



Ongoing and planned national work in lung cancer epidemiology

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High priorities in workplan

- Update linked dataset to incidence 2006: in progress
- Get access to national audit data and compare date of diagnosis, cell type, treatment
- Cancer survival by cancer network and PCT area
- Mesothelioma incidence and survival in regions and cancer networks
- Comparative survival in England, Norway and Sweden







Variation in radical resection for lung cancer in relation to survival

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Lung cancer in the UK

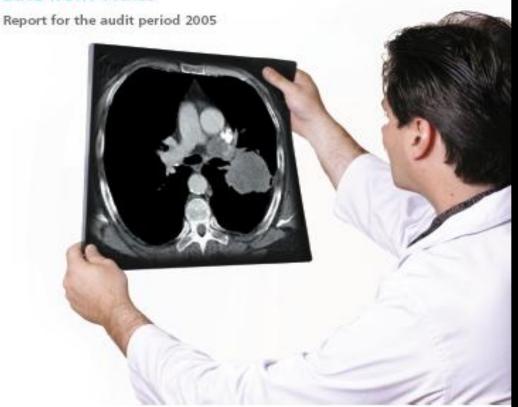
- Incidence: 39,000 cases per year
- Mortality: 36,000 lung cancer deaths per year
- Survival: 5-year relative survival is 8.5%





National Lung Cancer Audit

Key findings about the quality of care for people with Lung Cancer in England incorporating headline and completeness data from Wales

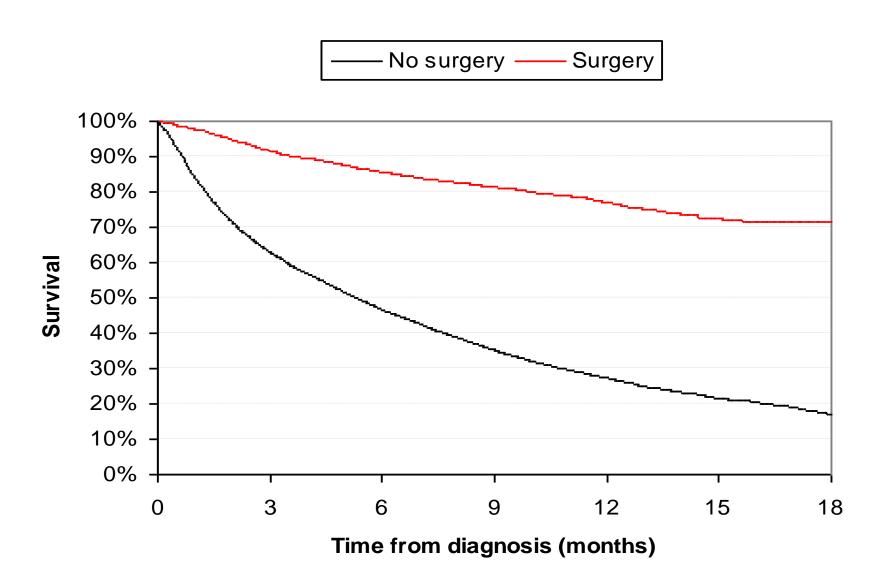


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Radical resection



Questions

- What proportion of lung cancer patients in England are treated with radical resection?
- How does this vary in the country?
- What is the association between radical surgery and survival?

 Could we increase lung cancer survival by increasing the frequency of radical resection?

Materials and methods

 Lung cancer in England, 1998-2003, excl. SCLC (n=152,000)

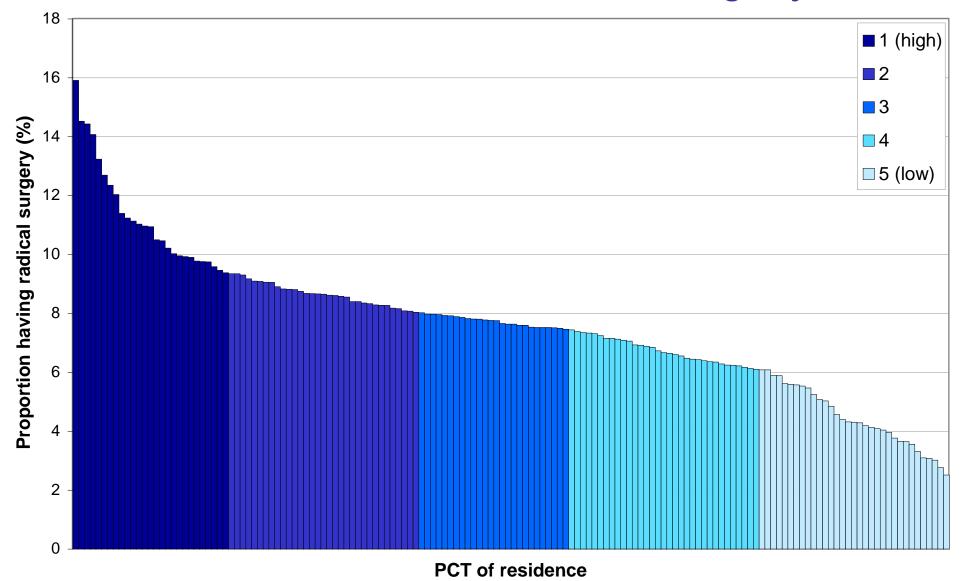
Source: cancer registries in England

 Radical surgery (%) by PCT area: quintile distribution and map

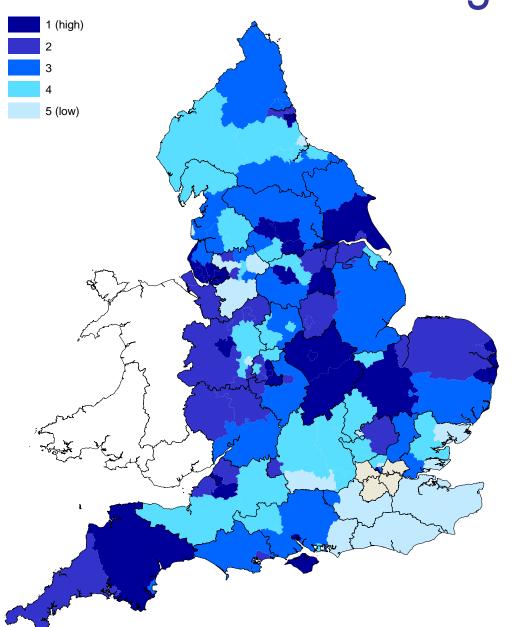
Source: hospital episode statistics data

Separate analysis of regional variation in England

PCT variation in radical surgery



PCT variation in radical surgery





Specific hypotheses

Survival of <u>all patients</u> in relation to surgery quintile

Resection $\uparrow \rightarrow Survival \uparrow ?$

Survival of <u>resected patients</u> in relation to surgery quintile

Resection $\uparrow \rightarrow Survival \downarrow ??$



Survival analysis: all NSCLC patients

All NSCLC patients				Unadjus	ted	Adjusted for sex, age and SES	
Surgery quintile	n	%	% Surg	HR	(95% CI)	HR	(95% CI)
1 (high) 2 3 4 5 (low)	30,956 30,297 30,036 30,351 30,325	20% 20% 20% 20% 20%	11% 9% 8% 7% 4%	0.96 0.97 0.98 1.01 1.00	(0.94, 0.97) (0.95, 0.98) (0.97, 1.00) (0.99, 1.03)	0.96 0.97 0.99 1.01 1.00	(0.95, 0.98) (0.95, 0.98) (0.97, 1.00) (1.00, 1.03)
χ^2 p for trend				44.33 <0.001		44.40 <0.001	

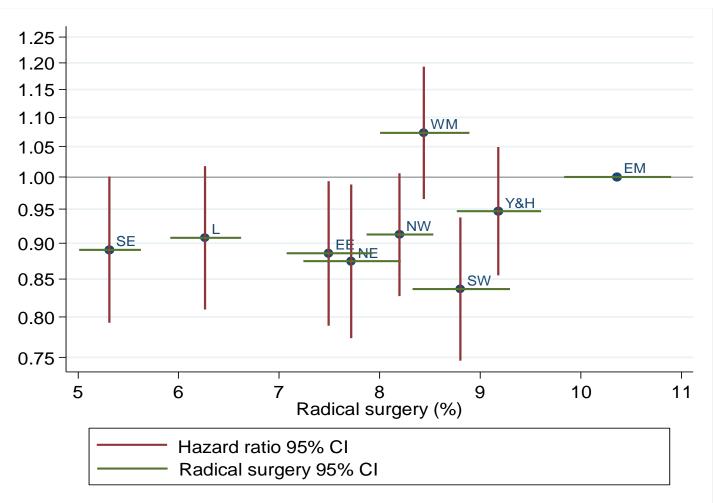


Survival analysis: resected NSCLC patients

Resected NSCLC patients				Unadjus	ted	Adjusted for sex, age and SES	
Surgery quintile	n	0/2	% Surg	HR	(95% CI)	HR	(95% CI)
quirtile	- 11	70	70 Surg	1111	(9376 CI)	1111	(9378 CI)
1 (high)	3,542	30%	100%	1.19	(1.09, 1.31)	1.14	(1.04, 1.25)
2	2,638	22%	100%	1.14	(1.04, 1.26)	1.09	(0.99, 1.20)
3	2,327	20%	100%	1.09	(0.98, 1.20)	1.06	(0.96, 1.17)
4	2,068	17%	100%	1.12	(1.01, 1.24)	1.10	(0.99, 1.22)
5 (low)	1,338	11%	100%	1.00		1.00	
χ^2				12.87		5.65	
p for trend				<0.001		0.02	

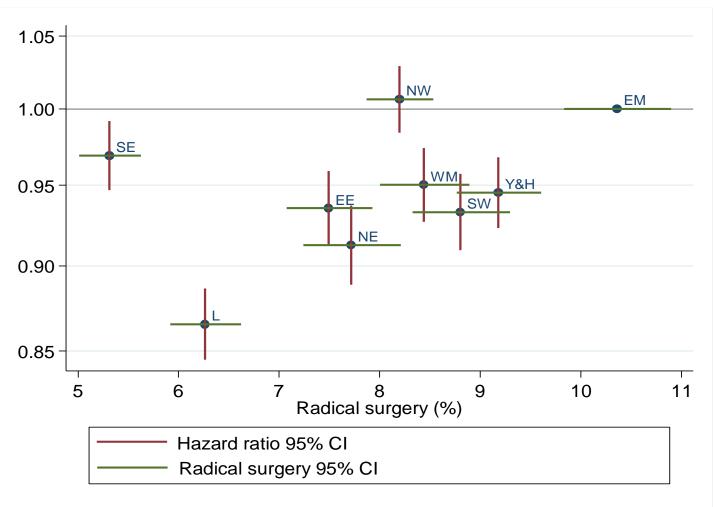


Survival of resected NSCLC patients, adjusted for age, sex and SES





Survival of all NSCLC patients, adjusted for age, sex and SES





Discussion

- PCT areas with high resection rates have high overall survival
 - ? Eligibility for resection
 - ? Selection of patients
- PCT areas with the highest resection rates have low survival of the resected patients
 - ? Resection of "unresectable" patients
 - ? Diminishing returns



Regional variations

Survival of resected NSCLC:

Low in West Midlands and East Midlands

Survival of all NSCLC:

Low in North West and East Midlands

High in London



Acknowledgment

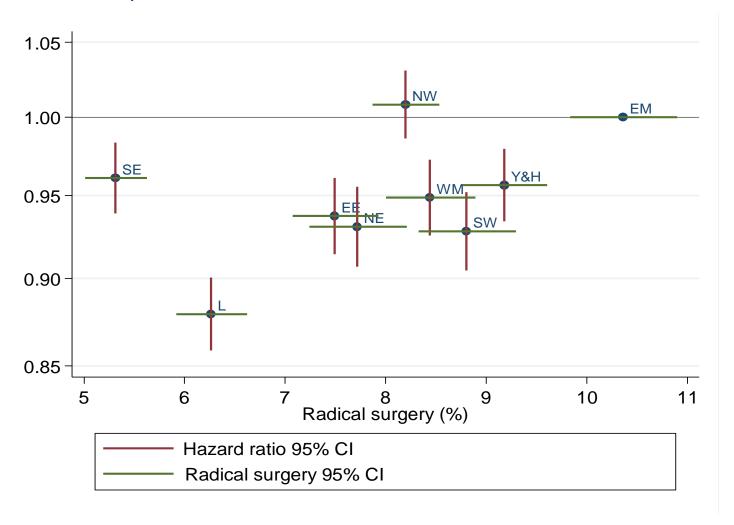
This is a contribution from the National Cancer Intelligence Network (www.ncin.org.uk) and is based on information collected and quality assured by the regional cancer registries in England (www.ukacr.org).



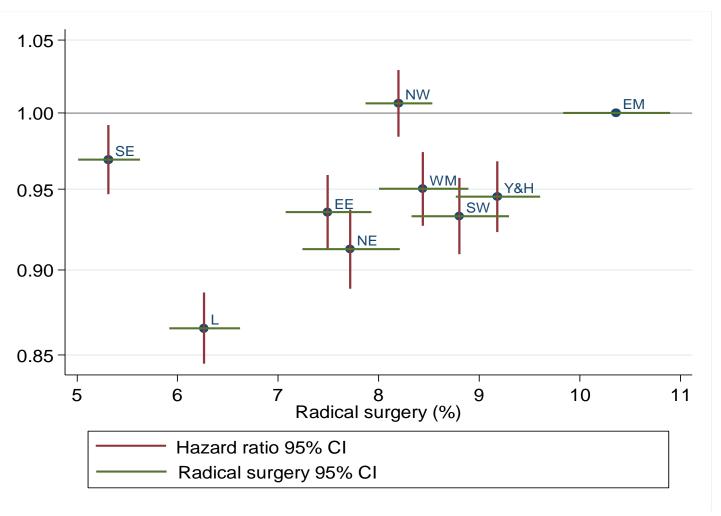




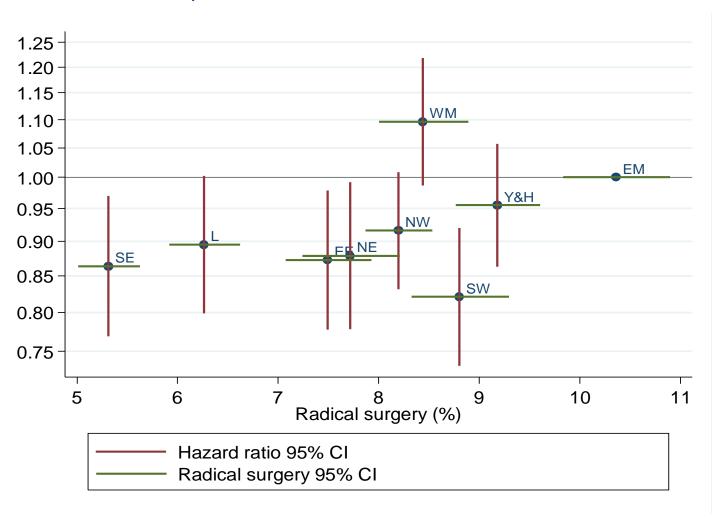
Survival of all NSCLC patients



Survival of all NSCLC patients, adjusted for age, sex and SES



Survival of resected NSCLC patients



Survival of resected NSCLC patients, adjusted for age, sex and SES

