Lung Cancer Insight Pack

North Lincolnshire JSNA

North Lincolnshire Public Health Intelligence Team

North Lincolnshire Council

www.northlincs.gov.uk

Version 1.5

Lung Cancer

- Lung cancer is the third most common type of cancer in England and is common in both males and females₁ Whilst lung cancer can affect people of any age, it most frequently occurs in people aged over 40, and 44% of cases arise in people aged 75 and over.₂
- In the early stages of lung cancer, signs or symptoms are not usually present, making it hard to detect, but as the disease progresses symptoms become more prevalent and can include a persistent cough, coughing up blood, persistent breathlessness, unexplained tiredness, unexplained weight loss and an ache or pain when breathing or coughing.₂
- The treatment offered to lung cancer patients will depend upon the stage and type of lung cancer, as well as other health factors, but common treatments include surgery, chemotherapy, radiotherapy, immunotherapy and targeted therapy drugs.₃
- Smoking is the biggest risk factor for lung cancer, with 90% of people who get lung cancer being smokers or exsmokers and 72% of lung cancer cases in the UK being caused by smoking. For people who quit smoking, their risk of lung cancer decreases over time.⁴ Whilst smoking is the main risk factor, other risks and causes include occupational risks from asbestos, silica and diesel exhaust fumes, air pollution, prior lung disease such as COPD, exposure to radon gas and a family history of lung cancer.⁵

Newly Diagnosed Cases, of Lung Cancer, by Year and Sex in England



Lung cancer registrations here represented by malignant neoplasm of trachea, bronchus and lung

- Over the last 20 years newly diagnosed cases of lung cancer have fallen in males but increased in females.
- In **2017**, the rate for newly diagnosed cases in males remained higher than for females, although the gap appears to be beginning to close.
- In **2017**, the rate for **males** was **86.9** per 100,000. A fall of 41 per 100,000 since 1995.
- In 2017, the rate for females was 67 per 100,000. An increase of 15.6 per 100,000 since 1995. 6 - ONS 2019

North Lincolnshire Lung Cancer Registrations per 100,000 (3 Year Range)

Area	Recent Trend	Count	Value	
England	-	1 1 9,263	77.1	
Yorkshire and the Humber region	-	14,008	90.9	
Kingston upon Hull	-	802	132.3	
Leeds	-	2,103	112.5	le de la companya de
Wakefield	-	1,026	103.0	⊢I
Doncaster	-	914	102.8	⊢I
North East Lincolnshire	-	495	101.8	⊢- <mark></mark> -
Rotherham	-	792	101.5	⊢
Barnsley	-	710	99.8	H
Sheffield	-	1,414	98.1	H
North Lincolnshire	-	503	92.5	H
Calderdale	-	518	88.8	H
Kirklees	-	994	85.3	H
Bradford	-	1,038	84.1	H − -I
North Yorkshire	-	1,473	66.6	H
East Riding of Yorkshire	-	858	66.4	H
York	-	368	63.7	H

National Cancer Redistration and Analvsis Service retrieved from the Cancer Analvsis Svstem (CAS). NHS Didital

Lung Cancer Registrations in North Lincolnshire (3 Year Range) Source: OHID 2023



- North Lincolnshire had the 9th highest number of Lung Cancer registrations in the Yorkshire and Humber ٠ Region, in the three-year combined period **2017 to 2019**, with **92.5 registrations per 100,000**.
- This was higher than both the **England average of 77.1** per 100,000 and the Yorkshire and Humber **region** ٠ average of 90.9 per 100,000.
- Since the three-year period, 2011-13, lung cancer registration in North Lincolnshire have consistently remained ٠ statistically significantly higher than the England average. 7- OHID 2023

Ward Level Lung Cancer Incidence



Incidence of lung cancer, standardised incidence ratio (2015-2019) LA and Ward*

- The incidence of lung cancer between 2015 and 2019 was significantly worse in North Lincolnshire than in England as a whole.
- Frodingham and Brumby wards had an incidence ratio over twice that of England in the same period. In all, 6 North Lincolnshire wards had an incidence ratio significantly worse than England.
- 7 North Lincolnshire wards had an incidence ratio below that of England, however none of these were considered statistically different.

*Data only available currently for pre-2023 wards – 8 - OHID Fingertips

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Lung Cancer Newly Diagnosed by Age and Sex, in England, 2017

Lung Cancer Diagnosis by Age and Sex, in England, 2017 Males Females 600 Age-Specific Rates 500 per 100,000 400 300 200 100 0 35-39 70-74 75-79 80-84 85-89 -49 50-5455-59 65-69 90+ 60-64 Age

- In 2017, the rate for newly diagnosed lung cancer increased with increasing age, with the highest rates for both males and females seen in the 85-89 age group.
 - **513.9** per 100,000 **males** and **326.1** per 100,000 **females**, aged 85-89 were diagnosed in 2017.

Lung cancer registrations here represented by malignant neoplasm of trachea, bronchus and lung Rates for ages under 35 have been suppressed due to low numbers.

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6- ONS 2019

Lung Cancer Registrations and Deprivation in England (2017-19)

Relationship Between Lung Cancer Registrations and Deprivation in England



Deprivation Score (IMD 2019)



- There is a strong positive correlation between lung cancer registrations and deprivation, with more deprived areas having increased rates of lung cancer registrations, compared to less deprived areas which had less.
- In England, there were 106.3 registrations per 100,000 in the most deprived decile, compared to just 55.4 per 100,000 in the least deprived decile, in the three year period 2017-19.
- This is just over half the rate of the most deprived areas.

Lung Cancer Registrations by Stage

- The stage of a cancer at time of diagnosis is an important factor that affects eventual outcomes. Earlier cancer diagnosis, particularly within stages 1 or 2, before cancer spreads, is generally associated with better prognosis.
- Overall, 52.3% of cancers in England were diagnosed at stages 1 or 2 in 2020*

Cancer Stages₁₀

stage 1 – the cancer is small and hasn't spread anywhere else

stage 2 – the cancer has grown, but hasn't spread

stage 3 – the cancer is larger and may have spread to the surrounding tissues and/or the lymph nodes (or "glands", part of the immune system)

stage 4 – the cancer has spread from where it started to at least 1 other body organ, also known as "secondary" or "metastatic" cancer

- For lung cancer specifically, fewer cancers are diagnosed at stages 1 and 2, 33% of females and 27% of Males newly registered with lung cancer in England in 2020** were registered as being in stages 1 or 2.
- Overall, for England, in 2020** 71% of new lung cancer registrations were stages 3 or 4. 11

Within Sub ICB group 03K (North LincoInshire) in 2020**, 77% of new lung cancer registrations were in stages 3 or 4.

* New cases of cancer diagnosed at stages 1 and 2 as a percentage of all new cases of cancer diagnosed at any known stage (1, 2, 3, and 4) for the following cancer sites: invasive malignancies of lung, oesophagus, colon, rectum, pancreas, invasive malignancies of the skin, breast, uterus, ovary, prostate, testis, kidney, bladder, Hodgkin Lymphoma, larynx, oropharynx, oral cavity, and non-Hodgkin lymphoma.

Lung Cancer hospital presentations

First* emergency hospital admissions for a primary diagnosis of cancer North Lincolnshire 03K (persons, 2020/21-2022/23)



Admissions

Between 2020/21-2022/23, of all first emergency admissions primarily for cancer, lung cancer was the second most common, with 18% of such admissions.

Between 2020/21 and 2022/23, around 60 people are admitted in an emergency with a first diagnosis of lung cancer per year, with about 56% being men.

Emergency admissions constituted 37.1% of all the first admissions for lung cancer (including planned visits to hospital) between 2020/21 and 2022/23.

Emergency presentation is an important predictor of cancer outcomes, patients with diagnosed with cancer who present for the first time via emergency admission can have poorer prognosis.**

Source: HES / NHS Digital

**This metric estimates the proportion of emergency presentations using first admissions to hospital via emergency route as a proxy for emergency diagnosis. See references – emergency presentations for cancer for description 12

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Lung Cancer Registrations and Smoking



There is a positive correlation between lung cancer registrations and smoking, with higher rates
of smoking directly associated with increased rates of lung cancer registrations. 7

Mortality Rate from Lung Cancer (Persons, 3 Year Range)



Mortality Rate from Lung Cancer in North Lincolnshire (Persons, 3 Year Range) Source: OHID 2023

— England — North Lincolnshire

- Since 2005-07, the mortality rate for lung cancer in North Lincolnshire over a 3 year range has remained statistically significantly higher than the England Average.
- In the 3 year range 2017-19, the mortality rate in North Lincolnshire was 60.4 per 100,000.
- The **England** average for the same time period was **53** per 100,000.
- Since 2009-11, the mortality rate for North Lincolnshire has seen a steady decline, with the exception of a small rise in 2014-16 before the rate continued to fall the following year.

13 - OHID 2023

Deaths from Lung Cancer, by Year and Sex in England



Lung cancer registrations here represented by malignant neoplasm of trachea, bronchus and lung

- Since 2001, lung cancer deaths in males have fallen by 30.4 per 100,000 to 65.8 per 100,000 in 2017.
- The rate for **female** deaths from lung cancer showed an initial increase between 2001 and 2008 before remaining constant and then beginning to show a **slight decline since 2014**.
- In 2017, the rate for female mortality from lung cancer was 46.1 per 100,000.

6- ONS 2019

North Lincolnshire mortality Rate from Lung Cancer by Sex (3 Year Range)



Mortality Rate from Lung Cancer in North Lincolnshire (Females, 3 Year Range) Source: OHID 2023



- The mortality rate for males from lung cancer over a 3 year period has shown a steady overall decline, with the North Lincolnshire frequently remaining statistically significantly higher than the England Average.
- In 2017-19 the rate for North Lincolnshire was 68.6 per 100,000, which was statistically similar to the England average.
- The mortality rate for females from lung cancer over a 3 year period has remained constant with rates showing an initial increase between 2001-03 and 2005-07.
 Rates then remained fairly constant and between 2013-15 and 2016-18 showed a slight decline.

— England

North Lincolnshir

 In 2017-19 the rate for North Lincolnshire had increased to 53.8 per 100,000, which was statistically significantly higher to the England average.

Lung Cancer Deaths by Age and Sex, in England, 2017



- The rate of deaths from lung cancer increases with increasing age in both males and females with a slight decline for females aged 90+.
 - Deaths in males aged 90+ were more an 5 times higher than rates in males aged 60-64, with 491.7 deaths per 100,000.
- Deaths in females aged 85-89 were more than 4 times higher than rates in females aged 60-64, with 292.4 deaths per 100,000.

Lung cancer registrations here represented by malignant neoplasm of trachea, bronchus and lung

6 -ONS 2019

Lung Cancer Mortality by Deprivation Decile in England (2020)



- England

- The lung cancer mortality rate in the most deprived decile is more than double the rate in the least deprived.
- The rate in the **most** deprived decile is 70.3 per 100,000, compared to 33.4 per 100,000 in the least deprived decile, a difference of 36.9 per 100,000.

13- OHID 2023

Lung Cancer Mortality and Ethnicity (Ages 65+)

Lung Cancer Mortality Rate by Ethnicity All Persons Aged 65+



Lung cancer registrations here represented by malignant neoplasm of trachea, bronchus and lung

- Lung cancer mortality for people aged 65 and over is highest in people of Bangladeshi,
 Mixed/Multiple and White ethnicities with more than 150 deaths per 100,000 by 3 year range.
- Since 2014-2016 lung cancer mortality rates have fallen in the majority of ethic groups. However, mortality rates have increased in Black African and Black Other ethnicities.

14- ONS 2021

Smoking Attributable Deaths from Cancer *



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Smoking Attributable Deaths from Cancer in North Lincolnshire (3 Year Range)

 Since 2013-15, smoking attributable deaths from cancer have fallen year on year, in both North Lincolnshire and England.

- Rates in North Lincolnshire have consistently remained statistically significantly higher than the England Average.
- In 2017-19, the rate for North Lincolnshire was 107.6 per 100,000, compared to the England average which was 89.6 per 100,000.

* The number of cancer deaths attributable to smoking includes all deaths with the following cancer diagnosis codes as the underlying cause of death: Malignant neoplasms: Lung(C33-C34), Nasal synuses & nasopharynx(C11,C30-C31), Oral cavity(C10), Pharynx (C14), Larynx(C32), Oesophagus (C15), Stomach (C16), Pancreas (C25), Liver (C22), Colorectal (C18-C20), Kidney (C64), Lower urinary tract (C65-C66), Bladder (C67), Breast (C50), Cervix (C53), Acute myeloid leukaemia (C92), Malignant melanoma (C43-C44) [OHID 2023] 15 - OHID 2023

Smoking and Deprivation



• There is a **positive correlation** between **smoking and deprivation** with **higher levels of smoking** prevalence in **more deprived** areas and **lower rates of smoking** in the **least deprived** areas. The correlation is stronger in Yorkshire and Humber than for all Counties and UAs as a whole.

Percentage Deprivation Gap in European Age-Standardised Mortality Rates

Statistically Significant Cancers, Females, England, 2007-2011

	% gap between lowest and highest deprivation More deaths in more (on group deprived	% gap between lowest and highest deprivation group More deaths in more deprived
Lanvny		3179/ Oropharynx	24
Oronharyny	263%	Lung	166%
Oral Cavity	203%	Cervix	148%
	221/0	Stomach	95%
Lung	100%	Anus	94%
Anus	13/%	Vulva	92%
Penis	131%	Vagina	66%
Stomach	101%	Liver	63%
Liver	94%	Bladder	63%
CUP	72%	CUP	60%
Testis	70%	Oral Cavity	54%
Oesophagus	59%	Oesophagus	51%
Hodgkin Lymphoma	47%	Kidney	42%
Bladder	41%	Uterus	27%
Bowel	28%	Pancreas	24%
Kidnev	27%	NHL	24%
Pancreas	20%	Bowel	16%
Malignant Melanoma	-34%	Breast	6%
Fewer deaths in more deprived		Malignant Melanoma	-32%
			Fewer deaths in more deprived

Statistically Significant Cancers, Males, England, 2007-2011

Cancer Research UK have analysed the **deprivation gap** for cancer mortality in **England** between **2007 and 2011.**

- For both males and females,
 there were 166% more
 deaths from lung cancer in
 the more deprived groups.
- The deprivation gap is greatest in cancers related to smoking, reflecting the higher prevalence of smoking in the more deprived groups.

CUP = Cancer of unknown primary AML = Acute Myeloid Leukaemia

ALL = Acute Lymphoblastic Leukaemia

Cancer Research UK, Deprivation gradient for cancer mortality | Cancer Research UK, Accessed January 2023

CUP = Cancer of unknown primary AML = Acute Myeloid Leukaemia

ALL = Acute Lymphoblastic Leukaemia

Smoking Prevalence in Adults 18+ (Annual Population Survey) 16



- Prevalence of current smokers in England has shown a year on year decline, reducing by 6.3 percentage points over the last decade, falling to 13% in 2021.
- Current smoking rates in North Lincolnshire have also seen an overall decline but rates have shown small fluctuations. Since 2018, rates have shown a year on year • decline, and in 2021, North Lincolnshire's rate was 12.3%, which was statistically similar to the England average.

Smoking Prevalence in Adults (18+) in North Lincolnshire - Ex Smokers (APS)
Source: OHID 2023



- The rate of adult ex smokers in North Lincolnshire fell between 2016 and 2018, before showing a slight gradual increase in the most recent 3 years. However, these changes have not been statistically significantly different.
- In **2021**, the rate in **North LincoInshire was 29.3%** which was above the **England average of 25.7%**.

Smoking Prevalence in North Lincolnshire by Sex



- The percentage of **current smokers** in North Lincolnshire has seen an **overall decline** between 2012 and 2021, with **males rates consistency higher** than females.
- Male rates have fallen by 11.7 percentage points, from 27.2% in 2012 to 15.5% in 2021.
- Female rates have fallen by 11.9 percentage points, from 20.9% in 2012 to 9% in 2021.

16 - ONS 2022

Lung Cancer Survival Rates in England



- Lung cancer survival rates at 1 year, 5 years and 10 years have all increased year on year.
- Survival rates at **1 year** have increased by 15.3 percentage points from 26.3% in 2001 to **41.6% in 2016**.
- Survival rates at **5 years** have almost doubled in 11 years, from 7.4% in 2001 to **14.5% in 2012**.
- Rates at 10 years have also increased from 5.2% in 2011 to 7.7% in 2007.

17 - ONS 2019

Lung Cancer Survival Rates in North Lincolnshire at 1 Year



- Lung cancer survival rates at 1 year, in North Lincolnshire, have increased by 15.3 percentage points from 25.9% in 2001 to 41.2% in 2016.
- Over this 15 year period survival rates in North Lincolnshire have remained statistically similar to the England average.

17- ONS 2019

Screening Programmes

- Free NHS Targeted Lung Health Checks are currently being introduced through a phased approach across the Humber and North Yorkshire area starting initially in Hull, as part of a pilot scheme, due to the city having one of the highest lung cancer mortality rates in England, before receiving additional funding to support delivery of the programme in North East Lincolnshire too.
- The programme targets people who have been identified as being at the most risk of developing lung
 problems, including lung cancer, with the aim of detecting any issues early when treatment is likely to be more
 successful and simpler. Anyone who is aged between 55 and 74, is a current or ex smoker, and is registered
 with a local GP practice could be eligible for a check.
- Eligible residents are contacted by their GP to make an initial Lung Health Check appointment, which will be carried out over the phone with a nurse, and lasts about 40 minutes. If any risks are identified, the patient will be offered a low dose CT scan of their lungs, which can take place in a community location, such as a supermarket car park or a sports centre, to make it as accessible as possible. Patients will receive their results within 4 weeks and given advice regarding next steps if necessary
- Lung Health Checks are not yet available in North Lincolnshire, but through the development of the programme it is hoped that they will be by 2026.

18 - Humber and North Yorkshire Cancer Alliance, n.d.

References

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- 10) What do cancer stages and grades mean? NHS (www.nhs.uk)
- <u>11) Cancer incidence by stage NDRS (digital.nhs.uk)</u>
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Cancer statistics explained: different data sources and when they should be used - Office for National Statistics (ons.gov.uk)

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