

# Cancer care by UK's National Health Service at tipping point, says study

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To improve the delivery of cancer care by the UK's National Health

Service (NHS), ten time-critical issues must be addressed, according to a review of current services led by nine cancer specialists.

They argue that the UK is falling far behind other countries in their delivery of care and support of patients diagnosed with cancer, and warn that if focus to improve the system is lost, additional strain will be placed on an already stretched NHS.

The experts highlight ten pressure points, including changing demographics, unequal survival rates across groups and lack of patient follow-up post-care. They also highlight significant treatment delays, supported by evidence that the UK has one of the highest rates of cancer diagnoses following emergency admissions.

Within the review, [published](#) in *The Lancet Oncology*, the experts suggest several solutions to tackle the current issues seen in NHS cancer care, including:

1. Tackling entrenched [social inequalities](#) in access and outcomes of cancer, by creating an NHS task force for social and commercial determinants to inform policy solutions.
2. Tackling variation in the quality of cancer care across the NHS by expanding national audits across the UK and researching how audits and feedback to hospitals and professionals can drive change.
3. Delivering improved services for cancer survivors, including specialist clinics for long term chronic complication from treatment and the routine collection of data on the impact of cancer care on quality of life.
4. Creating fiscal headroom not just for [technology adoption](#) but also for an increased NHS cancer workforce as implementation of new technologies requires increasing resource which if not budgeted for leads to lengthening waiting times as we are

observing.

5. Cancer research strategy needs to be re-profiled to avoid an over-focus on biopharmaceutical research but that also considers other domains e.g. surgery, radiotherapy and [palliative care](#) as well as other methodological disciplines e.g. implementation and improvement science research and health economics.

Professor Ajay Aggarwal of the London School of Hygiene & Tropical Medicine, said, "Current plans for delivering sustainable improvements in cancer survival fail to consider the entrenched and complex system-level issues within the cancer service, which we highlight.

"We need to go well beyond new equipment, drugs, and other cancer technologies to deliver solutions to the substantial societal and system pressure points. While there is excellence in many areas of cancer care in the NHS, there remains substantial variation in quality and outcomes."

Co-author Professor Richard Sullivan, based at the Institute of Cancer Policy, King's College London, said, "A new national cancer control plan will need to take a whole-system approach integrating solutions for critical areas such as workforce, service quality, and societal equity.

"Waiting lists, for example, are often a downstream consequence of introducing new technologies without adequate consideration of how and who will deliver them within existing capacity constraints."

Co-author Professor Pat Price, of Imperial College London, founder of Catch Up With Cancer and chair of Radiotherapy UK, said, "Cancer services are in crisis. The tragedy is that it doesn't have to be this way.

"While our paper outlines ten major challenges that demand a response, there is an overarching call to the next Government: use your power and influence to make sure that the voice of clinicians is heard. The cancer

community knows what needs to be done and how to do it.

"Too often, policymakers focus on one aspect, like diagnosis, but that alone isn't enough. If you boost diagnosis but don't treat people on time, the newly diagnosed patients just end up stuck on long waiting lists.

"We need quick diagnosis and timely treatment. For example, radiotherapy treatment access is plagued by a lack of capital investment and outdated tariffs that stifle innovation. So much of this could quickly be put right.

"Cancer is a complex disease. But the starting point to tackling our poor survival outcomes is simple: get a plan. Reverse the decision made by the last Government to scrap the national cancer control plan.

"All the international evidence shows that countries with national [cancer](#) plans have better survival. And make sure the plan is properly resourced and ensures we treat on time as well as diagnose early."

**More information:** Ajay Aggarwal et al, NHS cancer services and systems—ten pressure points a UK cancer control plan needs to address, *The Lancet Oncology* (2024). [DOI: 10.1016/S1470-2045\(24\)00345-0](https://doi.org/10.1016/S1470-2045(24)00345-0)

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