



North West Regional Report 2022

Putting our region's
cancer needs first

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Executive summary

Over the eight decades since our founding, North West Cancer Research has been independently funding research and strategies designed to understand the causes of cancer and support those living with and beyond cancer in the North West of England and North Wales.

The longevity of our work in these regions means we have developed a finely nuanced understanding of the prevailing cancer issues. This level of awareness is vital, as cancer cannot be effectively tackled without a highly localised approach that understands the multi-faceted, complex and evolving nature of the challenges at hand.

No two villages, towns or cities are exactly alike, and so we cannot take a one size fits all approach to cancer around the country. To enable local care systems to employ tailored measures that reflect on-the-ground realities, we've invested over £45 million since 2000 in life-saving research projects as well as preventative awareness campaigns designed to address cancer inequalities.

These projects span a wide-range of activities, encompassing everything from advanced laboratory studies to targeted education and outreach programmes. An underlying thread that connects all of this work is uncovering why cancer is a more common disease in the North West compared to the rest of the country.

This annual report, now in its third year, plays an important part in this, as it paints a multi-layered picture of the cancer landscape across all the

North Western counties. In particular, it illustrates several key long-term trends that highlight both the scale of the challenge as well as the critical necessity of community-level interventions.

In preparing this, we explored the available data on cancer in the North West of England and broke it down to a county level, covering Greater Manchester, Cheshire, Merseyside, Cumbria, and Lancashire. This provided us with granular insights into how this disease affects our communities and which specific conditions are putting the greatest strain on the North West's people as well as its healthcare infrastructure.

Central to this analysis is the overlaying of multiple data points, including socio-economic information with incidence and total cancer death rates, to identify connections that may not be immediately obvious. This creates a rounded picture of key cancer trends and shows where specific needs lie.

From this, we sadly see more continuity than change over the course of our annual reports, with both the prevalence of cancer and the overall number of deaths from cancer remaining higher than the national average. In fact, residents in the North West of England and North Wales remain 25% more likely to be diagnosed with cancer than in the rest of the UK.

For the 25 cancer groups for which data is recorded by the NHS, the North West exhibits higher incidence rates for 16 of them when compared to the English average, while age standardised total cancer deaths were 8% higher in both 2021 and 2022.

This year's report is the first to be able to set these findings against the backdrop of a post-lockdown world in which we see many of the

inequalities that existed pre-pandemic still starkly apparent in today's society.

This entrenching of inequalities is important, as a clear correlation between deprivation and increased cancer rates is evident in our research. We can see this in Merseyside in particular, which experiences 32% more deprivation than the national average and which in 2021 experienced 15% more cancer deaths than the English average. In comparison Cheshire, one of the most affluent parts of the North West, was the only county surveyed that saw fewer cancer deaths last year than the national average.

The role that socio-economic factors play in an area's health expectations is further underlined by data that indicates it is 'lifestyle related' cancers – lung, liver, kidney and stomach – that show the most alarming regional disparities. Currently, lung, trachea and bronchus cancer death rates are 25% higher in the North West compared to the rest of England.

As we move out of the pandemic, the critical need to solve inequalities saw health become a key focus in the Levelling Up the United Kingdom white paper released by the government in early 2022. One of the white paper's core '12 Missions to Level up the UK' was to narrow the Healthy Life Expectancy (HLE) between local areas by 2030 and increase HLE by five years by 2035.

With cancer death rates flat-lining rather than decreasing in the North West, it's clear that we're facing a long-term issue and that achieving the government's goal is going to require significant levels of investment targeted at understanding the problems – and the solutions - at a local level.

Prevention and awareness should be key watchwords for this investment, as increasing

general levels of understanding across our communities will significantly help bring the North West's cancer rates down and into alignment with the national average.

This is why we work hard to implement outreach projects and to spread information at a grassroots level. Our presence in the region's communities and our work on research like this tells us that creating a cancer-free future takes more than researchers in labs and doctors in hospitals - it will take each town and county to realise where its specific concerns lie and how exactly they can be empowered to take control of their own health.



Alastair Richards,

North West Cancer Research CEO

Data Source Overview:

We assessed the 25 key cancers across the North West for which NHS data is available. Population, employment, household religion and ethnicity data was obtained from the UK Office for National Statistics via Nomis (www.nomisweb.co.uk). The latter two were taken from the 2011 Census returns. Data for cancer rates (incidence/prevalence) was obtained from the National Cancer Registration and Analysis Service (www.ncin.org.uk). Data on age standardised total cancer deaths came from the Office of National Statistics Leading Causes of Mortality 2020 report.

NORTH WEST Regional Overview

Compared to the rest of England, the North West experiences an acute level of cancer prevalence. Overall cancer incidence rates in the region are significantly higher than the national benchmark and some areas are seeing 10-15% more deaths from this disease.

The North West over-indexes on 16 of the 25 key cancers surveyed compared to the average in England. This increased prevalence means people living in the North West's counties and cities face a higher risk of developing these cancers than if they resided elsewhere in the country.

In addition to being more likely to contract this disease, the data on total age standardised cancer deaths shows that people are more likely to die of cancer if they are situated in the North West. This issue is particularly stark in Liverpool, where total death rates are 15% higher than average, and Manchester, which saw 10% more deaths from cancer than the national norm.

The total cancer death rates for some of the most prevalent and problematic regional diseases highlight key challenges for the North West's health infrastructure. Compared to the national average, trachea, bronchus and lung cancer deaths were 25% higher while liver and stomach cancer deaths are 24% and 15% higher respectively.

The gravity of this finding is underlined by the fact that while trachea, bronchus and lung cancers are the ninth most prevalent cancer types in the North West, they rank first for the most overall deaths.



In 2021, 61.92 people per 100,000 died of this disease, which is significantly higher than every other type of cancer. In comparison, 26.46 deaths per 100,000 people was recorded for colon, sigmoid, rectum and anus cancers, which is second in the list of most overall deaths.

Localised factors such as population demographics, the environment and deprivation levels have a notable impact on the pervasiveness, mortality levels and types of cancer that specific communities experience.

This is important, as our research shows that communities in the North West exhibit significantly higher rates of deprivation than the national average. The data indicates that people living in Merseyside experience the highest overall levels of deprivation in the North West and certain areas of Greater Manchester face some of the worst deprivation in the country. In contrast, Cheshire is the most affluent county in the region and is the

only one to register lower poverty levels than the English average.

Within individual counties the picture can be very mixed. Cumbria experiences deprivation levels roughly equivalent to the English average and is 10% less deprived than the rest of the North West. However, Barrow and Copeland record higher levels of poverty compared to areas of Cumbria such as Eden and South Lakeland, which are more affluent than the national average.

Lancashire represents the region's most economically diverse county, hosting pockets of substantial wealth as well as areas of extreme poverty. Greater Manchester's economic landscape also incorporates areas of significantly contrasting wealth levels. Richer post codes such as Trafford and Tameside sit next to Manchester's inner-city, one of the most deprived areas in England.

The difference between population demographics also shows how factors such as age play an important role in each county's health outcomes. In general, areas with older populations experience significantly higher incidence rates for a wide range of cancers.

Greater Manchester has the youngest population in the North West, with 73% per cent of people living in the area aged under 54, and it also has the lowest rates of cancer in the region. The county records cancer incidence rates that are 4% below the national average and 10% below the North West average.

While age is likely a key influence on the disease profile of Greater Manchester's population, this information further highlights how deprivation can lead to worse outcomes for cancer patients - given that despite the young nature of the city region's residents its total cancer death rate is so high.

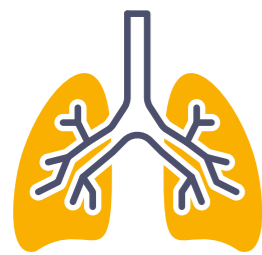
To ensure that we account for the experiences and views of clinicians and healthcare professionals in the North West, we regularly connect with them on key issues regarding their work, experiences and the regional cancer landscape. Many are acutely aware of the role that deprivation plays, telling us:

“You've obviously got parts [of the North West] that have got worse educational, housing and employment opportunities and worse life outcomes. How do you improve educational outputs? How do you put money in people's pockets? How do you help people understand or determine their own destiny by doing things that will result in healthier outcomes?”

In contrast to Manchester, Cumbria sees the highest rates of cancer across the region with rates 18% higher than the national average and 12% higher than the regional average. When this is lined up with demographic data, we can see that the county has one of the oldest populations in the North West. Almost 40% of Cumbria's population is aged over 55 years old, which compares to the national average of 30%.

Cancers impacting women

Certain cancers that impact women were found to be much more prevalent in the North West's population than in the rest of England. The incidence rate for cervical cancer, in particular, is notably high across the whole region at 19% above the national average. Cumbria recorded the starkest rates of cervical cancers, at 35% above the national average, while Merseyside's rates are 31% higher than the rest of the country. Every other county also recorded a substantial burden of this disease, with cervical cancer rates 21% higher than the national average in Lancashire and 7% higher in Greater Manchester.



The North West's total death rate for trachea, bronchus and lung cancers is 25% higher than the national average

Prevalence rates of ovarian cancer and cancer of the uterus are also above average across the North West. Ovarian cancer rates are 12% higher than the English average in the North West, while cancer of the uterus is found at a 6% higher rate compared to the rest of the country. Lancashire recorded the highest incidence rates of ovarian cancer at 16% above the national average, with Greater Manchester tracking at 13% above the national rate. For uterine cancer, Cumbria has the highest incidence rates at 26% higher than the national average. Lancashire also has a high burden of this disease, with incidence rates 12% above the rest of the country.

Female breast cancer is the most prevalent recorded cancer across every North West county, with approximately 903.1 cases and 17.64 deaths per 100,000 people. The North West's incidence rate for breast cancer is 4% over that of the rest of England, with Cumbria and Cheshire experiencing markedly higher rates than elsewhere with 16% and 13% higher incidence rates respectively.

Cancers impacting men

A number of male specific cancers were recorded in high levels throughout the North West. After female breast cancer, prostate cancer is the second most prevalent cancer in the region, with 594.4 cases per 100,000 people. The North West as a whole is approximately in line with the national rates recorded for this disease asides from some notable exceptions. Lancashire for example records an incidence rate for prostate cancer that is 7% higher than the rest of England while Cheshire records rates that are 5% higher. This tallies with the findings of the Cheshire & Merseyside Health & Care Partnership, which recorded age standardised total cancer deaths for prostate cancer at 5% above the national average.

Testicular cancer is also found at a disproportionately higher rate in the North West compared to elsewhere, with incidences 4% higher than the rest of England. Overall, this disease is the 14th most prevalent cancer across the region.



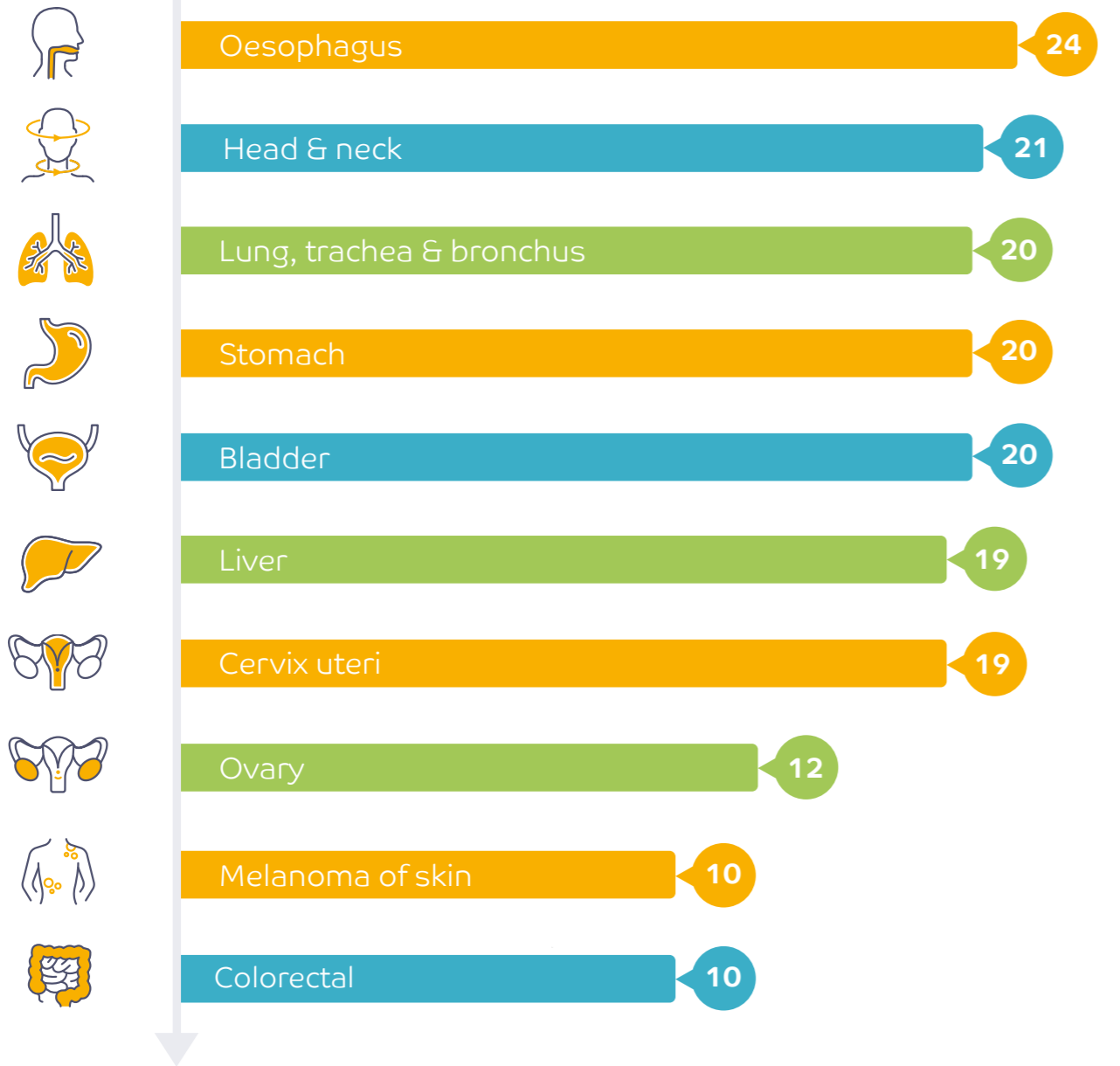
Key Challenges:

- Almost all indices used to benchmark cancer prevalence rates and total deaths from this disease are largely static across multiple years of data gathering. From 2019 to 2020 the overall rate of cancer worsened in every county and increased by 4% across the North West as a whole. From 2020 to 2021 the rate of total cancer deaths remained virtually the same, decreasing from 277.25 per 100,000 people to only 273.8. This proves the entrenched nature of the problem and highlights the urgent need for immediate evidence-led interventions in the North West's communities.
- Specific cancers have more of an impact on North Western communities than others. Oesophageal cancer is a particular challenge as all five of the region's counties recorded higher than average rates. Cumbria experiences the highest incidence rate for oesophageal cancer at 54% higher than the national average, closely followed by Merseyside at 39%, Cheshire at 33%, Lancashire at 19%, and Greater Manchester at 8%. This extra prevalence amounts to 16% more total deaths in the region compared to the English average.
- Regional lung cancer rates are very high, especially in heavily urbanised locations such as Merseyside, which has rates 59% higher than the national benchmark. Greater Manchester's communities are also being heavily affected, experiencing rates 24% higher than the English average. Cheshire sees lung cancer rates that are 14% higher.
- Head and Neck cancers remain problematic across the North West. Merseyside has the highest rate of this cancer out of the five counties and is 32% above the national average. Cumbria, Greater Manchester and Lancashire are all also managing significantly higher rates than should be expected at 25%, 20% and 19% higher rates than the national average respectively.
- Melanoma continues to be a common challenge, possibly due to lifestyles or outdoor occupations which put populations at an increased risk. Cumbria records the highest levels of this disease across the region, with an incidence rate 27% higher than the rest of England. Cheshire's communities also experience high rates of melanoma, reporting 22% more cases than the national average.

North West

% higher than the rest of England

Top Ten cancers



North West – Top 10 cancers by total deaths *

- | | |
|--|---------------|
| 1. Trachea, bronchus & lung | 6. Pancreas |
| 2. Colon, sigmoid, rectum & anus | 7. Oesophagus |
| 3. Lymphoid, haematopoietic & related tissue | 8. Liver |
| 4. Prostate | 9. Bladder |
| 5. Breast | 10. Brain |

* List is based on age standardised total cancer deaths for which data was available

MERSEYSIDE: County Overview

Cancer rates in Merseyside are in line with the cases reported across the North West – with overall recorded cancer cases tracking seven percent higher than that of the national population.

By prevalence, cancer rates in Merseyside align with the overall North West average. When looking at the death rate Merseyside stands out as the most starkly above the English average out of all the five North Western counties, at 15% above the national average.

The high levels of deprivation may account for this increased mortality rate, as Merseyside is the most deprived county in the North West, with

significantly high levels of poverty compared to both the regional and national average.

More than a quarter (28%) of the population in the Liverpool City Region are employed in routine or manual roles, while slightly less (26%) have managerial, administrative, or professional occupations. Students make up 10% of the city's population, while 8% are long term unemployed or have never worked.

Different communities across the county are managing quite widely varying rates of cancer. Sefton is facing the most cases per head of population, with cancer case rates tracking 22% over the national average. This is a full 10% more than the next community with the highest prevalence rate, which is The Wirral at 113%. In comparison, urban communities living in Liverpool City Centre





record the lowest cancer rates, at 6% below the national average.

Oesophageal, head and neck, stomach and bladder cancers represent a significant challenge for the county, with rates for all of these diseases being significantly higher than the rest of the country. Lung cancer is also a significant issue for Merseyside, with recorded prevalence rates almost 60% higher than the national average and total deaths more than 40% higher.

While liver cancer is one of the rarer forms of the disease, at just 12.5 cases per 100,000 people in the North West, Merseyside faces uniquely inflated levels of this disease, with prevalence rates 75% higher than the national average.



The total number of deaths from cancer in Merseyside is **15%** higher than the national average.

County-specific breakdown: Merseyside

Top Five Areas of Need

- **Headline statistic:** Liver cancer in Merseyside is at a **75%** higher rate compared to the rest of England.
- Lung, trachea, and bronchus cancers are extremely high, with **59%** more cases and **43%** more deaths than the national average.
- Merseyside's communities struggle with oesophageal cancer. Incidence rates are **39%** higher than the rest of the country and **15%** higher than the North West average.
- As with many lifestyle related cancers, bladder cancer is present in Merseyside at a significantly high rate - with **36%** more cases than the English average.
- Cases of stomach cancer are high in Merseyside - the county over-indexes by **35%** compared to the national average.

Merseyside

% higher than the rest of England



Merseyside – Top 10 cancers by total deaths *

- | | |
|--|---------------|
| 1. Trachea, bronchus & lung | 6. Pancreas |
| 2. Colon, sigmoid, rectum & anus | 7. Oesophagus |
| 3. Lymphoid, haematopoietic & related tissue | 8. Liver |
| 4. Prostate | 9. Bladder |
| 5. Breast | 10. Brain |

* List is based on age standardised total cancer deaths for which data was available

EDUCATION OUTREACH: Our work

Lab Coat Learning is an educational programme designed to provide young people across the North West with the knowledge, tools and insights required to make educated and informed choices about their health.

Empowering children with this information not only improves health outcomes on an individual level, but it also helps tackle health inequalities in socially deprived areas by giving participants the confidence to become 'health champions' for their families and communities.

Lab Coat Learning delivers a programme of cross-curricular lessons and resources that includes fun and engaging hands-on experiments and investigations which compliment classroom based learning. The programme mixes vital health messages with the promotion of STEM subjects, covering topics such as the components of a cell, DNA, cell growth and division, apoptosis, UVA and UVB rays, cancer knowledge, terminology and research methods.

Each child is given a take home pack with information that can be shared with families and friends to help influence healthier lifestyles outside of the classroom. Follow-up sessions ensure that the new behaviours are maintained and that the children remain motivated to make good health-based decisions.

The innovative programme is suitable for children aged 3-14 and it prioritises schools and harder to reach communities in areas of deprivation who do not traditionally engage with health messages.



“

Empowering children with information improves health outcomes on an individual level and also helps tackle health inequalities in areas of social deprivation.

”

CUMBRIA: County Overview

When compared to the English average, the cancer incidence rate in Cumbria is higher than any other North West county at 18% above the national average.

The area's demographic backdrop may explain this high prevalence rate, as Cumbria has one of the oldest population profiles in the North West - 39% of the county's population is over 55 years old and 11% are aged over 75.

As a whole, Cumbria is less affected by deprivation than other North West counties. However, while it is 10% less deprived than the rest of the region and nearly 30% less deprived than Liverpool, the area does host several pockets of entrenched deprivation. Barrow for example is 26% more deprived than the English average and Copeland records 19% higher deprivation levels, which compares with locations such as Eden and South Lakeland which are much less deprived than the national average.

Around a third (31%) of Cumbria's population are employed in routine or manual roles, while 28% have managerial, administrative, or professional occupations. Students make up 5% of the population, while 4% of people living in the area are long term unemployed or have never worked.

Despite the relative affluence of the county's population, it records some of the highest rates in the North West for several cancers. This includes stomach cancer incidence rates that are 75% higher than the rest of England and oesophageal cancer is found in Cumbria at a rate that is more than double the national average. When looking

at total deaths as well as prevalence, Cumbria records a 39% higher rate for liver cancer than the rest of the country.

Colorectal cancer is also significantly higher in Cumbria than the national average would suggest, with an incidence rate that's 37% above the rate for England as a whole. In addition, cervical cancer rates in Cumbria track at 35% above the English average.

County-specific breakdown: Cumbria

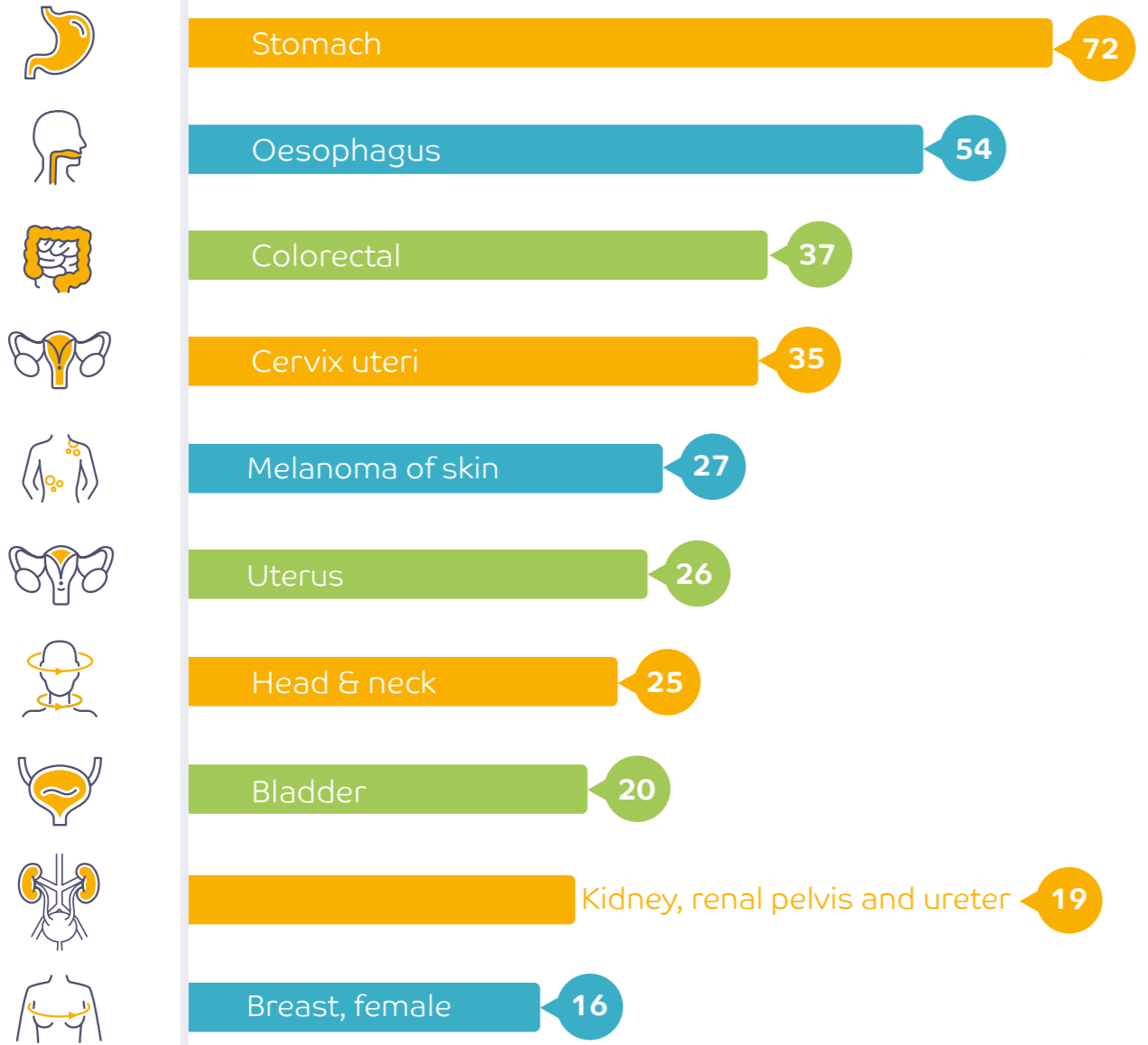
Top Five Areas of Need

- Cumbria's healthcare infrastructure is facing stomach cancer rates that are **72% higher** than the rest of the country.
- Incidence rates of oesophageal cancer are more than **50% higher** than the rest of England.
- Colorectal cancer is present in Cumbria's communities at a **37% higher** rate compared to the national average.
- Cervical cancer has an incidence rate in Cumbria that is **35% higher** than the English average.
- Liver cancer accounts for **39% more** deaths on average in Cumbria than it does nation-wide

Cumbria

% higher than the rest of England

Top Ten cancers



Cumbria – Top 10 cancers by total deaths *

- | | |
|--|---------------|
| 1. Trachea, bronchus & lung | 6. Pancreas |
| 2. Colon, sigmoid, rectum & anus | 7. Oesophagus |
| 3. Lymphoid, haematopoietic & related tissue | 8. Liver |
| 4. Prostate | 9. Bladder |
| 5. Breast | 10. Brain |

* List is based on age standardised total cancer deaths for which data was available

INNOVATIVE TREATMENT: Our work



The North West has the highest regional incidence and mortality rate of pleural mesothelioma, a cancer that affects the lining of the lung. The reason for this stems from the fact that mesothelioma is directly linked to asbestos exposure - a material that was widely used as part of the North West's historic shipbuilding industry.

Chemotherapy drugs and drugs that target the immune system can help some patients with this disease but it's been found that others do not respond at all and in most cases the cancer eventually becomes resistant to treatment.

A new study will use a targeted drug combination to understand why some patients might benefit

from treatment more than others. An innovative process has been devised for the project, in which a tiny mesothelioma sample from a diagnostic biopsy is placed into a hen's egg. Cancerous cells will then form a tumour nodule in the egg and grow, allowing for new and existing drugs to be tested against the mesothelioma cells.

This study identified that a biomarker gene called BAP1 influences how patients respond to two existing drugs used to treat mesothelioma. Thanks to this insight, the hen's egg model can be used to understand the likely response of mesothelioma in individual patients in order to design better clinical trials.

LANCASHIRE: County Overview

Cancer prevalence rates in Lancashire are higher than the national average but the county is broadly in line with average rates across the North West for both prevalence and total deaths.

The county is the most economically diverse in the region. This is illustrated by the fact that it encompasses both Blackpool, which has some of the most deprived communities in England, and the Ribble Valley, one of the nation's wealthiest areas. The county's under-55s make up around 68% of the population, with 19% of the population aged over 65.

Approximately a quarter (27%) of Lancashire's population is employed in routine or manual roles and the same proportion have managerial, administrative, or professional occupations. Students make up 9% of the county's residents, while 6% are long term unemployed or have never worked.

Incidences of lung cancer are 9% above the national average, but this is well below the North West's overall lung cancer rates which are 20% higher than the English average. Lancashire also has a much lower liver cancer incidence rate than the North West, with occurrences of this disease being in line with the national average.

In contrast, bladder and cervical cancer prevalence rates in the county are significantly greater than the national average, at 26% and 21% respectively. Bladder cancer also records

a total death rate that is 16% above the average for England. Lancashire's communities also face the challenge of prevalence high rates for head and neck cancers, which track at 19% above the national average.

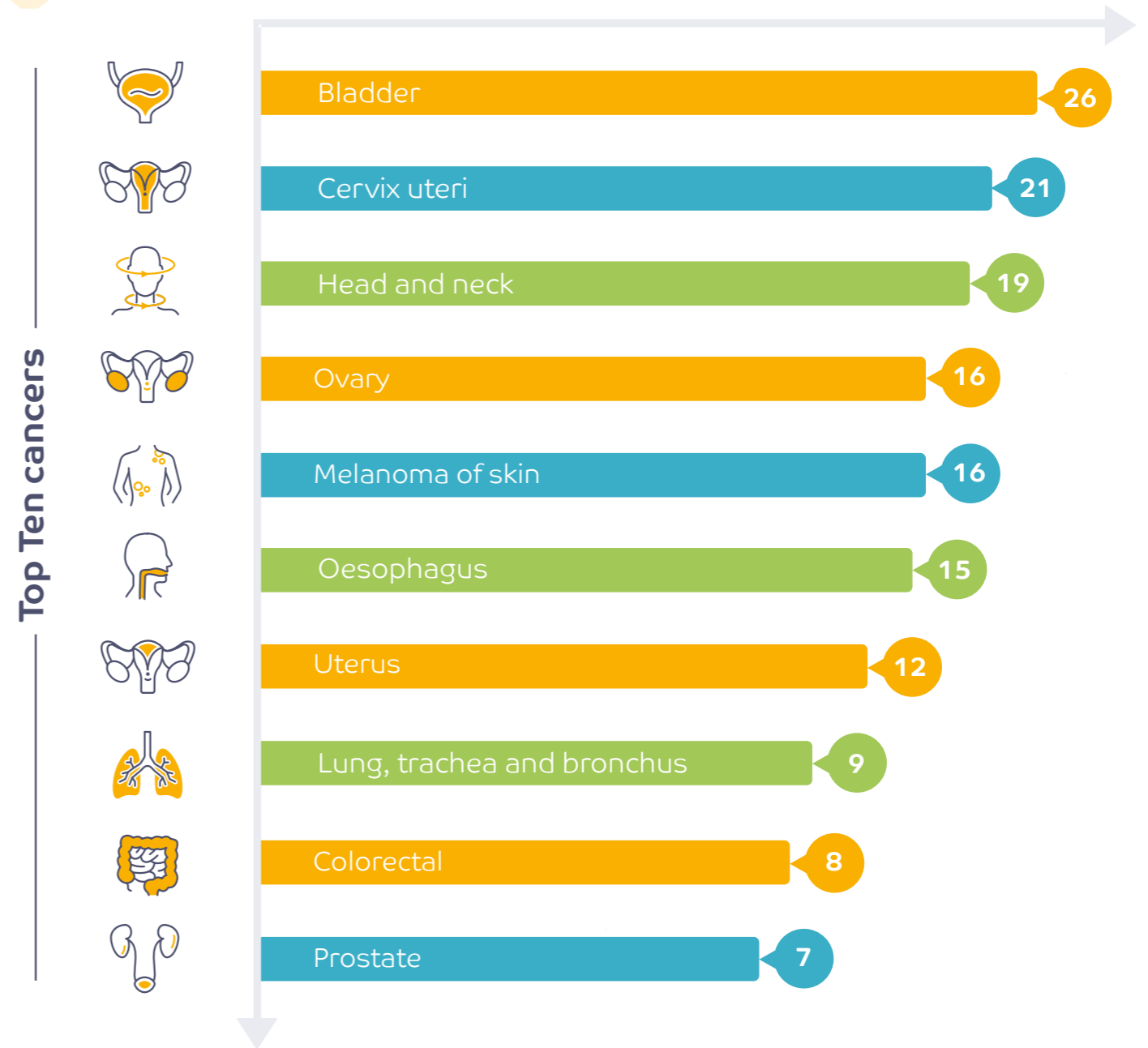
County-specific breakdown: Lancashire

Top Five Areas of Need

- Bladder cancer is present in Lancashire at a **26%** higher rate when compared to the rest of the country. This leads to a total death rate from bladder cancer that is **16%** higher than the national average.
- Lancashire's cervical cancer incidence rate is **21%** higher than the English average.
- The prevalence rates for head and neck cancers are **19%** higher in Lancashire's communities than in the rest of the nation.
- Melanoma's prevalence rate in Lancashire is **16%** higher than the rest of England.
- Ovarian cancer is found at a **16%** higher rate in Lancashire compared to the rest of the country.

Lancashire

% higher than the rest of England



Lancashire – Top 10 cancers by total deaths *

- | | |
|--|---------------|
| 1. Trachea, bronchus & lung | 6. Pancreas |
| 2. Colon, sigmoid, rectum & anus | 7. Oesophagus |
| 3. Lymphoid, haematopoietic & related tissue | 8. Liver |
| 4. Prostate | 9. Bladder |
| 5. Breast | 10. Brain |

* List is based on age standardised total cancer deaths for which data was available

HEAD & NECK CANCER: Our work

Immunotherapy treatments that harness the body's immune system to destroy cancer cells have been shown to provide life-extending advantages in metastatic head & neck cancer cases. However, the proportion of patients responding is low and clinicians are unable to predict which patients will benefit or who might suffer side effects with little impact on their cancer.

To better inform the likelihood of success, a new project will assess whether specific magnetic resonance imaging (MRI) scans can detect positive effects of an immunotherapy drug called nivolumab before patients have surgery.

While routine MRI scans can provide information about tumour size and potential spread, any information about tumour biology is limited. By using advanced MRI scans acquired before and after nivolumab treatment, it is possible to assess



evidence of changes in the tumour. These changes can be correlated with biological changes found in blood samples and the cancer itself, providing a much fuller picture of the treatment's efficacy.

New MRI markers of immunotherapy response could help better target treatments to the patients most likely to benefit. In addition, it will avoid unnecessary treatment and side effects for those unlikely to respond and could inform future clinical trials to help those least likely to benefit from the treatment.



Bladder cancer is 26% more prevalent in Lancashire and causes 16% more deaths in the county compared to the national average.

GREATER MANCHESTER: County Overview

Greater Manchester represents an interesting combination of issues, as while a number of key cancers are present at strikingly high rates it has the lowest cancer incidence rate in the North West.

However this must be further balanced against data that suggests the county has a 10% higher total cancer death rate than the national average.

The young make-up of the region, with 73% of Greater Manchester's residents being aged under 54, arguably influences the low prevalence rate of this disease.

Deprivation levels are another important factor, which also point out the complexities of the area's demographics. This is due to the fact that very affluent areas such as Trafford and Tameside are situated very close to inner-city communities that experience a lot of deprivation. Manchester City itself is one of the country's poorest areas, with deprivation levels 54% higher than the English average.

More than a quarter (28%) of Greater Manchester's population are employed in routine or manual roles, while 27% have managerial, administrative, or professional occupations. Students make up a tenth of the population, while 7% of people living in the area are long term unemployed or have never worked.



With an overall incidence rate lower than its neighbours, Greater Manchester has the lowest regional rates for testicular cancer and is the only North West county to under-index on incidences of breast cancer.

However, the county still records incidence rates of lung, trachea and bronchus cancer that are 24% higher than the national average. The Greater Manchester Healthcare Partnership has found that lung, trachea and bronchus cancers have a 37% higher death rate in the city compared to the English average.

Liver cancer rates in Greater Manchester are also concerning, with a 23% higher incidence rate for this disease than the rest of England and a 36% higher total death rate. In addition, head and neck cancer rates in the county index at a 20% higher prevalence when benchmarked against the national average.



The total death rate for lung, trachea and bronchus cancers is **37%** higher in Greater Manchester than the national average.

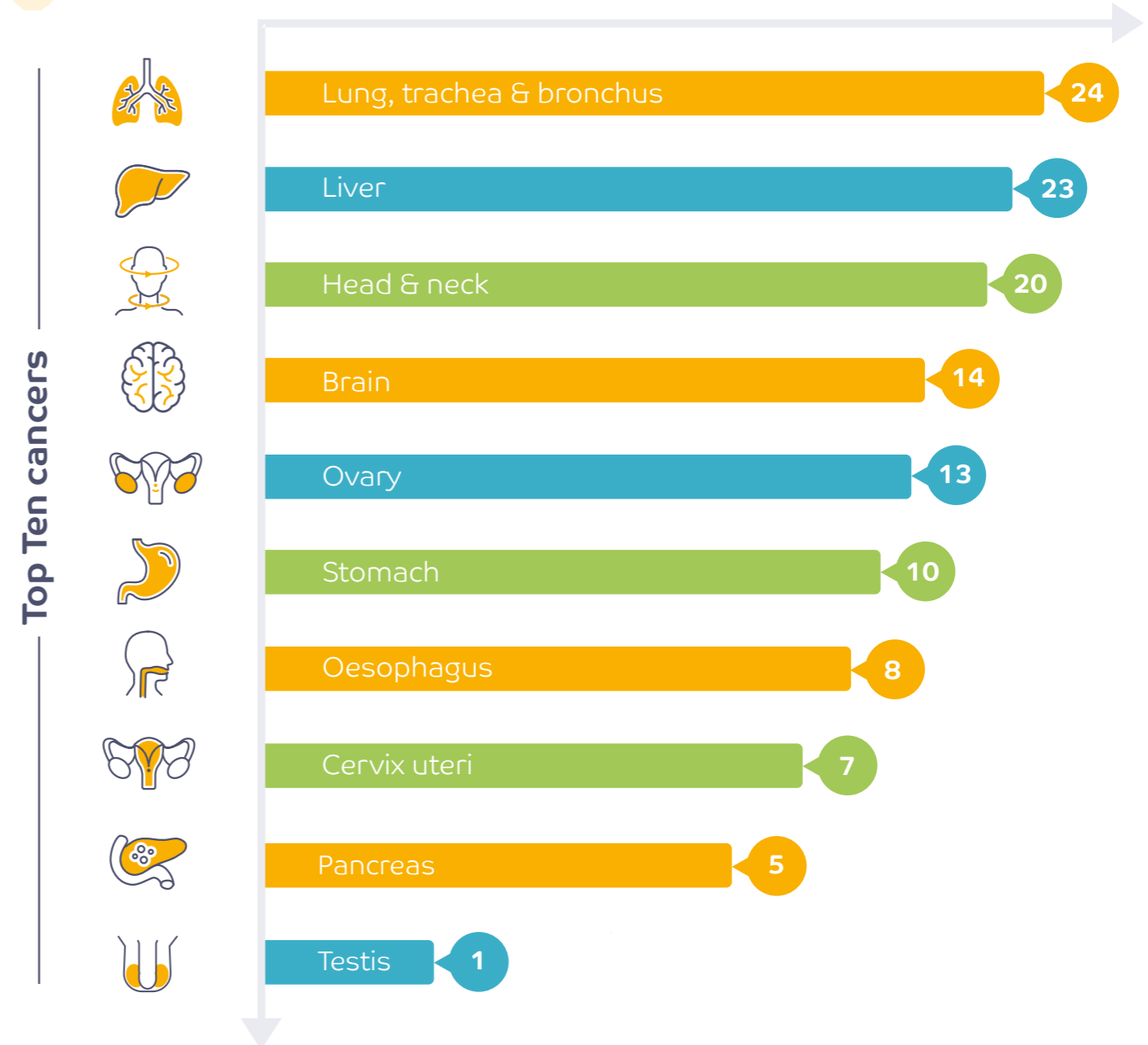
County-specific breakdown: Greater Manchester

Top Five Areas of Need

- Diagnosed cases and deaths of lifestyle related cancers are very high in Greater Manchester. This includes lung, trachea and bronchus cancers, which are present at a **24%** higher rate than the national average and for which the total death rate is **37%** higher.
- Greater Manchester's communities are impacted by a **23%** higher prevalence rate of liver cancer than the rest of England.
- Head and neck cancer incidence rates are **20%** higher than the rest of England in Greater Manchester.
- Incidences of ovarian cancer are **13%** higher in Greater Manchester than the national average.
- Incidence rates of stomach cancer in Greater Manchester are **10%** higher than England's average and the total death rate has reached **39%** above the national median.

Greater Manchester

% higher than the rest of England



Greater Manchester – Top 10 cancers by total deaths *

- | | |
|--|---------------|
| 1. Trachea, bronchus & lung | 6. Pancreas |
| 2. Colon, sigmoid, rectum & anus | 7. Oesophagus |
| 3. Lymphoid, haematopoietic & related tissue | 8. Liver |
| 4. Prostate | 9. Bladder |
| 5. Breast | 10. Brain |

* List is based on age standardised total cancer deaths for which data was available

CHESHIRE: County Overview

Cheshire is more affluent than any of its regional neighbours, and is the only county in the North West to index at a lower level of deprivation than the national average.

More than one third (36%) of the population in Cheshire are employed in managerial, administrative, or professional roles, while a quarter (25%) have routine or manual occupations. Students make up 7% of the population, while 4% of people living in

the area are long term unemployed or have never worked.

The county has a relatively high percentage of older residents with approximately 36% of the population aged over 55, which compares to the national average of 30%, and 10% of the country are over 75 years old.

The cancer landscape within Cheshire paints a mixed picture. Warrington has the lowest cancer incidence rate in the county at 97% of the national average, while Cheshire East's cancer rate per 100,000 people is 10% higher than the



national average. Cheshire West and Chester has a cancer incidence rate that is 16% higher than the rest of England and 10% higher than the regional average.

Similar to other areas in the North West, Cheshire has very high rates of oesophageal cancer. This disease is present at a 33% higher incidence rate than the national average. Melanoma also afflicts Cheshire's communities at a significant level, with prevalence rates 22% higher than the rest of the country.

Liver and bladder cancer rates are 20% higher than the national average, and lung, trachea and bronchus cancer rates are 14% higher than the rest of England. Incidences of brain cancer are 15% more prevalent and this disease accounts for 6% more total deaths in Cheshire compared to the national average.



Cheshire's healthcare infrastructure is having to manage an oesophageal cancer incidence rate that is 33% higher than the national average.

Other cancers which have higher incidence rates in Cheshire than the rest of England include cancer of the pancreas, breast cancer, colorectal cancer, and prostate cancer.

County-specific breakdown: Cheshire

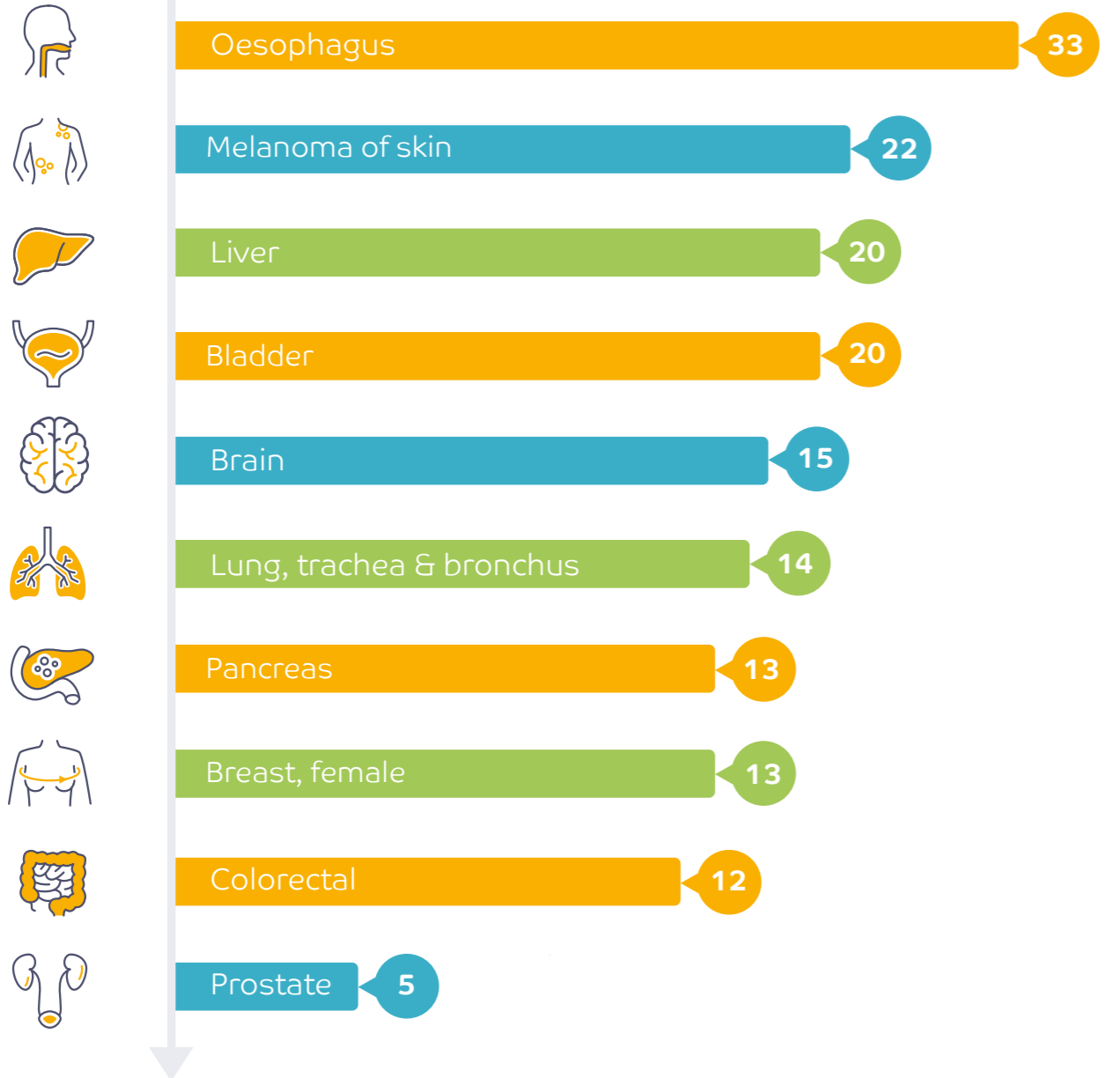
Top Five Areas of Need

- Oesophageal cancer is **33%** more prevalent in Cheshire than the national average.
- Incidence rates of melanoma are **22%** higher than the English average.
- Cheshire's communities face a **20%** higher incidence rate of liver cancer than the rest of England.
- Bladder cancer is found in Cheshire at a **20%** higher rate than the national average.
- Brain cancer is prevalent at a **15%** higher rate in Cheshire and it has a **6%** higher total death rate.

Cheshire

% higher than the rest of England

Top Ten cancers



Cheshire – Top 10 cancers by total deaths *

- | | |
|--|---------------|
| 1. Trachea, bronchus & lung | 6. Pancreas |
| 2. Colon, sigmoid, rectum & anus | 7. Oesophagus |
| 3. Lymphoid, haematopoietic & related tissue | 8. Liver |
| 4. Prostate | 9. Bladder |
| 5. Breast | 10. Brain |

* List is based on age standardised total cancer deaths for which data was available



Putting our region's cancer needs first



Get in touch

E: info@nwcr.org

T: 0151 709 2919

nwcr.org

Registered Charity No. 519 357