

Regional variation in the diagnosis of ovarian cancer in England



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Introduction

One-year survival for ovarian cancer in the UK trails that of other countries. This shows that lives are being lost due to ovarian cancer not being diagnosed soon enough. In 2017 Target Ovarian Cancer's GP Advisory Board carried out research looking at regional variation in the diagnosis of ovarian cancer across England.

Results

The study found large variation across each metric:

- 90 times more CA125 blood tests are carried out per 1,000 practice population in the area with the highest number of referrals compared to that with the lowest.
- Over 80 per cent of non-obstetric ultrasounds are completed within a fortnight in some areas compared to almost zero in others.
- In some parts of the country over half of women are diagnosed with early stage disease, in others just one in five.
- One-year survival ranges from over 90 per cent in some areas to less than 60 per cent in others. Some variation may be due to differences in local populations but the findings as a whole show that more work needs to be done to ensure early presentation, timely referral and consistent diagnostic pathways across England.

Conclusions

- Data on the CA125 blood tests is no longer included as part of the NHS Atlas, preventing future analysis. Public Health England and NHS Digital should work together to bring CA125 data back into the NHS Atlas.
- The introduction of the cancer dashboard illustrates the importance of cancer data in driving improvements. The dashboard now needs extending to less common cancers such as ovarian.
- A clinical audit of ovarian cancer is needed to establish what leads to differences between areas and enable learning from the best performing areas to be shared.

Method

The research looked at three key indicators: diagnostic tests, stage at diagnosis and one-year survival rates.

Data was sourced from NHS Atlas, the Diagnostic Imaging Dataset (DID) and National Cancer Registration and Analysis Service data on stage at diagnosis and one-year survival. Data is broken down by Clinical Commissioning Group except for CA125 data which was only available by Primary Care Trust. Data completeness was an issue in relation to the DID and stage at diagnosis data. CCGs where data was missing in more than 20 percent of cases were excluded from the analysis.

GP referrals for CA125 blood test by Primary Care Trust (2012)

Primary Care Trust	Estimated annual rate of referrals per 1,000 practice population
Redcar and Cleveland	9.0
Portsmouth City Teaching	8.9
Milton Keynes	8.7
Dorset	8.7
Great Yarmouth and Waveney	8.4
Herefordshire	8.4
Buckinghamshire	8.3
East Sussex Downs and Weald	8.1
Oxfordshire	8.1
Northumberland Care Trust	7.9
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Lowest referral rate	0.1

Source: NHS Atlas of Variation in Diagnostic Services (Data was missing for 10 PCTs).

Relative one-year survival by Clinical Commissioning Group (2008-2012)

Clinical Commissioning Group	Relative one year survival (per cent)
NHS Bradford City	96.4
NHS Haringey	87.7
NHS Kingston	87.3
NHS Southwark	87.3
NHS Bath and North East Somerset	86.4
NHS Wandsworth	86.4
NHS Richmond	86.1
NHS City and Hackney	85.6
NHS Leeds West	85.5
NHS Hammersmith and Fulham	84.8
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Lowest one-year survival	57.3

Source: National Cancer Registration and Analysis Service.

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