Cancer control – how do we improve outcomes?

1. What does the current report card look like regional and rural Australia?

2. What steps in the cancer trajectory will deliver the most improvement for people in rural and regional Australia?

3. What are the steps that Cancer Australia is taking to address cancer in rural and regional Australia?
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Outcomes
The 1990s – reducing age-standardised mortality

- Cervix 5.2% p.a.
- Testis 3.7% p.a.
- Prostate 1.8% p.a.
- Breast 2.2% p.a.
- Lung 2.1% p.a. (m)
- Uterus 1.6% p.a.
- Colorectal cancer 1.2% (m) 1.6% (f)
- Ovary 0.7% p.a.
- Brain 0.4% p.a. (f)

AIHW Cancer in Australia 2002
Cancer control – how do we improve outcomes?

Outcomes

The 1990s – increasing age-standardised mortality

Lung 1.8% p.a. (f)
Kidney 0.7% (m)
Melanoma 0.5% (m) 0.2% (f)
Pancreas 0.2% p.a.

AIHW Cancer in Australia 2002
Cancer control – how do we improve outcomes?

1. What does the current report card look like regional and rural Australia?
   - Major cities 66%
   - Inner Regional
   - Outer regional
   - Rural
   - Remote 3%
Cancer control – how do we improve outcomes?

1. What does the current report card look like regional and rural Australia?

Mortality as a proportion of cancer deaths increases by remoteness for:
- lung cancer;
- cervical cancer; and
- uterine cancers.

AIHW Cancer in Australia 2002
Cancer control – how do we improve outcomes?

1. What does the current report card look like regional and rural Australia?

Incidence rates are higher for:
- Smoking related cancers; and
- UV exposure associated cancers.
Cancer control – how do we improve outcomes?

1. What does the current report card look like regional and rural Australia?
   - Socio economic status
   - People from Aboriginal and Torres Strait Islander background
   - People from rural / remote Australia
   - People from culturally and linguistically diverse populations
Cancer control – how do we improve outcomes?

1. What does the current report card look like in regional and rural Australia?

- People also move as their health status changes – makes all these data difficult to interpret.
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Cancer control – how do we improve outcomes?

- Prevention
- Screening
- Diagnosis
- Treatment
- Survivorship
- Caregiver outcomes
Cancer control – how do we improve outcomes?

Prevention – a whole-of-community issue

Life style accounts for 30-50% of cancers experienced in our society
Cancer control – how do we improve outcomes?

Prevention – a whole-of-community issue

- Tobacco
- Lack of physical activity, obesity
- Alcohol
- Sun exposure
- Infectious diseases
Cancer control – how do we improve outcomes?

Prevention – a whole-of-community issue

Tobacco (males)

- lung (89%);
- larynx (69%);
- oral cancers (52%); and
- renal pelvis (51%).

AIHW Cancer in Australia 2002
Cancer control – how do we improve outcomes?

Prevention – a whole-of-community issue

Tobacco (females)

- lung (70%);  
- larynx (60%);  
- renal pelvis (43%); and  
- oral cancers (42%).

AIHW Cancer in Australia 2002
Cancer control – how do we improve outcomes?

Prevention – a whole-of-community issue

Sun exposure – non-melanomatous skin cancers

(35-40% of all primary care encounters with cancer)

AIHW Cancer in Australia 2002
Cancer control – how do we improve outcomes?

Prevention for caregiver health

Excess mortality and morbidity from being a caregiver – spouse, family, friend.

Increased utilisation of health and social resources.

Christakis NEJM 2006
Cancer control – how do we improve outcomes?

Screening
- Participation rates are poor...

Breast cancer
That is to say that:
- 44% of the community at large;
- 56% of people from CALD backgrounds; and
- 66% of people from Aboriginal and Torres Strait Islander backgrounds do not participate in current screening.
Cancer control – how do we improve outcomes?

Screening
- Participation rates are poor…

Outcomes are predicated on a population participation rate of 70%. Therefore:
- best outcomes cannot be guaranteed; and
- 70% should not be seen as a ceiling for which to aim – it is the minimum.
Cancer control – how do we improve outcomes?

Screening
- Participation rates are poor...
Cervical cancer - almost 300 deaths last year
Cancer control – how do we improve outcomes?

Screening
- Participation rates are poor...
Cervical cancer
Current participation rates target population 20-69
60.7% 02/03
(63.9% 98/99)

AIHW Report 31 Oct 2005 Cervical Screening in Australia
Cancer control – how do we improve outcomes?

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Cancer control – how do we improve outcomes?

3. What are the steps that Cancer Australia is taking to address cancer in rural and regional Australia?

- Cancer support groups ($3.1M over 5 y)
- Clinical Trials access
- Priority-driven research
- Cancer networks – world’s best practice
3. What are the steps that Cancer Australia is taking to address cancer in rural and regional Australia?
- Cancer support groups ($3.1M over 5 y)
  2 rounds of grants to date
  2 more rounds planned
Specific emphasis on rural, people who are isolated
Cancer control – how do we improve outcomes?

3. What are the steps that Cancer Australia is taking to address cancer in rural and regional Australia?
   - Clinical Trials access – 10 groups, new ones to be fostered ($5M / y)

Improving access for clinical trials across the country
3. What are the steps that Cancer Australia is taking to address cancer in rural and regional Australia?
- Priority-driven research ($5M / y)

Can we complement the achievements of investigator driven research with priorities for practice or policy?
“I’m learning how to relax, doctor—but I want to relax better and faster! I WANT TO BE ON THE CUTTING EDGE OF RELAXATION!”
Cancer control – how do we improve outcomes?

3. What are the steps that Cancer Australia is taking to address cancer in rural and regional Australia?

Cancer networks – world’s best practice ($14.1M 5 y)

How can we identify by cancer site/stage where people can access best practice?

- Make this information available to consumers of cancer services
- Re-engage general practice
- Ensure that there are clearly articulated care pathways for best practice
Cancer control – how do we improve outcomes?

Cancer control is the responsibility of the whole community

We, as a community, need to work together to lessen the impact of cancer on every Australian whose life is affected by cancer
Cancer control – how do we improve outcomes?

Nationally, we have good outcomes from cancer control initiatives

Programmes that span prevention, screening and early detection, diagnosis, treatment, and survivorship / living with cancer / premature death because of cancer
Cancer control – how do we improve outcomes?

Consumers of cancer services better supporting other cancer consumers

Professional development and quality

Research support
Cancer control – how do we improve outcomes?

Lessening the divide in outcomes in cancer in Australia

Improving cancer outcomes for all Australians