Strict embargo: 00:01hrs Wednesday 18 June, 2008

CANCER DEATHS 'SIGNIFICANTLY HIGHER' IN THE NORTH OF ENGLAND

PEOPLE living in the north of England are more likely to die from cancer than the rest of the country, according to the first report produced by the National Cancer Intelligence Network (NCIN), and presented at the network's launch event today (Wednesday).

The report – looking at data from 2005 – found that cancer deaths are approximately 20 per cent higher in Cancer Networks* in the north than the rest of England. Cancer deaths were lowest in Networks in the south and midlands.

Experts believe this north-south divide is due to a number of factors, especially higher smoking rates in the north, which are linked to increased risks of smoking-related cancers.

For example, 68 per 100,000 men in the North of England Cancer Network died from lung cancer in 2005, compared with the England average of 51. The Surrey, West Sussex and Hampshire Cancer Network had the lowest rate of deaths from lung cancer, with around 36 men in every 100,000 dying from the disease.

While lung cancer remains the biggest cause of cancer death in men across England, the most commonly diagnosed cancer in each of the 30 Cancer Networks was prostate cancer. An average of 97 in every 100,000 men were diagnosed with this disease in 2005 compared with 60 for lung cancer, but there were no clear geographic patterns in the incidence of prostate cancer.

In women, breast cancer was the most commonly diagnosed cancer in every Cancer Network, with Networks in the south having the highest rates. The biggest cancer killers in women varied geographically, with lung cancer deaths more common in the north and breast cancer in the south.

Professor David Forman, from the University of Leeds, and information and analysis lead for the NCIN, said: "These figures show us that some of the past trends aren't changing – cancer death rates remain higher in the north than the rest of England.

"Smoking is responsible for nearly nine in ten cases of lung cancer. More people in the north smoke, and this explains why lung cancer rates are so much higher. There are also higher levels of deprivation in the north, which could contribute to cancer risk through other means – we know that deprivation is linked to later diagnosis, which can affect mortality.

"The emergence of prostate cancer, ahead of lung cancer, as the most common cancer in men is, however, a relatively new development and could be due to a combination of a general decline in smoking rates among men and a greater awareness of prostate cancer, leading to more men asking their doctor for a PSA** test."

The NCIN is a new project that will bring together up to 22 million NHS cancer records to create the largest patient-based cancer data resource in the world. It launches today with the publication of this report – the first of many to analyse outcomes from individual cancer networks to pinpoint areas of cancer services that could be targeted for improvement.

The NCIN will merge individual patient data from cancer registries, hospitals and NHS data sets, initially focusing on England but with a view to include information from across Wales, Scotland and Northern Ireland.

Professor Sir Alex Markham, chair of the NCIN and the NHS Research Capability Programme, and professor of medicine at the University of Leeds, said: "Data like this are vitally important if we are to work out why there are variations across the country in the chances of getting and dying from cancer, and how to tackle this.

"The NCIN will bring together statistics from the thirty cancer networks in England, enabling us to see which areas need improvement.

"Through the NCIN, we are beginning to harness the power of the NHS as a research tool. Looking at cancer rates in this way can help target public health policy where it matters, and this is vitally important."

ENDS

For media enquiries please contact the NCIN press office on 020 7061 8300 or, outof-hours, the duty press officer on 07050 264 059.

Notes to editors:

* Data from the north of England, with the highest lung cancer and all cancer mortality rates, included figures collected from the Merseyside and Cheshire, North of England, Greater Manchester and Cheshire, North Trent, Lancashire and South Cumbria Cancer Networks.

Cancer Networks in the south and midlands, with the lowest overall cancer mortality rates, included Surrey, West Sussex and Hampshire, West London, Three Counties and Dorset.

This data was extracted in July 2007 and is based on cancer deaths and cases diagnosed in 2005. The figures were broken down by the 30 regional cancer networks in England.

** PSA, or prostate-specific antigen, is a chemical produced by the prostate. PSA levels can be measured in the blood and are usually raised when a man has prostate cancer. But all men have slightly different levels of PSA, so it is hard to say what level is 'normal', and what is 'high'. This means that not all men with high PSA levels have prostate cancer. And not all men with prostate cancer have high PSA levels.

The NCIN is currently funded by the Department of Health, Cancer Research UK, Macmillan Cancer Support, Breakthrough Breast Cancer, the Medical Research Council, the National Institute for Health Research National Cancer Research Network and onCore UK. Once the NCIN is fully operational, funding for research projects will be provided by a range of other funders through normal scientific peer-review processes.

About the National Cancer Research Institute (NCRI)

The National Cancer Research Institute (NCRI) was established in April 2001. It is a partnership between government, the voluntary sector and the private sector, with

the primary mission of maximising patient benefit that accrues from cancer research in the UK through coordination of effort and joint planning towards an integrated national strategy for cancer research. www.ncri.org.uk

The NCRI consists of: The Association of British Pharmaceutical Industry (ABPI); The Association for International Cancer Research; The Biotechnology and Biological Sciences Research Council; Breakthrough Breast Cancer; Breast Cancer Campaign; Cancer Research UK; CHILDREN with LEUKAEMIA, Department of Health; Economic and Social Research Council; Leukaemia Research Fund; Ludwig Institute for Cancer Research; Macmillan Cancer Support; Marie Curie Cancer Care; The Medical Research Council; Northern Ireland Health and Personal Social Services Research & Development Office; Roy Castle Lung Cancer Foundation; Scottish Executive Health Department; Tenovus; Wales Office of Research and Development for Health & Social Care; Wellcome Trust; and Yorkshire Cancer Research.

About the National Cancer Intelligence Network (NCIN)

The NCIN will coordinate the collection, analysis and publication of comparative national information on diagnosis, treatment and outcomes for types of cancers and types of patient, in a way which is useful to patients, commissioners and service providers and other interested parties. As part of the NCRI, partners will help fund research on the data collated by the NCIN, facilitating a more informed analysis of cancer services than has ever been possible before. For more information visit www.cancer.nhs.uk/ncin