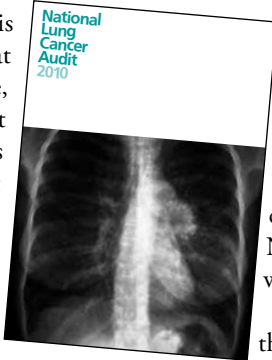


Differences in lung cancer treatment are reducing, says audit

The percentage of lung cancer patients who have a life-saving operation every year in the UK has increased by over 50% in 5 years, according to the National Lung Cancer Audit 2010, produced by the NHS Information Centre.

Lung cancer is often diagnosed at an advanced stage, which means that up to three quarters of patients are not suitable for surgery. However, the improved surgery rate seen in the audit suggests that more clinical teams have developed the expertise to assess patients of borderline fitness for surgery and have access to more complex surgical techniques often required in such situations.



The increase mirrors other improvements in key processes examined by the audit. This contains data for almost 100% of the estimated 37 600 lung cancer cases in the UK to have presented to secondary care and been first treated in 2009.

This is thought to be an unprecedented achievement for any audit in the world and is the result of the commitment of NHS organizations who submit the data.

It is also thought that the audit itself, which began 5 years ago with data for about 40% of cases for England, has helped drive improvements in care by giving vital information about health providers performance and how it compares to others.

The percentage of patients receiving key care measures, such as surgery or anti-cancer treatment like chemotherapy or radiotherapy is improving, but still varies with interquartile ranges between 9.8–16.3% for surgery, 54.0–66.5% for any active anti-cancer treatment, 70.9–85.2% for diagnosis by tissue biopsy (histological or cytological diagnosis) and 52.7–79.8% of patients with small cell lung cancer receiving chemotherapy.

The variation is only to a limited extent explained by differing complexity of cases from provider to provider. However, the gap between the highest and lowest performing provider is narrowing, as is the gap between the UK and other countries in western Europe that have historically had higher quality care.

Dr Mick Peake, audit clinical lead and clinical lead for NHS Cancer Improvement and the National Cancer Intelligence Network, and consultant in respiratory medicine, University Hospitals of Leicester NHS Trust, said: 'It is a tribute to the ongoing work of all the lung cancer specialist teams across the country that we now have such excellent data on the care of lung cancer patients in the UK.'

'We also now have clear evidence that standards of care are improving and we believe that the audit process itself is one of the main factors behind this.'

He continued: 'Wide variation still exists, however, in the standard of care between different hospitals and we need to continue to strive to bring the care in all units up to the standard of the best.'

Dr Rosemary Gillespie, chief executive of The Roy Castle Lung Cancer Foundation, said: 'We welcome the publication of this National Lung Cancer Audit, which is vital in ensuring all patients receive a fair deal. We are pleased to see some improvements, in particular the significant increase in those lung cancer patients receiving surgery... The real improvement we would like to see is in survival rates, which still remain low.'

Dr Rosemary Gillespie, chief executive, The Roy Castle Lung Cancer Foundation



Parliamentary group report calls for funding guarantees for schizophrenia care

A new report from the All-Party Parliamentary Group on Mental Health, supported by Janssen and written and researched by the Institute of Psychiatry, highlights key areas in which mental health trusts are struggling to achieve best practice, and showcases inconsistencies in the management of schizophrenia.

Mental health trusts in England were surveyed about the treatment of schizophrenia (68% of trusts responded) and based on the findings, the All-Party Parliamentary Group on Mental Health has called for:

- Assurance to be provided to trusts about the nature of mental health funding in light of the new commissioning arrangements for

mental health, in particular that funding for psychological therapies in schizophrenia is maintained and improved, rather than reduced

- Increased clarity regarding the best way to implement psychological therapies – most trusts did not manage to offer cognitive behavioural therapy to all service users with schizophrenia
- Guidelines to rectify reported inconsistencies in the procedures for the monitoring and recording of medication adherence
- More research on the role of cannabis in both the onset of serious mental illness and in relapse. There is a perception that the use

of high grade cannabis is increasingly problematic for people with schizophrenia, but further national data would enhance the understanding of its dangers.

Charles Walker, MP and Chair of the All-Party Parliamentary Group on Mental Health, commented: 'While we have witnessed improvements in the management of schizophrenia in recent years, it is clear that mental health trusts feel more can always be done to ensure that patients receive optimal treatment and care. I hope we will continue to see progress as part of the government's programme for NHS reform and in spite of this era of pressured budgets.'