

**Strict Embargo 00:01 hrs**

Friday 17 June, 2011

## **DEPRIVATION LEADS TO OVER 2,600 CANCER DEATHS A YEAR**

MORE than 2,600 deaths in England from some of the most common types of cancer could be avoided each year if all cancer patients had the same chance of survival as the most affluent section of society, a new piece of research suggests.

The study\*, presented today (Friday) at the National Cancer Intelligence Network conference in London, found that the most well-off patients enjoyed a higher survival rate than the poorest patients.\*\*

Over 2,600 deaths from 14 of the most common forms of cancer\*\*\* could be avoided each year in England in the five years after diagnosis if all patients had the same chance of survival regardless of their economic background.

The difference in survival between the richest patients and the poorest was the widest in the month after diagnosis.

Researchers from King's College London suggested that more cancer patients from deprived backgrounds were diagnosed when the disease was at a late stage and often harder to treat – leading to the differences in survival.

This variation in survival could be due to many reasons - poorer people may be delaying seeing their doctor about worrying symptoms or they may be less likely to go for screening.

Not surprisingly, the greatest numbers of avoidable deaths were from breast, lung, bowel and prostate cancers - the four most common cancers in the UK.

The results showed that the number of deaths each year for breast cancer could be reduced by around 490, by 330 for lung cancer, around 690 for bowel cancer and around 330 for prostate cancer.

Margreet Luchtenborg, lead author of the study based at King's College London, said: "This study shows that deprivation leads to inequality in survival for the most common cancers in England, especially in the month immediately after diagnosis.

"This could be because poor patients are more likely to be diagnosed with a late stage cancer."

The study looked at more than 1.5 million cancer patients in England diagnosed with 14 of the most common cancer types between 1999 and 2007 and analysed survival from 2004 to 2007 for five different groups based on measures of wealth.

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Chris Carrigan, head of the NCIN, said: “This study once again stresses the urgent need to improve the health of people living in deprived areas and to make sure all cancer patients have an equal chance of surviving their cancer.

“Deprivation is one of the biggest causes of cancer inequality in this country. We know that people from more deprived areas are more likely to smoke or be very overweight. They are also less likely to be aware of signs and symptoms of cancer, probably leading to later diagnosis, which may further increase their chances of dying from their disease.

“We need to take a close look at factors like late diagnosis, uptake of screening and variations in treatment for people from different social and economic backgrounds if we are to reduce inequality in cancer survival.

“But in the meantime everyone can do their bit by giving up smoking, eating sensibly and seeing a GP as soon as possible if they notice anything unusual.”

### ENDS

For media enquiries please contact Angela Balakrishnan in the NCIN press office on XXX, the London office on 020 3469 8300 or, out-of-hours, the duty press officer on 07050 264 059.

### Notes to Editors

\*Lüchtenborg, M et al, – *Impact of Socio-Economic Deprivation on Cancer Survival in England* (2011)

\*\*Deprivation is calculated using the Income Domain of the national Index of Multiple Deprivation, and each small area is given a score showing how deprived they are. These deprivation scores have then been grouped into 5 groups (quintiles), each containing one fifth of the population. Postcodes at diagnosis were used to allocate patients to their deprivation quintile.

\*\*\*14 of the most common cancers in England looked at in this study were lung, breast, prostate, colon, rectal, oesophageal, stomach, pancreatic, womb, cervical, ovarian, bladder, melanoma skin cancer and non-Hodgkin lymphoma.

Study used data from the NCIN's National Cancer Repository Dataset

### About the National Cancer Intelligence Network (NCIN)

- The NCIN was established in June 2008 and its remit is to coordinate the collection, analysis and publication of comparative national statistics on diagnosis, treatment and outcomes for all types of cancer
- As part of the National Cancer Research Institute, the NCIN aims to promote efficient and effective data collection at each stage of the cancer journey
- Patient care will be monitored by the NCIN through expert analyses of up-to-date statistics
- The NCIN will drive improvements in the standards of care and clinical outcomes through exploiting data

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- The NCIN will support audit and research programmes by providing cancer information
- Visit [www.ncin.org.uk](http://www.ncin.org.uk) for more information

### **Kings College London**

King's College London is one of the top 25 universities in the world (*Times Higher Education* 2009) and the fourth oldest in England. A research-led university based in the heart of London, King's has nearly 23,000 students (of whom more than 8,600 are graduate students) from nearly 140 countries, and some 5,500 employees. King's is in the second phase of a £1 billion redevelopment programme which is transforming its estate.

King's has an outstanding reputation for providing world-class teaching and cutting-edge research. In the 2008 Research Assessment Exercise for British universities, 23 departments were ranked in the top quartile of British universities; over half of our academic staff work in departments that are in the top 10 per cent in the UK in their field and can thus be classed as world leading. The College is in the top seven UK universities for research earnings and has an overall annual income of nearly £450 million.