THE REWARDS OF
CANCER DATA:
Benefits to Cancer
Patients – the CUP Case

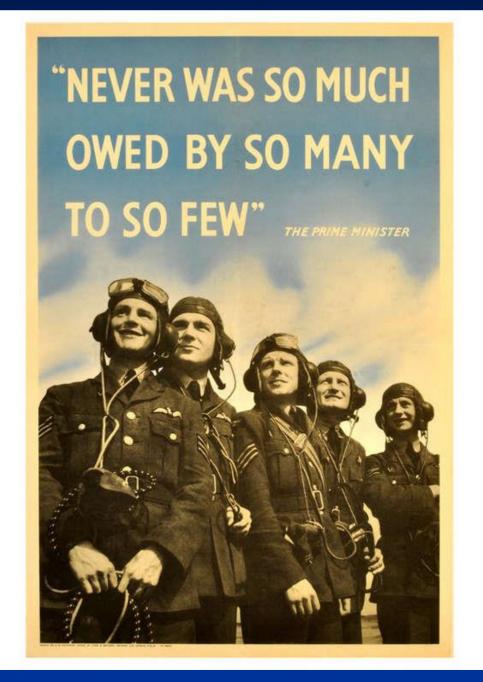
John Symons Director

cancer of unknown primary friends foundation





Intelligence



CUP IS A SIGNIFICANT - OFTEN UNRECOGNISED PROBLEM

5th highest cause of cancer death in the UK. 30 people in the UK die *each day* from CUP.

CRUK 2013 data @ Jan 2016

21% in the most deprived socio-economic group. NCIN

Ratio of 1 male to 1.2 females

57% of patients diagnosed with CUP in the UK present as an emergency, compared with 23% for all cancers.

NCIN 2006-2010

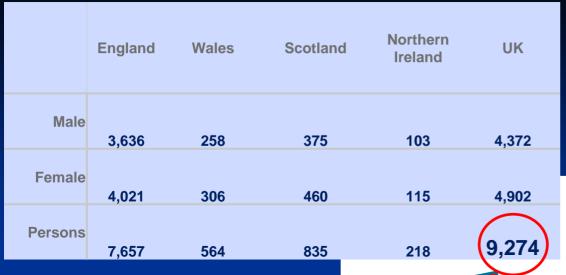
50% of UK CUP patients are aged 50-80 (45% aged 80 and over).

NCIN 2006-2010

Why 'Unknown' Primary?

Hypotheses:

- Primary the size of a grain of rice. Cancer spread (Metastasis) occurs very early when the primary is unusually small often too small to be picked-up by present day tests including ultrasound, CT scans, MRI and PET and the primary remains dormant.
- The primary shrinks or disappears:
 - Cancer growth is diverted to the seeding cells with the primary starved of nutrients
 - Pushed out of the body if, for example, hanging perilously to part of the digestive system after it has spread.
- <u>Fallen on stony ground</u>. The primary is successfully attacked by the immune system as it tries to get a toehold but has already shed cells that migrate through the body to find 'sanctuary' sites (where they can thrive and confuse or hide from the immune system.)

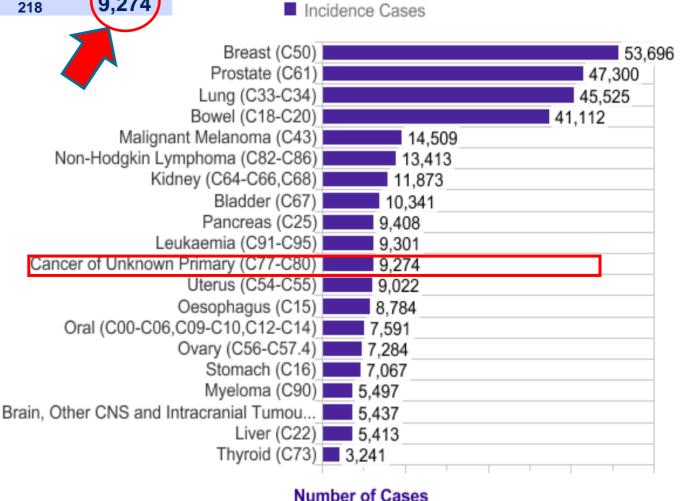


Cancer Site

CUP INCIDENCE, 2013 (3% of all cancer cases)

CUP is the 11th commonest cancer in the UK

- 13th commonest in men
- 8th commonest in women



Data source: CRUK 1/2016

Г	England	Wales	Scotland	N Ireland	UK	
Male	4,171	293	357	81	4,902	

443

800

338

631

CUP MORTALITY, 2013 (6% of all cancer deaths)

CUP is the 5th highest cause of cancer death in the UK

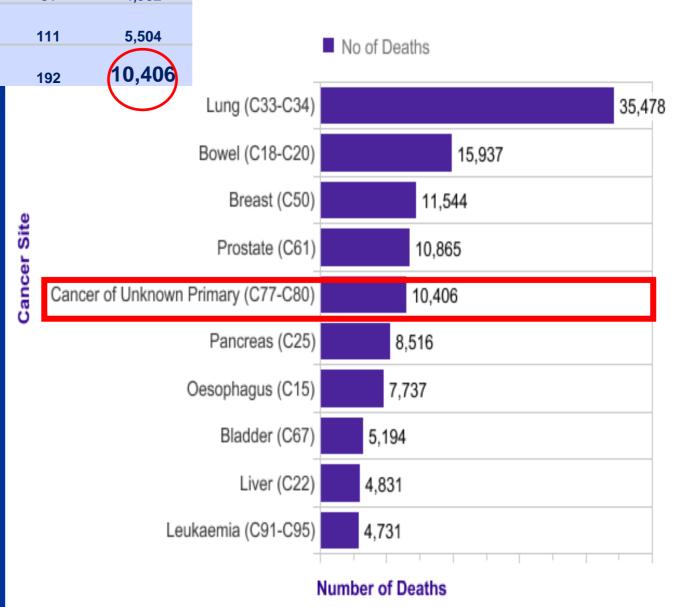
4.612

8.783

Female

Persons

- 5th commonest in men
- 4th commonest in women



Data source: CRUK 1/2016

SLOW FALL IN CUP (ICD10 C77-80) INCIDENCE AND MORTALITY AS DIAGNOSTIC TECHNIQUES IMPROVE

UK INCIDENCE

Year	New Cases	Decline	
1993	14,693		
	ĺ		
2002	12 075		
2003	12,875		
2013	9,274	070/	
		31%	
2013	9,274	37%	

UK MORTALITY



UK (ICD-10 C77-80)						
Incidence			Mortality			
Vasu	No. of new	per	No. of	Rate*		
Year	cases	100,000	deaths	100,000		
1996	15,838	20.4	15,024	19.4		
1998	14,972	19.0	15,259	19.3		
2000	14,013	17.3	14,559	18		
2002	13,428	16.1	14,058	16.7		
2004	12,640	14.8	13,288	15.4		
2006	11,566	13.1	12,267	13.7		
2008	10,752	11.9	11,228	12.0		
2010	9,585		10,472	10.7		
2012	9,620		10,625			

*Age-standardised to the European Population.
Source: NCIN & CRUK

UK CUP Incidence by ICD code C77-80				
ICD Code:	2009	2008		
C77: Secondary and unspecified				
malignant neoplasm of lymph nodes	972	854		
C78: Secondary malignant neoplasm				
of respiratory and digestive organs	3,163	3,388		
C79: Secondary malignant neoplasm				
of other sites	1,230	2,189		
C80: Malignant neoplasm without				
specification of site	5,105	4,321		
Total (C77-80)	10,470	10,752		

Not counted as CUP:

C76 (Malignant neoplasm of other & ill-defined sites),

C26 (Malignant neoplasm of other & ill-defined digestive organs),

C39 (Malignant neoplasm of other & ill-defined sites in the respiratory system and intrathoracic organs)



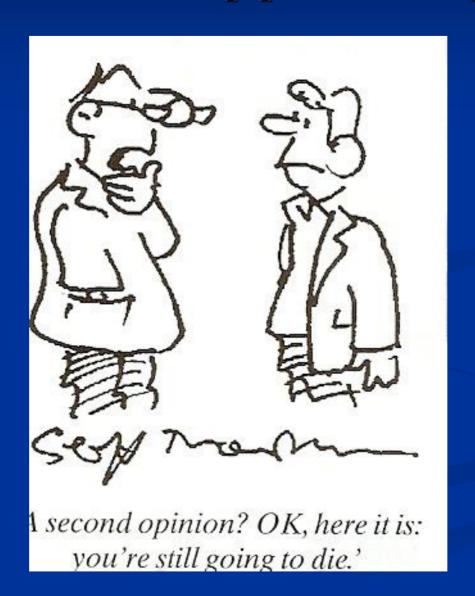


Processed CUP data give us:

- knowledge and understanding; what we know, and don't know, about the burden of the disease
- the evidence we need to communicate effectively, in particular the analytical frameworks to argue logically for action: (research, resources etc.)

FROM NIHILISM TOWARDS SOLUTIONS

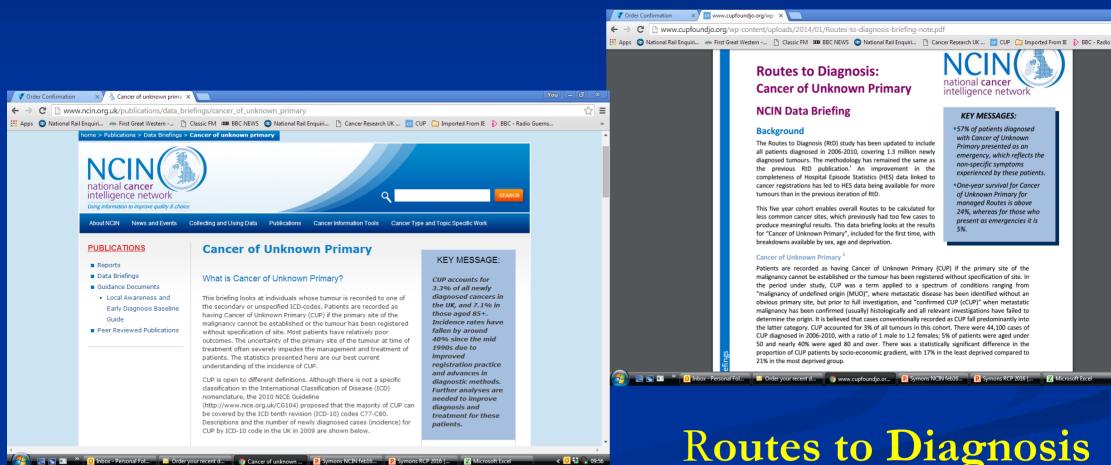
The data framework for communication and logical argument to help power change





Making the unknown, known





Briefing Sheet

📮 📴 🌁 🚺 Inbox - Personal Fol... 🔼 Order your recent d... 👩 Cancer of unknown ... P Symons NCIN feb16... P Symons RCP 2016 [...

Making the unknown, known

• NICE guidelines [CG104] Published date: July 2010

NCIN annual conferences

- 2011. NCIN conference Poster CUP a study of data inequality.
- 2012. NCIN *conference Poster* CUP a rare disease?
- 2013, NCIN Brighton. Chair of opening plenary
- 2014. NCIN Birmingham. The Challenges of Coding Cancer Of Unknown Primary (CUP) A Survey Of Current Practices in the UK, Ireland and Australia. Claire Vajdic, Claudia Oehler, Nicola Cooper, John Symons.

NCIN SSCRGs

Breast cancer
Children & TYA cancers
CNS cancers
Colorectal cancer
Gynaecological Cancers
Haematological cancers
Head & neck cancers
Lung cancer
Sarcomas
Skin cancer
Upper GI cancers
Urological cancers

Where does CUP fit in?



Research into Coding Issues

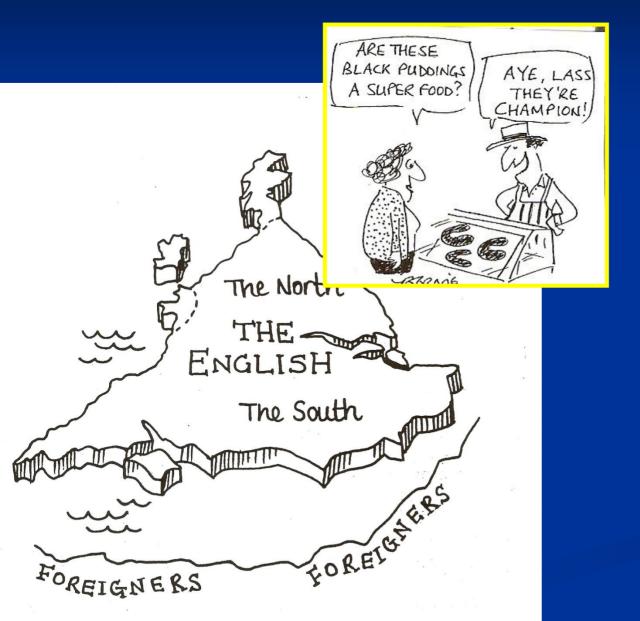






Partnership Project





Registries:

Australia

Ireland

England 8

Scotland

Wales

N Ireland 1



The challenges of coding Cancer of Unknown Primary (CUP)

A survey of current registration and reporting practices in the UK. Ireland and Australia

Claudia Oehler¹, Claire Vajdic², Nicola Cooper¹ and John Symons³

- National Cancer Intelligence Network, Public Health England
 University of New South Wales, Australia
- 3 Cancer of Linknown Primary Foundation LIK

- No consistent national or international coding guidance for registering and reporting CUP resulting in varied cancer registration practices.
- Reporting practices vary with some registries using ICDO3 codes and others using different ICD10 codes to represent CUP.
- Differing interpretations of: ICDO3 and ICD10 codes, the investigation of death certificate only notifications, electronic notifications, consideration of prior registrations of site-specific cancers, and the types of notifiers.
- Variation in coding practices for tumours with nonepithelial morphologies such as melanoma and sarcoma, and the use of ill-defined primary site codes such as 'gastrointestinal' cancer.



Our Weapons: INTELLIGENCE underpinned by DATA



DATA GIVE PATIENTS, & THEIR ADVOCATES, POWER

www.cupfoundjo.org



