DAHNO 9th ANNUAL REPORT
Highlights from the ninth annual report

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Annual Report structure

- 9th Annual report
    - Electronic report with format change
    - Report asks specific audit questions then provides a clinical commentary on results with identification of the data source used for the comment
    - Links to more detailed analyses in report
- 10th collection about to complete
- Surgeon level reporting on behalf of BAHNO in November 2014

What's new in the 9th AR

- Continued collection of all anatomic sub sites
- External data sources to supplement audit RTDS only this year. Unable to link to HES
- Confidence intervals presented for case mix variance
- Ideal Patient Pathway improvements
- More answers to pathway questions
- Better multi-professional care assurance
- Surgeon level reporting delivered on behalf of BAHNO

9th Annual Report

- The audit has received 8358 new diagnoses, (8272 eighth Annual Report)

- Universal contribution was again seen in England and Wales for the second time

- Data submission rates have improved across the breadth of the pathway, but again significant variation between networks was seen

9th Annual Report

- Submission of staging improved to 81.5% from the 79.9%, seen last year, 6 cancer networks had poor levels of recording

- Performance status submission has remained static at 65.5% of submitted cases and comorbidity data submission increased 6.4% to 44.5%

- Significant variation exists between networks in their ability to provide the three above data items

- 5 networks are to be congratulated for achieving over 75% for all three items, whilst a number of networks had minimal or zero submissions

9th Annual Report

- The audit still endeavours to deliver risk adjusted outcomes, but to achieve this it is essential that all networks contribute high levels of staging, performance status and comorbidity data to facilitate this much anticipated output

- The audit now contains data on over 45,000 cases of head & neck cancer, providing a significant repository of diagnostic & treatment data of head & neck cancer

9th Annual Report

- For the first time an overview of case mix variance with 99.0 per cent confidence levels across five variables has been provided and this will inform the risk adjustment model.

- Only one cancer network fell outside the confidence limits for each of; mean age at diagnosis, late stage at diagnosis and poor performance status. Therefore, these factors are likely to have limited discriminatory capability.

9th Annual Report

- When looking at co-morbidity and deprivation, cancer networks had either significantly worse or better status in comparison to the English national average, making them more useful comparators.
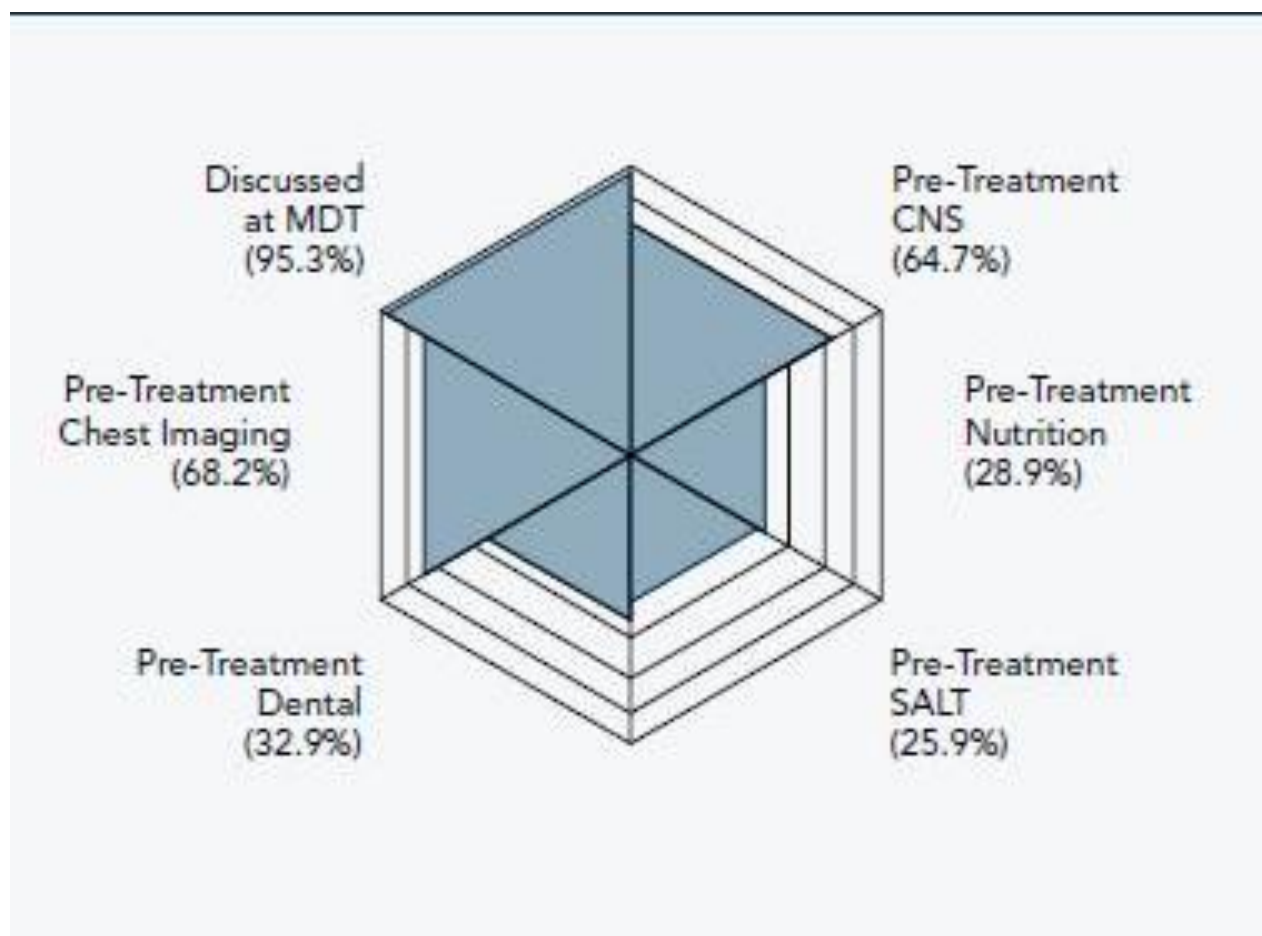
Pathways of care - Tongue cancer

- A further rise in the number of oral tongue tumours submitted was seen again this year. Of the 1,251 cases, 804 underwent primary surgical treatment, 43.7 per cent underwent a neck dissection,

- On pre-treatment staging of the neck 56.7 per cent of cases were N0 and 28.4 per cent N+ve

- Of 351 surgical cases that were N0 at presentation, 91 (25.9%) were upstaged reflecting difficulties in accurately staging the neck.

Pathways of care - Oropharynx cancer

- In oropharynx cancer an expanded volume of data is being recorded. As part of a joint NCIN work plan the complex nature of treatment modalities is being explored by combining DAHNO data with RTDS and SACT data streams

- The use of multiple combined data streams offers exciting opportunities to fully understand the impact of multimodality treatment variance

Ideal Patient pathway 6 indicators

Crude 3 year survival

Cumulative survival analysis by submission cohort and anatomic subsite, 3 years

Primary site group	3-years crude survival (95% confidence intervals)						
	2008-09				2009-10		
	Total	Survived		95% CI	Total	Survived	
	n	n	%		n	n	%
Larynx	1518	1011	66.6	(64.2 - 68.9)	1651	1085	65.7
Oral Cavity	1665	1001	60.1	(57.7 - 62.4)	1896	1135	59.9
Oropharynx	1522	975	64.1	(61.6 - 66.4)	1924	1227	63.8
Hypopharynx	351	126	35.9	(31.1 - 41.0)	390	142	36.4
Nasopharynx	180	114	63.3	(56.1 - 70.0)	196	120	61.2
Major Salivary Glands	412	239	58.0	(53.2 - 62.7)	448	298	66.5
Total	5648	3466	61.4	(60.1 - 62.6)	6505	4007	61.6

IMRT in head & neck cancer

- The audit has looked at the use of IMRT for the first time by looking at RTDS (2012 data)

- 29.7% patients having radiotherapy in England received IMRT

- Significant Network variation 0% - 86%

- Needs further investigation but proves concept of data stream linkage

Use of DAHNO Data

- DAHNO contains data on over 45,000 cases of head & neck cancer

- 12,570 cases of larynx cancer 14,700 cases of oral cavity cancer, 11,200 cases of oropharynx cancer and 2400 cases of major salivary gland cancer

- NCIN work streams

- Application for use of data for research purposes

Use of DAHNO data

- We are keen to see this data resource used to further improve the care our patients receive and would encourage interested parties to apply either to the audit or NCIN via chair of SSCRG

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Summary

- Networks & trusts are to be congratulated on the high levels of cases ascertainment & depth of data for the 9th AR

- The high level of case ascertainment allows a more accurate picture of H&N cancer care to be provided

- Data to support risk adjustment has improved slowly, but remains poor from some networks

- Detailed and useful information on treatment pathways, supplemented by other sources

Acknowledgements

- Contribution from expert panel members

- Head and Neck Site Specific Clinical Reference Group (NCIN) members

- Cancer Registries – South East KIT and CASU for analysis support

- All individuals, Trusts and Networks who have contributed so far

Thank you

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Chair NCIN Head and Neck SSCRG