



Recording and reporting of cancer recurrences

Public Health England (PHE) has recently been asked by Government, cancer charities and patient representatives about data on cancer relapse and recurrence. We are writing to let you know that we will be making Trust-level recurrence data publicly available later this month. In advance of this publication we are sharing the data with Trusts so that they can review their own figures.

As cancer treatments and survival improve there has been a growing interest in the relapse and recurrence of the disease. The time between treatment and relapse is becoming an increasingly important measure of the success of initial treatments and the quality of life of those living with and beyond cancer. One of the major recommendations of the Independent Cancer Taskforce was that accurate data should be collected on all patients where their disease recurs. The National Cancer Registration and Analysis Service in PHE has committed to supporting NHS England in improving data collection on these patients.

Details about the attached workbook are provided overleaf. We know that the counts attached almost certainly do not represent an accurate picture of disease recurrence for cancer patients, and we accept that not all cases of recurrent disease in patients will be known to each Trust. Across England, Trusts are on average reporting 4% recurrence when compared to cancer incidence; based on other assessments, we think this is approximately a fifth of the recurrences we would expect.

To help improve the completeness and reliability of the data we collect we are keen to work with Trusts to establish robust processes. If you would like us to help, please contact your local Data Liaison Manager (see contact list) and we will come and meet with you, review your processes and systems and provide any training and advice required.

We look forward to working with you further in this important area.

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About the workbook

The National Cancer Registration and Analysis Service has access to recurrence records submitted as part of the Cancer Outcomes and Services Dataset (COSD) and to the Cancer Waiting Times (CWT) treatment dataset for diagnosed cancer patients, which records when the treatment is for a recurrence. We are releasing counts based on recurrence data in these datasets at Trust level.

The workbook presents recurrence data reported for both the COSD and CWT datasets for 2014 by Trust. Data is broken down by all sites, breast (C50 and D05), all other malignant cancers (C00-C97 excluding C44) and C44 & D codes. Incidence for 2014 has been shown for each Trust listed. A small number of Trusts have been excluded from the workbook, mainly because of their specialist nature and the relatively small numbers of cancer registrations. Recurrence records were included if they had details on date, patient and Trust; incomplete records have therefore not been counted.

There are differences between the numbers of recurrences reported via COSD and CWT. Half of Trusts record more cases in CWT than COSD, and half record fewer. These two datasets do count slightly different things: COSD includes cases with a diagnosis, whereas CWT includes cases treated. However, this is not enough to account for the difference being reported.

Please contact NCRASenquiries@phe.gov.uk with any questions regarding the methodology outlined above.