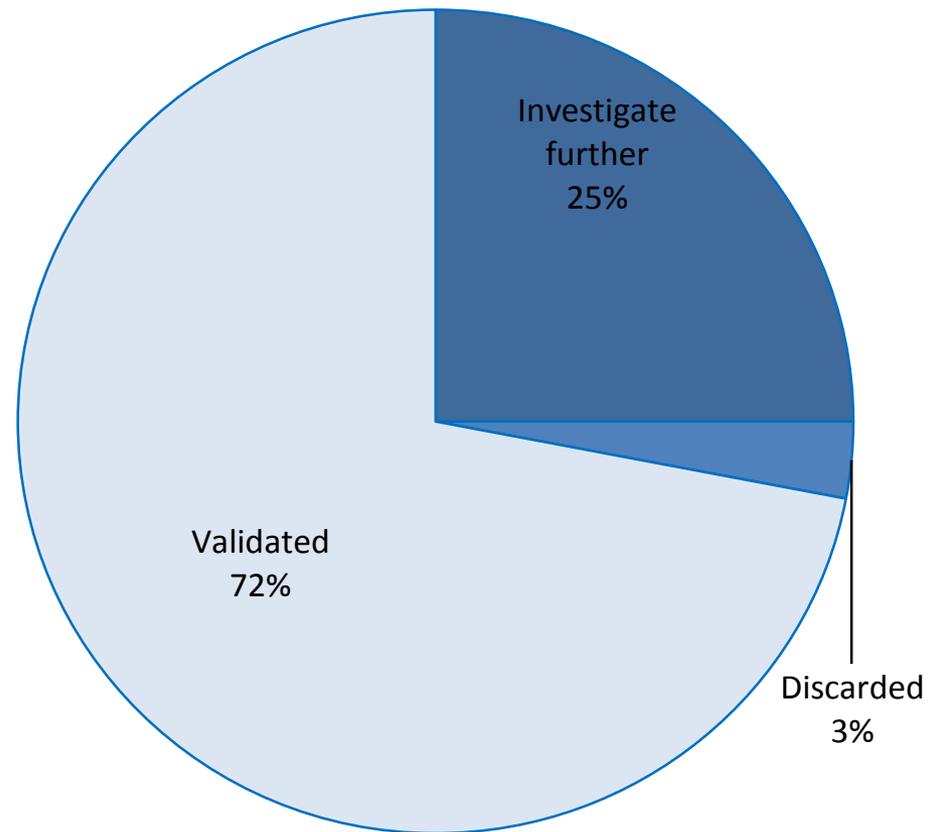


Lung cancer linkages – primary site disagreement





Lung cancer linkages





Further analysis

- Identify adjuvant, radical and palliative treatment
- Assess the proportion of lung cancer patients who receive radiotherapy with curative and palliative intent, by centres
- Investigate variation in the use of radiotherapy in England and analyse the association of the geographical variation of radical radiotherapy with survival