



## Routes to diagnosis 2015 update: cervical cancer

# National Cancer Intelligence Network Short Report

### Introduction

The routes to diagnosis (RtD) study has been updated to include all patients diagnosed from 2006 to 2013, covering 2 million newly diagnosed tumours. The methodology has remained the same as in previous RtD publications. Results have been published for 57 cancer sites in workbooks that can be found at the following link

[www.ncin.org.uk/publications/routes\\_to\\_diagnosis](http://www.ncin.org.uk/publications/routes_to_diagnosis).

This briefing describes the national RtD results for cervical cancer. The definition used for this briefing is ICD10 C53. It includes variation in routes over time, by age, deprivation and ethnicity and variation in survival by time from diagnosis, age and deprivation.

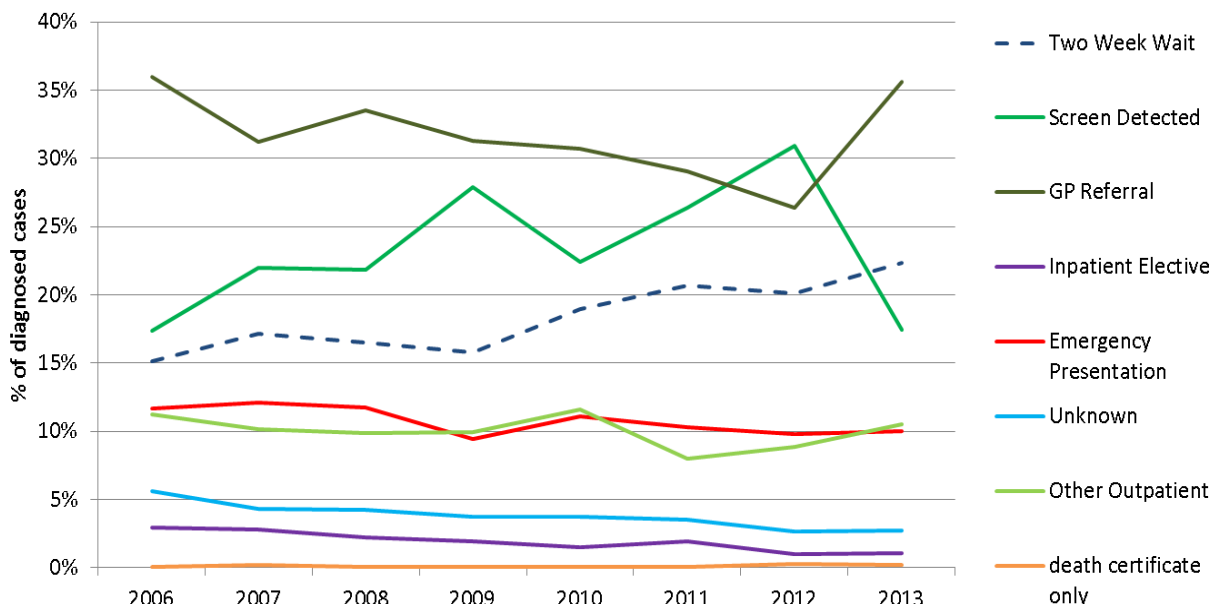
### Key messages

New data published for cervical cancer

The data shows variation by route over time, by age, deprivation and ethnicity and also variation in survival

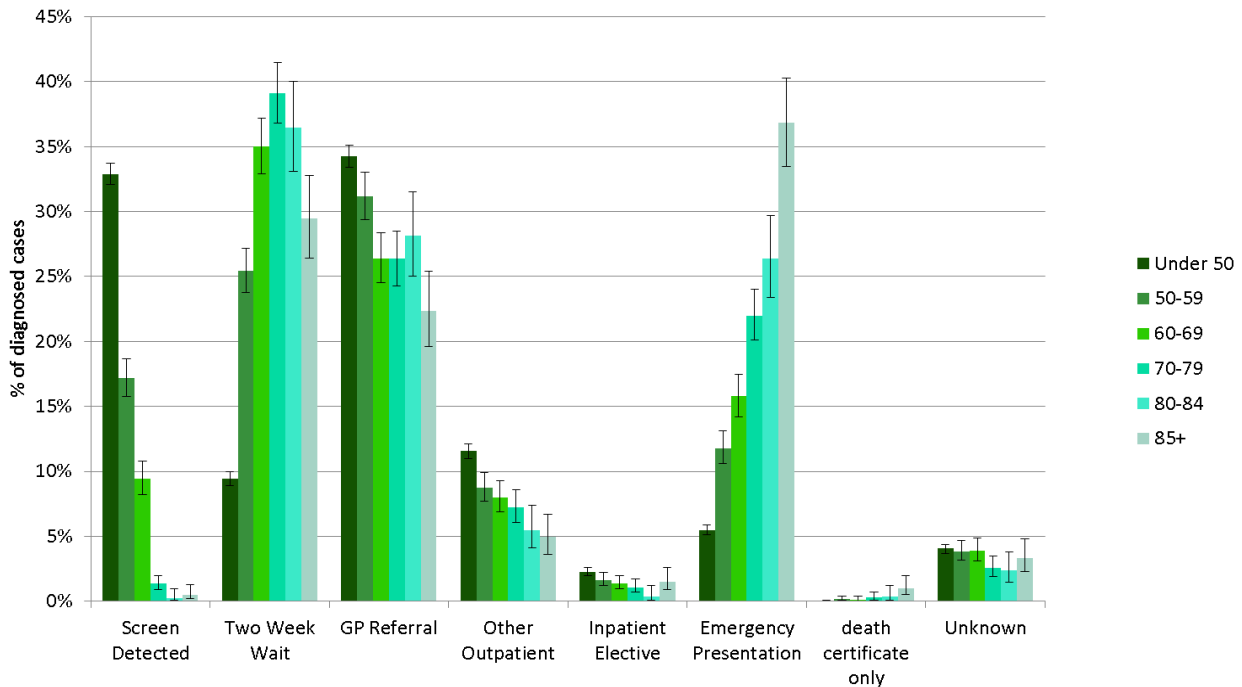
### Summary of RtD for cervical cancer

GP referral was the commonest route, while two week wait (TWW) significantly increased from 15% in 2006 to 22% in 2013. The proportion of screen detected has also increased over the time period, peaking at 31% in 2012.

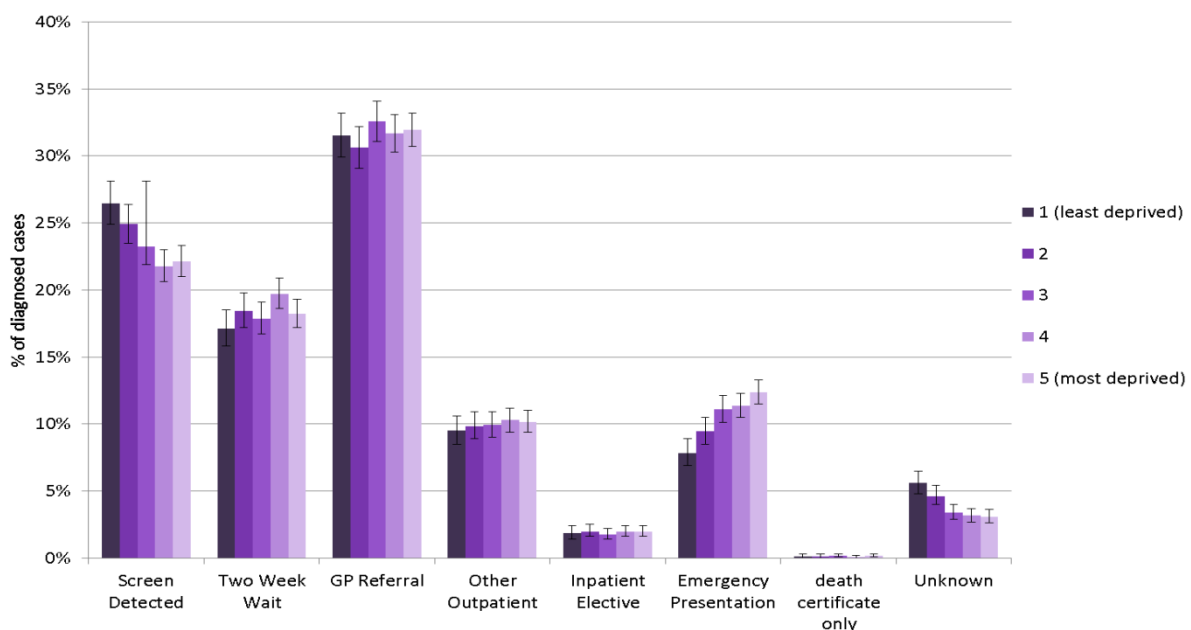


### Route breakdowns for cervical cancer, 2006 to 2013

Age: emergency presentation generally increased with increasing age with a 31% difference between those aged over 85 and those aged under 50. Diagnoses through managed routes generally decreased with increasing age.

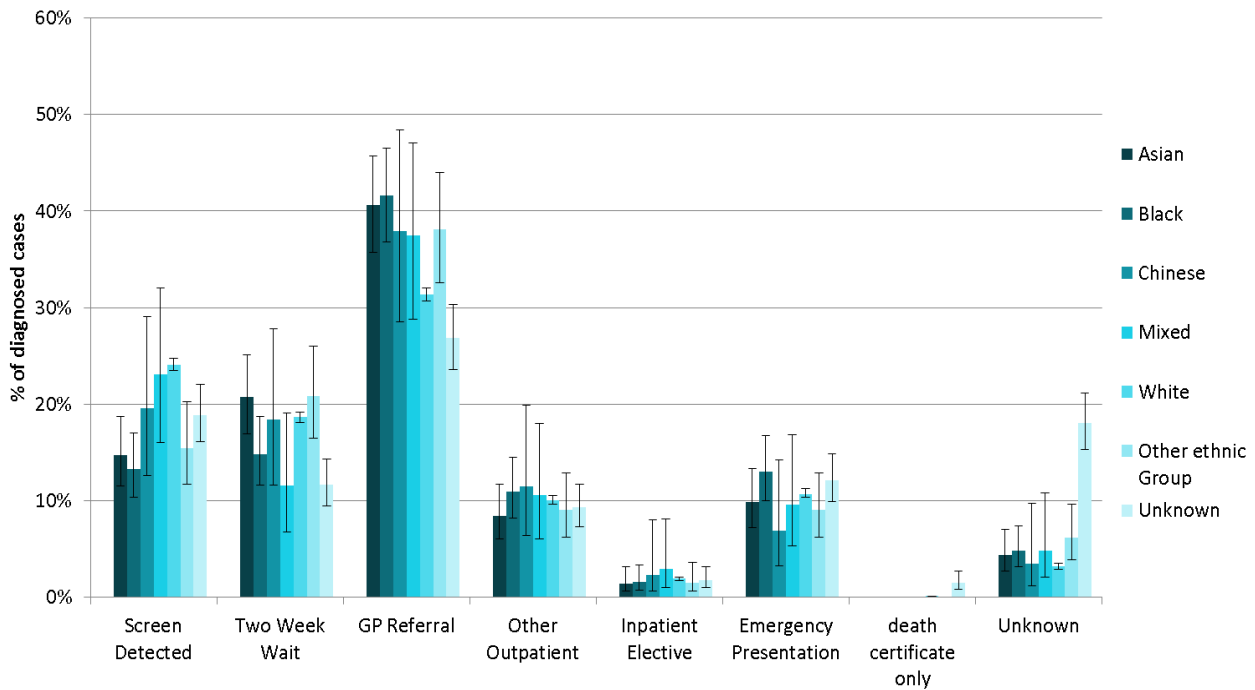


Deprivation: emergency presentation increased with increasing deprivation with a 4% difference between those living in the least deprived areas and those living in the most deprived areas. There was a significantly lower proportion diagnosed through screening among women living in the most deprived areas compared to women living in the least deprived areas; 22% compared to 26%, respectively.



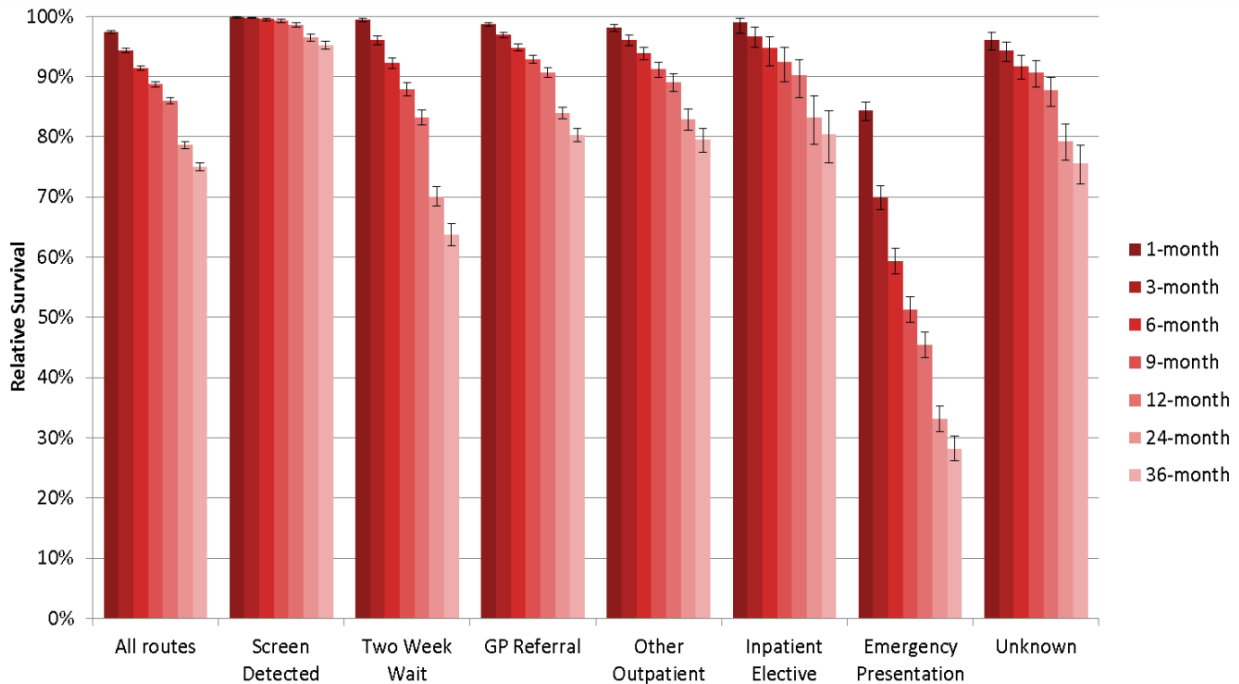
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Ethnicity: there was some variation by ethnicity, although small numbers mean that confidence intervals are wide. The proportion of women of white ethnicity diagnosed through screening was significantly higher compared to women of black, Asian and other ethnic groups.

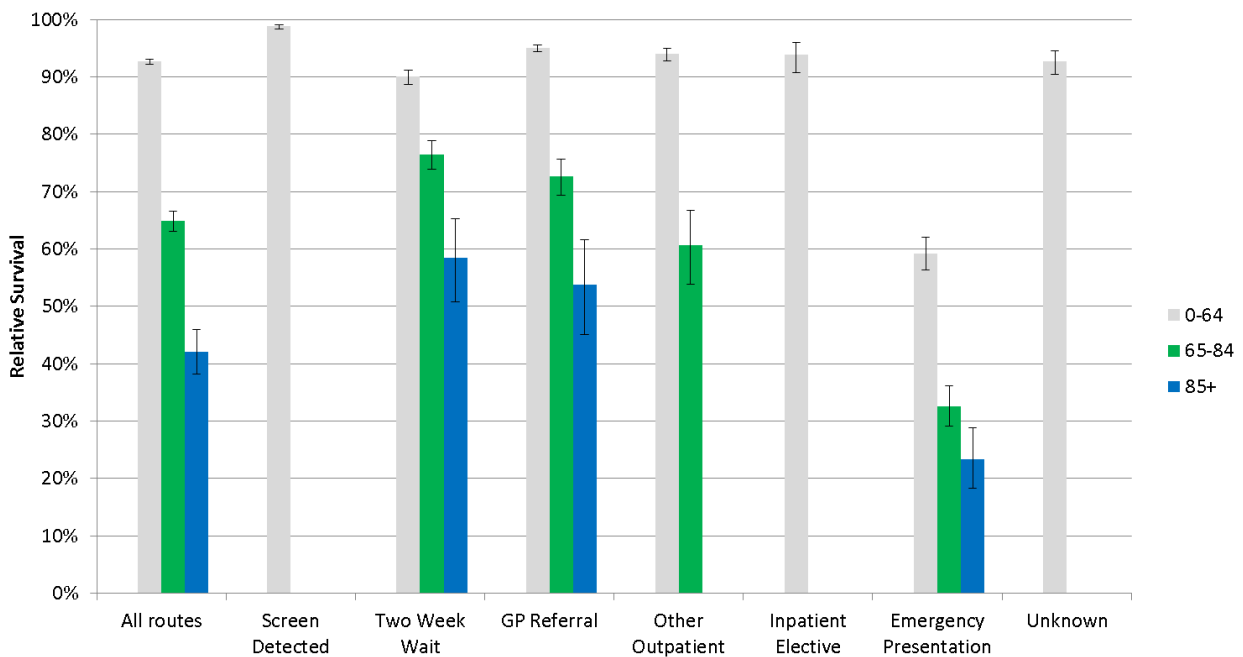


### Survival results for cervical cancer, 2006 to 2013

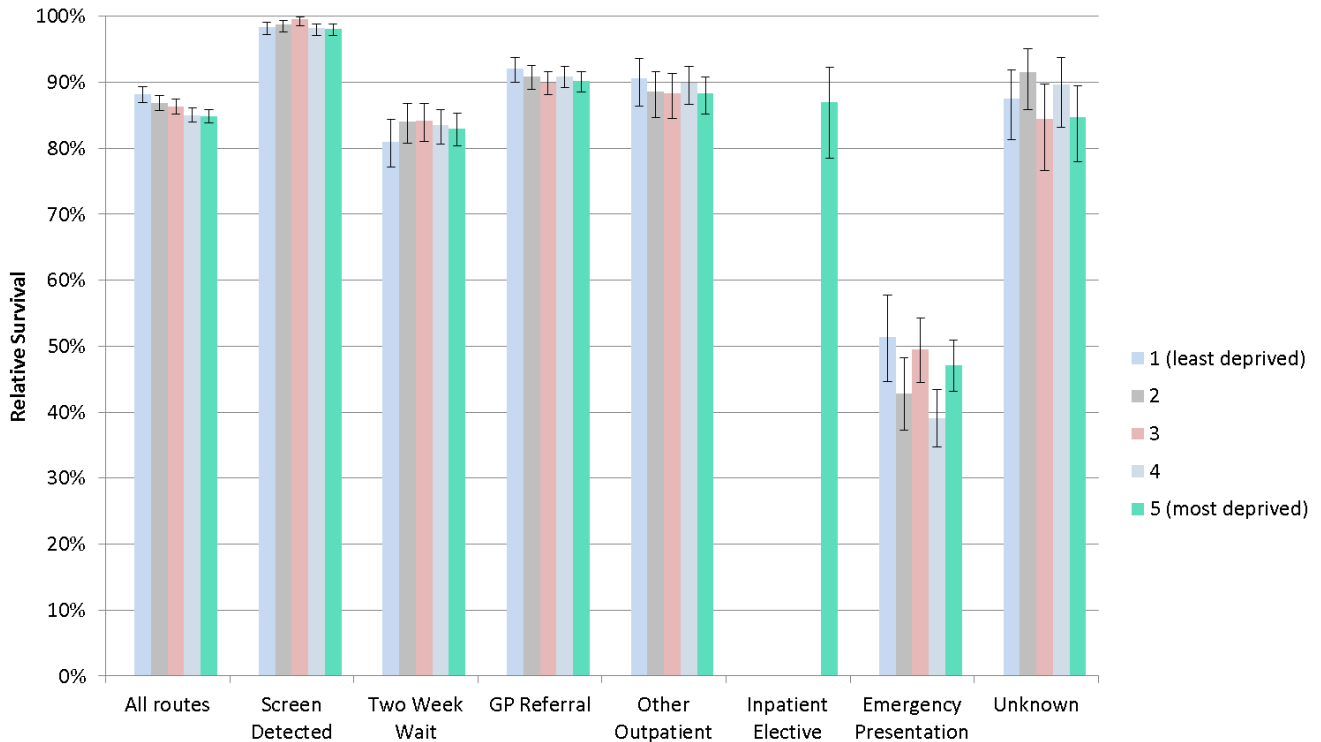
Survival among women whose cancer was screen detected was generally higher than any other route, ranging from 100% at one month to 95% at three years after diagnosis. Survival for women diagnosed through emergency presentation was significantly lower than other routes; ranging from 84% at one month to 28% at three years after diagnosis.



Age: one year survival significantly decreased as age increased across all routes to diagnosis. Women diagnosed through emergency presentation had significantly lower survival compared to women of the same age diagnosed through a managed route.



Deprivation: overall, one year survival is significantly lower among women living in the most deprived areas compared to those living in the least deprived areas. The route with the greatest difference was emergency presentation at 12%, ranging from 39% in the second most deprived group to 51% in the least deprived group.



**Find out more:**

This report forms part of a suite of publications from NCIN’s Routes to Diagnosis project: [www.ncin.org.uk/publications/routes\\_to\\_diagnosis](http://www.ncin.org.uk/publications/routes_to_diagnosis)

**Other useful resources within the NCIN partnership:**

What cancer statistics are available and where can I find them? [www.ncin.org.uk/publications/reports](http://www.ncin.org.uk/publications/reports)

Public Health England’s National Cancer Intelligence Network (NCIN) is a UK-wide initiative, working to drive improvements in cancer awareness, prevention, diagnosis and clinical outcomes by improving and using the information collected about cancer patients for analysis, publication and research. [www.gov.uk/government/organisations/public-health-england](http://www.gov.uk/government/organisations/public-health-england)

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