

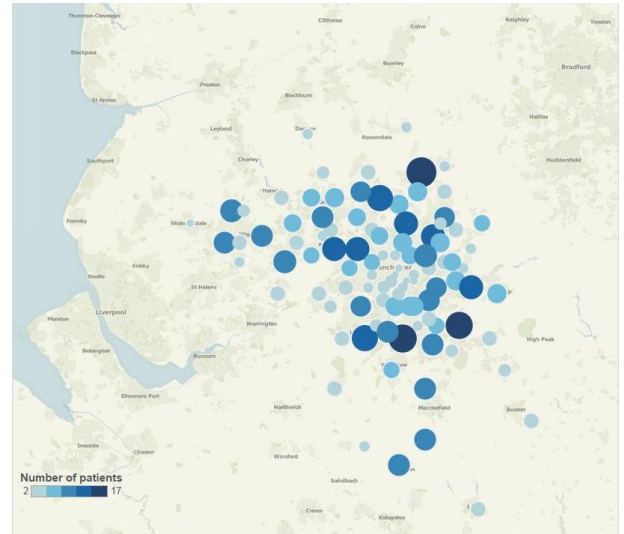


Christie Clinical Outcomes

Upper Gastrointestinal Cancer

Christie Patients

Over 500 patients are referred to the Christie each year with a new diagnosis of Upper Gastro-intestinal (UGI) cancer (including disease sites of the small bowel, stomach and oesophagus). There are more than 40 new clinical appointments each month. The average age of UGI cancer patients at the Christie is 68 years (Fig. 1). 78% of UGI cancer patients are over 60 years old. A third (33%) of patients are female compared to two-thirds male (67%).



Map 1. Catchment area for 98% of Christie UGI patients. Size and depth of colour is relative to the number of patients from the same area.

The majority of Christie patients are residents of the North West of England and in particular around the Greater Manchester region (Map 1). A small number of patients travel from outside the NW for treatment.

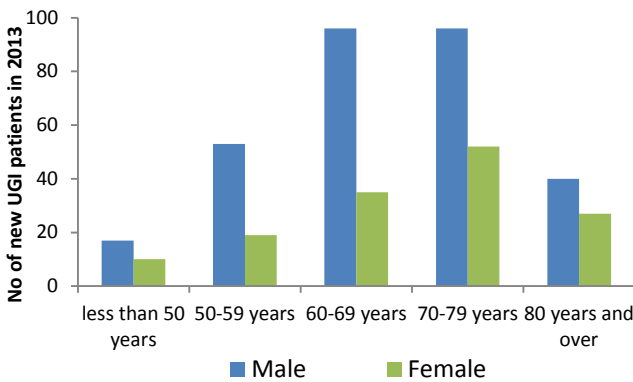


Fig. 1. number of new upper gastrointestinal patients per year (2013 presentations)

Comorbidities

Comorbidities are diseases, other than cancer, that a patient has that can impact on treatment and outcome. All Christie patients are regularly assessed for comorbidities on a scale of no comorbidities to severe comorbidities. Most Christie UGI cancer patients have either no comorbidities (36%) or mild comorbidities (31%) (Fig. 2). For UGI cancer patients in 2013, there was no correlation between severity of comorbidities and disease site or stage. However, severity increased with age (as would be expected).

Diagnosis

Disease stage describes the size and spread of cancer. Stage 0 and I are small cancers which have not spread, stage IV is where the cancer has spread to other parts of the body. Fig. 3 shows the stage of UGI cancer patients split by the three most commonly diagnosed UGI disease sites: gastro-oesophageal junction (GOJ), oesophagus, stomach. 82% of patients who presented with stomach cancer in 2013 had stage IV disease.

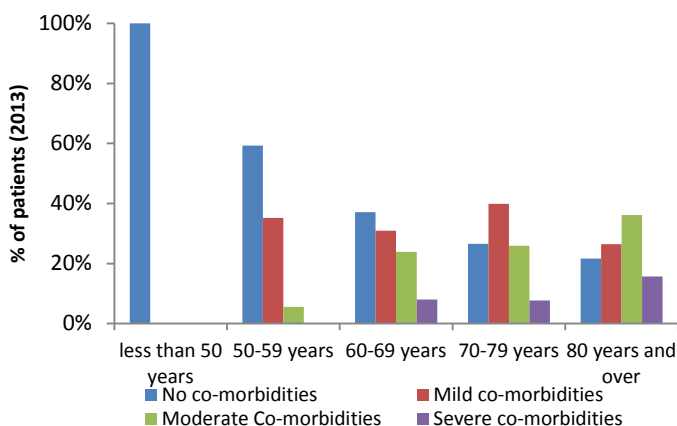


Fig. 2. Comorbidities

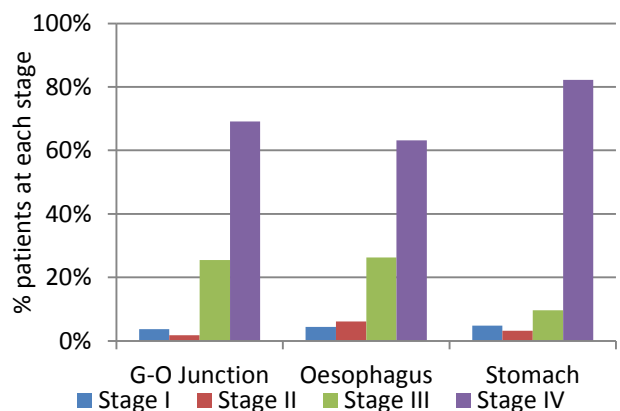
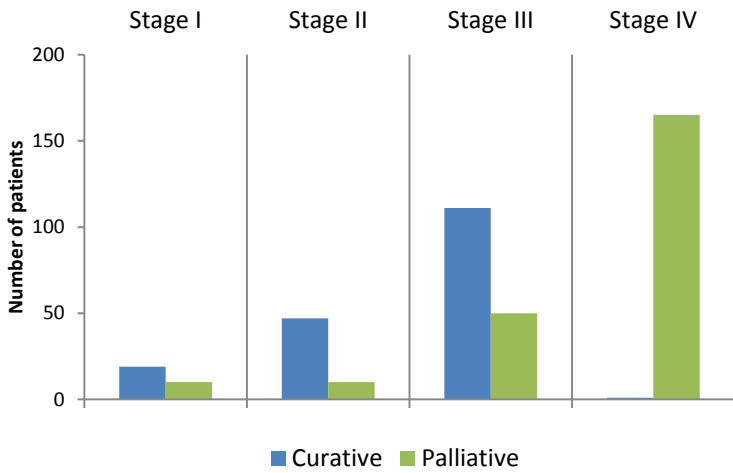


Fig. 3. Disease stage

Christie Treatment

The type of treatment a patient will receive at the Christie will depend upon various factors which the clinician will discuss with the patient. Factors will include the stage of disease at presentation (Fig. 4), other health problems that the patient has at the time of treatment (comorbidities) and the patient's ability to cope with the potential effects of the treatment. Around 80% of all Upper Gastrointestinal cancer patients in 2013 had stage III or IV disease.



43% of Christie Upper Gastrointestinal cancer patients, in 2013, were treated with curative intent. Of these patients, around 50% were referred for systemic anti-cancer therapy (including chemotherapy) and 25% for external beam radiotherapy.

Fig. 4. Treatment intent for Upper Gastrointestinal cancer patients diagnosed with different stages of cancer in 2013

Survival Outcomes

Survival outcomes are dependent on stage of disease (Fig. 5) and the patient's performance status (their general health and fitness) (Fig. 6). All Christie patients are assessed for performance status (ECOG) using a scale of 0 (patient is fully active) to 4 (completely disabled by poor health). Approximately 50% of Christie Upper Gastrointestinal cancer patients who presented in 2013 had a performance status of 1 (restricted in physically strenuous activity). One year survival for all Upper Gastrointestinal patients treated at the Christie is 57%.

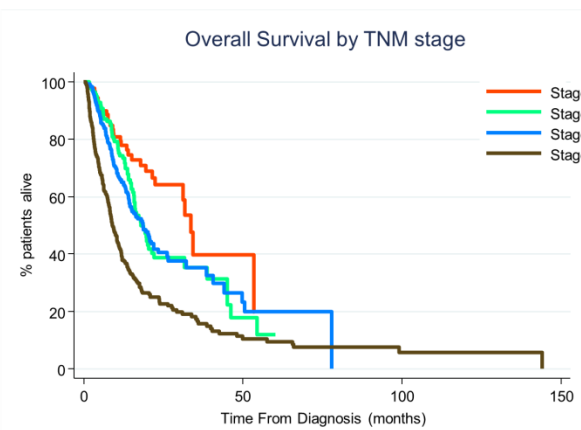


Fig. 5. Survival estimates for Upper Gastrointestinal cancer patients diagnosed with different stages of cancer between 2007 and 2013.

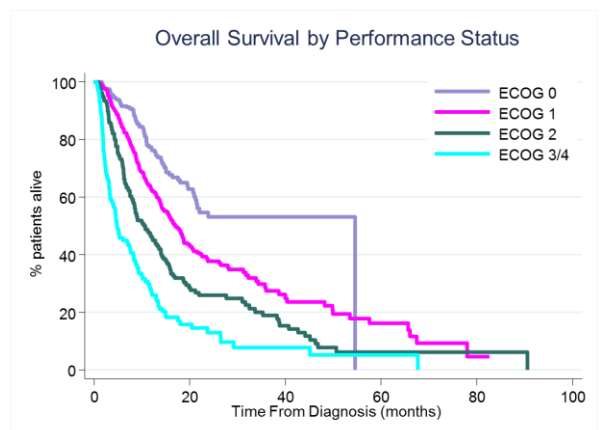


Fig. 6. Survival estimates for Upper Gastrointestinal cancer patients diagnosed 2007-2013 by level of fitness (ECOG performance status).