

Strict embargo: 00.01hrs
Monday 14 June, 2010

DEPRIVATION UNDERLIES THOUSANDS OF CANCER CASES EVERY YEAR

THERE could be as many as 14,000 fewer cases of cancer each year in England if everyone was as healthy as the richest 20 per cent in the country.

And the difference between the classes is more marked among men than women. Among men there were 21 per cent more cases of cancer in the most deprived areas compared to the least deprived, whereas the gap among women was 11 per cent.

The report from the National Cancer Intelligence Network (NCIN) published today (Monday) in support of the National Cancer Equalities Initiative (NCEI), which launches the new Cancer Equalities Portal*, highlights a huge deprivation gap that experts believe is caused by unhealthy habits like smoking, late diagnosis of cancer, differences in treatment choices and a lower uptake of screening in more deprived areas.

The Cancer Equalities Portal, published ahead of the annual NCIN conference** this week, brings together a range of information on cancer treatment, screening, incidence and survival with the aim of tackling inequalities across England.

Chris Carrigan, head of the NCIN, said: “People are generally more likely to smoke or be obese in the most deprived areas. In addition to the higher rates, lower awareness of signs and symptoms of cancer – leading to later diagnosis – may further increase poorer people’s risk of dying from the disease.

“These results explain why urgent action must be taken to improve the health of people living in deprived areas, and to ensure that all cancer patients have an equal chance of surviving the disease.

“Poverty is the main reason for cancer inequalities, but this is the first time all the information we have on inequalities has been brought together in an accessible form. Deprivation is one of the biggest causes of cancer inequalities in this country.”

Between 2000 and 2004, in the most affluent areas of England, 345 in every 100,000 people were diagnosed with cancer compared with 399 in every 100,000 in the most deprived areas a difference of 16 per cent.

Chris Carrigan, head of the NCIN, continued: “Although men are generally more likely to get cancer, much of the difference we see here is down to lung cancer – the most common cause of cancer death. It accounts for a bigger proportion of men’s cancers than women’s cancers.”

Lung, head and neck, oesophageal, bladder, cervical, stomach and liver cancers were more common among those living in deprived areas. In contrast malignant melanoma, breast and prostate cancers were associated with affluence.

Care Services Minister Paul Burstow said: "It's incredibly important that we reduce inequalities in cancer care.

“Late diagnosis, uptake of screening and variations in treatment choice are all factors we are looking at very closely.

“But everyone can do their bit too by eating sensibly, giving up smoking and seeing a GP as soon as possible if they have concerns.”

Professor Sir Mike Richards, national cancer director, said: “Our vision is to achieve high quality, personal treatment and care for everyone affected by cancer but we know that inequalities between different groups still exist. The information brought together in the Cancer Equalities Portal highlights the scale of this challenge but will also help us to tackle the problems and allow us to measure our success.”

ENDS

For media enquiries, please contact Laura Dibb in the NCIN press office on 020 7061 8054 or, out of hours, the duty press officer on 07050 264 059.

Notes to editors

* The Cancer Equalities Portal and accompanying reports can be accessed at www.ncin.org.uk/equalities/

**The annual UKACR and NCIN conference will take place on Thursday 17 and Friday 18 June <http://www.ncin.org.uk/>

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
- The NCIN will support audit and research programmes by providing cancer information
- Visit www.ncin.org.uk for more information