

Regional variations in quality of survival among men with prostate cancer across the United Kingdom

Project objectives

Prostate cancer incidence, treatment and survival rates are known to vary by geographic area throughout the United Kingdom. Despite this little is known about regional differences in quality of life after treatment for prostate cancer. We have thus investigated variations in patient-reported outcomes between England, Scotland, Wales and Northern Ireland. Within England we also compared outcomes between the 19 Cancer Alliances which were formed in 2016 with the aim of improving cancer care and reducing inequalities in cancer outcomes.

What we did

A survey of prostate cancer survivors diagnosed in the previous 18-42 months was conducted throughout the UK by post between October 2015 and November 2016. These men were asked a range of questions on their general health and any urinary, bowel and sexual problems, fatigue and depression they may be experiencing. Further information was also asked regarding the survivors themselves. This included their age and whether they had any long-term medical conditions such as a heart condition. The type of treatment each man had received was also collected as it is known that quality of life can vary depending upon whether surgery, radiotherapy or hormone therapy is used to treat prostate cancer. We used this data to measure quality of life in different parts of the UK. As part of any analysis we took account of the fact that men living in different areas can have different characteristics and receive different types of treatment.

Our results

We found that compared to the UK average, general health was significantly lower in Wales and Scotland. Men who responded to the survey also reported more urinary incontinence in Scotland. More urinary irritation, which includes conditions such as bleeding in urine, was reported by men from Scotland and Northern Ireland. Poorer bowel function was identified in Scotland and Northern Ireland, while poorer sexual function was reported in Scotland. Reduced vitality, such as more fatigue and depression, was reported in Scotland, Wales and Northern Ireland.

Within England, poorer than average general health was reported in South Yorkshire and North-East & Cumbria. Higher levels of urinary incontinence were reported in North-East & Cumbria and Peninsula (Cornwall and Devon). More sexual problems were reported in West Midlands, while poorer vitality was identified in North-East & Cumbria and West Midlands.

Conclusions and implications for service improvement

Quality of survival among prostate cancer survivors varies by area of residence. Given that we accounted for treatment, clinical details and personal characteristics such as age in any analysis, these factors are unlikely to be the cause of any reported differences. Better survival quality in poorer performing areas could potentially be achieved if the best practice in good performing areas were adopted across the UK. Further investigation as to why differences in survival quality are being reported by prostate cancer survivors from different parts of the UK is thus needed.