



PREVENTING CANCER LOCALLY:
How Manchester can
beat cancer sooner

Today 1 in 2 of us will be diagnosed with cancer

However, more of us are surviving than ever before...



OUR RESEARCH IN MANCHESTER

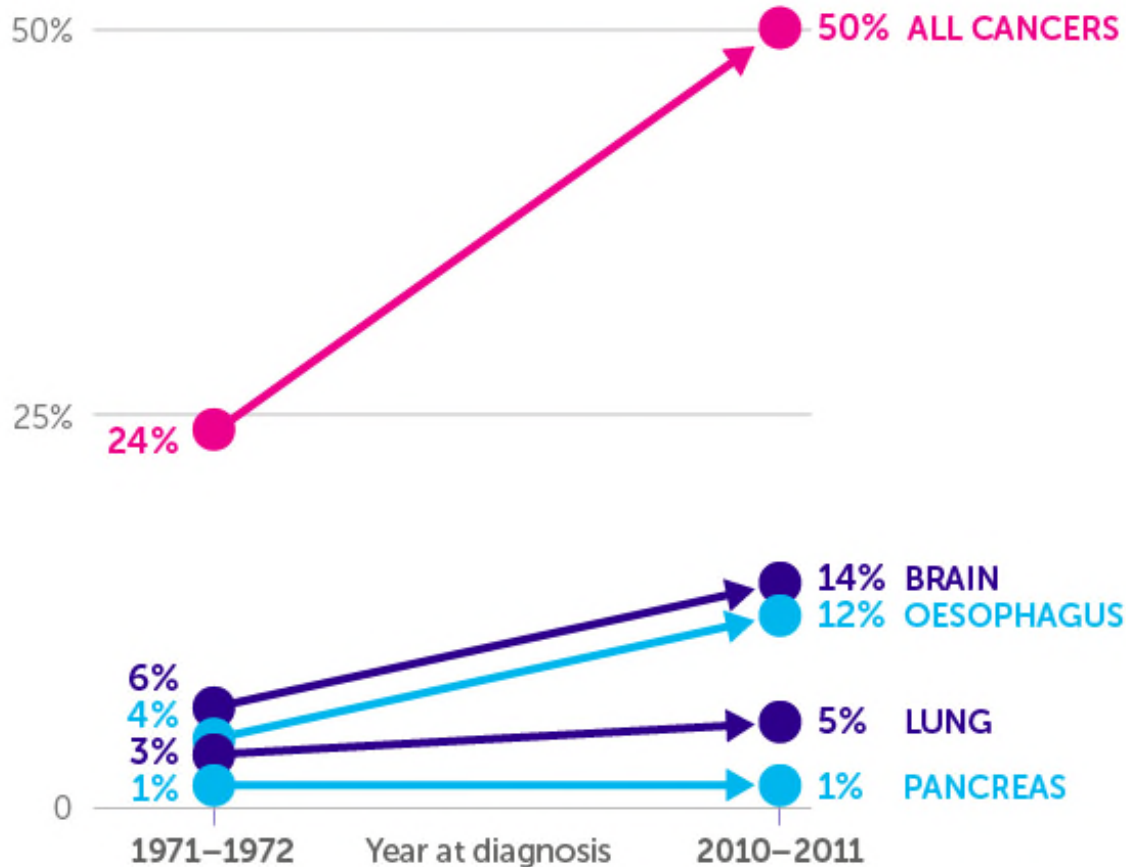
- Cancer is caused by uncontrolled cell growth. It's as diverse as our body's cells
- Cancer Research UK Manchester Institute and Manchester Cancer Research Centre
- Partners with the University of Manchester, The Christie and others
- Collaboration is key - to accelerate progress and translate it from the lab to patient treatment quickly
- We are blazing a trail in research areas that include:
 - lung
 - skin
 - pancreatic
 - blood cancers
 - personalised therapy



Last year we spent around
£22 million on research here

10-YEAR SURVIVAL FOR HARD-TO-TREAT CANCERS

10-YEAR SURVIVAL FOR PATIENTS DIAGNOSED IN 1971–1972
COMPARED TO PATIENTS DIAGNOSED IN 2011–2012



Ten-year net survival for people diagnosed with all cancers (ICD10 C00–C97, excl. C44), brain (ICD10 C71), Lung (ICD10 C33–C34), Oesophageal (ICD10 C15), Pancreatic (ICD10 C25) cancers between 1971–1972 and between 2010–2011. Calculated by the Cancer Survival Group at LSHTM.

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LUNG CANCER CENTRE OF EXCELLENCE

Why focus on lung cancer?

- Lung cancer is the second most common cancer in the UK
- Over 40,000 people diagnosed each year.
- Fewer than 10% of patients survive five years after diagnosis
- Improvements in survival have been limited

Key problem with studying lung cancer:

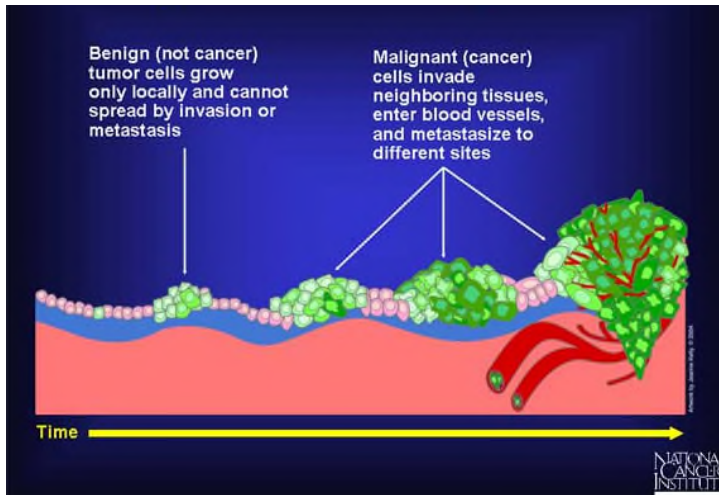
- Access to tumour material
- Many patients do not undergo surgery



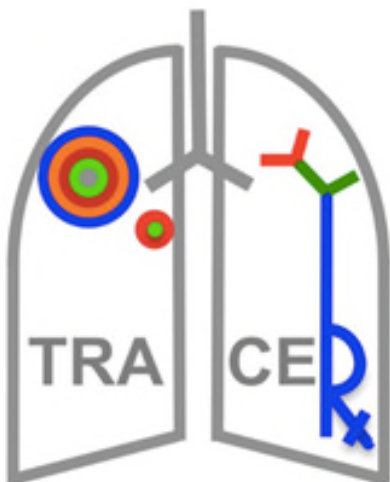
*Professor Caroline Dive
CRUK Manchester Institute*

*Professor Charles Swanton
UCL Cancer Institute*

CIRCULATING TUMOUR CELLS



TRACERx CLINICAL TRIAL

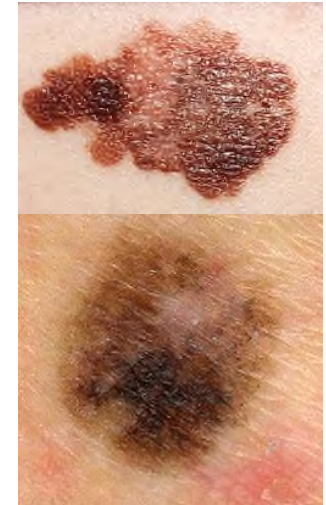


£14 million CRUK study spanning nine years, including Manchester researchers and patients

Aims to investigate how lung tumours evolve over time as patients receive treatment

Will recruit 850 lung cancer patients from across the UK

MALIGNANT MELANOMA



Professor Richard Marais

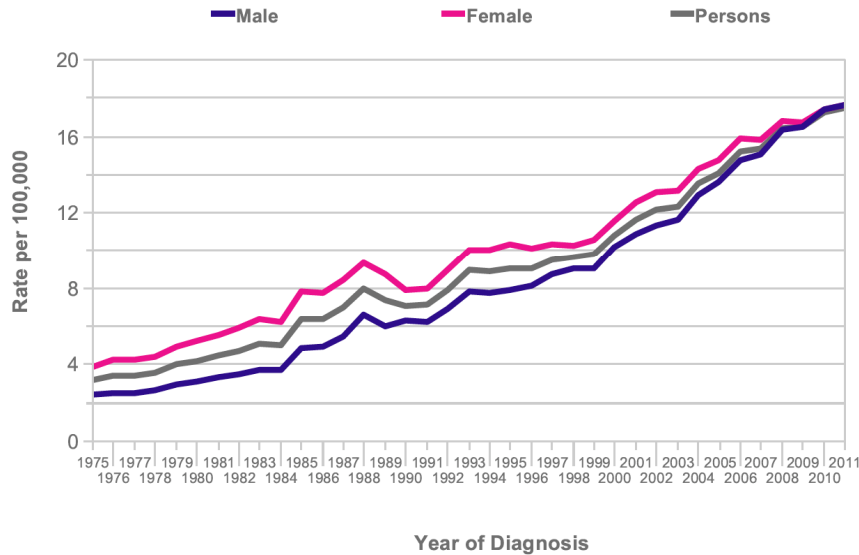
More than 10,000 cases in the UK each year; 2,000 deaths
150,000 cases worldwide and 30,000 deaths

Treatment is by surgery, but needs to be caught early = 90% cure rate

Metastatic melanoma (the spreading form)

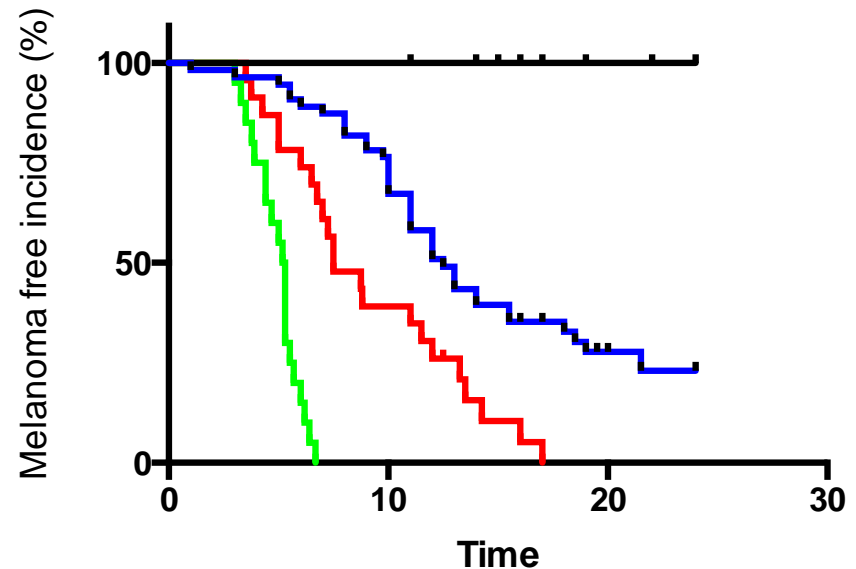
- does not respond to therapy
- median survival 6 months
- five year survival rate of 5-10%

MALIGNANT MELANOMA



Incidence rates are rising: How do we prove (disprove) that UV radiation drives tumour development?

UV radiation accelerates the rate at which mice develop melanoma, and sunscreen does not block this effect





**HOW MANY MORE
LIVES COULD BE SAVED
BY IMPLEMENTING
POLICIES TO HELP
PREVENT CANCER IN
THE FIRST PLACE?**

DOES PREVENTION MATTER?



4 IN 10 CANCERS CAN BE PREVENTED

These are proven ways to reduce the risk of cancer.¹³

Percentages and circle sizes show the maximum proportion of cancer cases that could be prevented each year in the UK

Percentages shown are based on UK prevalence of risk factors and incidence of cancer types, they are not Greater Manchester-specific.

OTHER

MINIMISE RISKS AT WORK
4%

MINIMISE CERTAIN INFECTIONS
3%

MINIMISE RADIATION
3%

BREASTFEED IF POSSIBLE
1%

MINIMISE ANY TIME SPENT ON HRT
1%



Up to two thirds of all long-term smokers will be killed by their habit

Up to 64,500 UK cancer cases could be prevented by going smoke free

SMOKING CAUSES OVER ¼ OF UK CANCER DEATHS AND NEARLY 1-IN-5 CANCER CASES

TOBACCO CONTROL



Source: Action on Smoking and Health. The image conforms to the requirements of the EU Tobacco Products Directive and UK law on standardised packaging.

WHY WE NEED A SMOKE FREE GREATER MANCHESTER

SMOKING RATES IN GM

ADULT SMOKING RATE¹ 19.9%



The percentage of adults over 18 currently smoking cigarettes in Greater Manchester is higher than the England average of **16.9%**.

ROUTINE AND MANUAL SMOKING RATES² 29.8%



The percentage of routine and manual workers smoking in Greater Manchester is higher than the England average of **26.5%**.

SMOKING RATE IN CHILDREN³ 3.3%



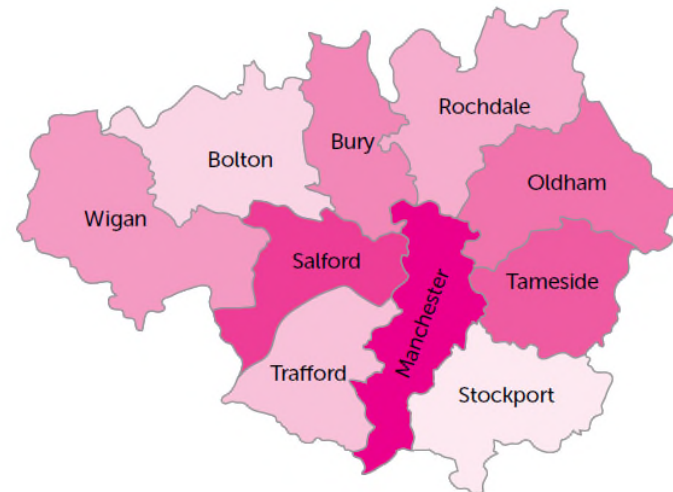
The percentage of children aged 11 - 15 who are regular smokers in Greater Manchester is higher than the England average of **3.1%**.



LUNG CANCER INCIDENCE IN GM¹²

A map ranking the average lung cancer incidence at local authority level in Greater Manchester.

More than 8 in 10 lung cancer cases are caused by tobacco



LUNG CANCER IS THE NUMBER ONE CAUSE OF CANCER DEATH IN GREATER MANCHESTER



TAKING A READING: MANCHESTER CITY

- 22.7% of adults smoke – England average is 16.9%
- Here, smoking costs society an estimated **£144.7m** per year
- The correlation between deprivation and smoking prevalence is well known. Manchester is ranked the 5th most deprived local authority in England.

Tackle smoking = address health inequalities

- Roughly 13,942 people would not be below the poverty line if the cost of smoking were returned to the household – includes 5,182 dependent children

Manchester has the highest smoking rates, and lung cancer incidence in Greater Manchester and the **worst smoking-related deaths in England**



Smoking rates¹

The percentage of people smoking in Manchester LA (22.7%) is higher than the England average (16.9%).

Smoking causes nearly a fifth (19%) of all cancer cases in the UK.



Smoking related deaths⁷

The rate of deaths caused by smoking is higher in Manchester LA (458.1 per 100,000) compared to the England average (274.8 per 100,000).

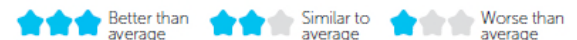
More than a quarter (27%) of cancer deaths in the UK are caused by smoking. In addition to smoking causing cancer, smokers are also at higher risk of having a heart attack or stroke.

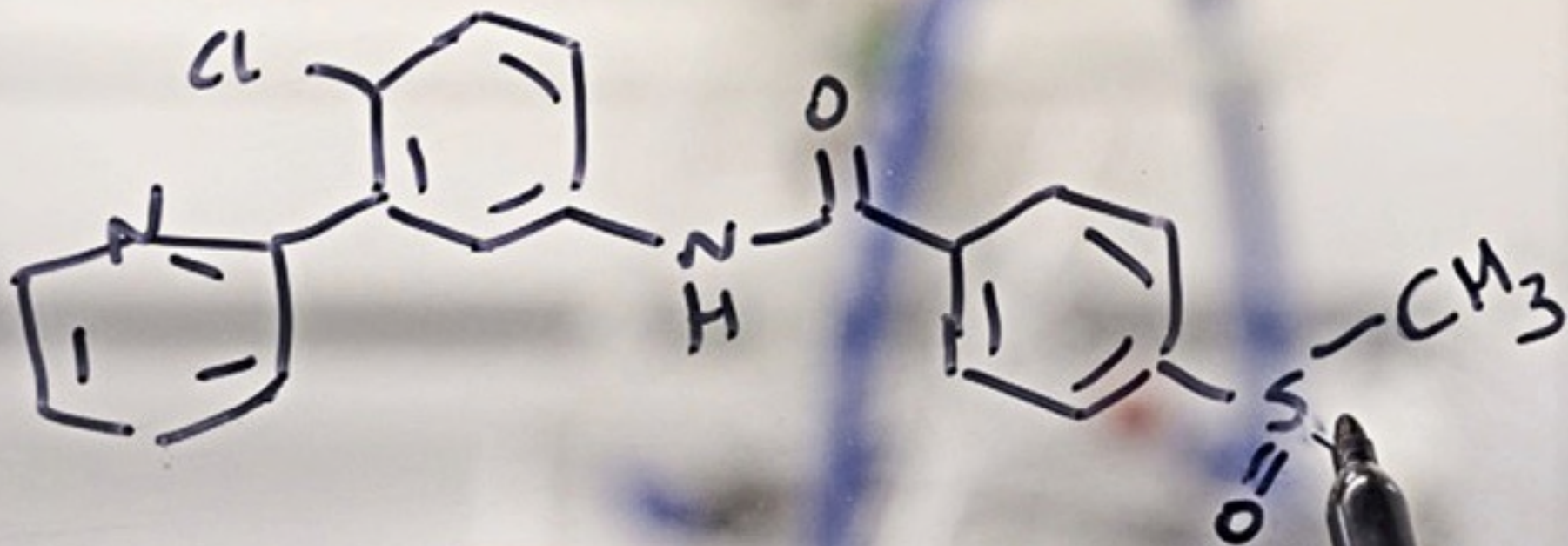


Lung cancer incidence⁸

The incidence rate of lung cancer in Manchester LA (152.7 per 100,000) is higher than the England average (79.4 per 100,000). Around 390 new lung cancer cases are diagnosed per year in Manchester LA.

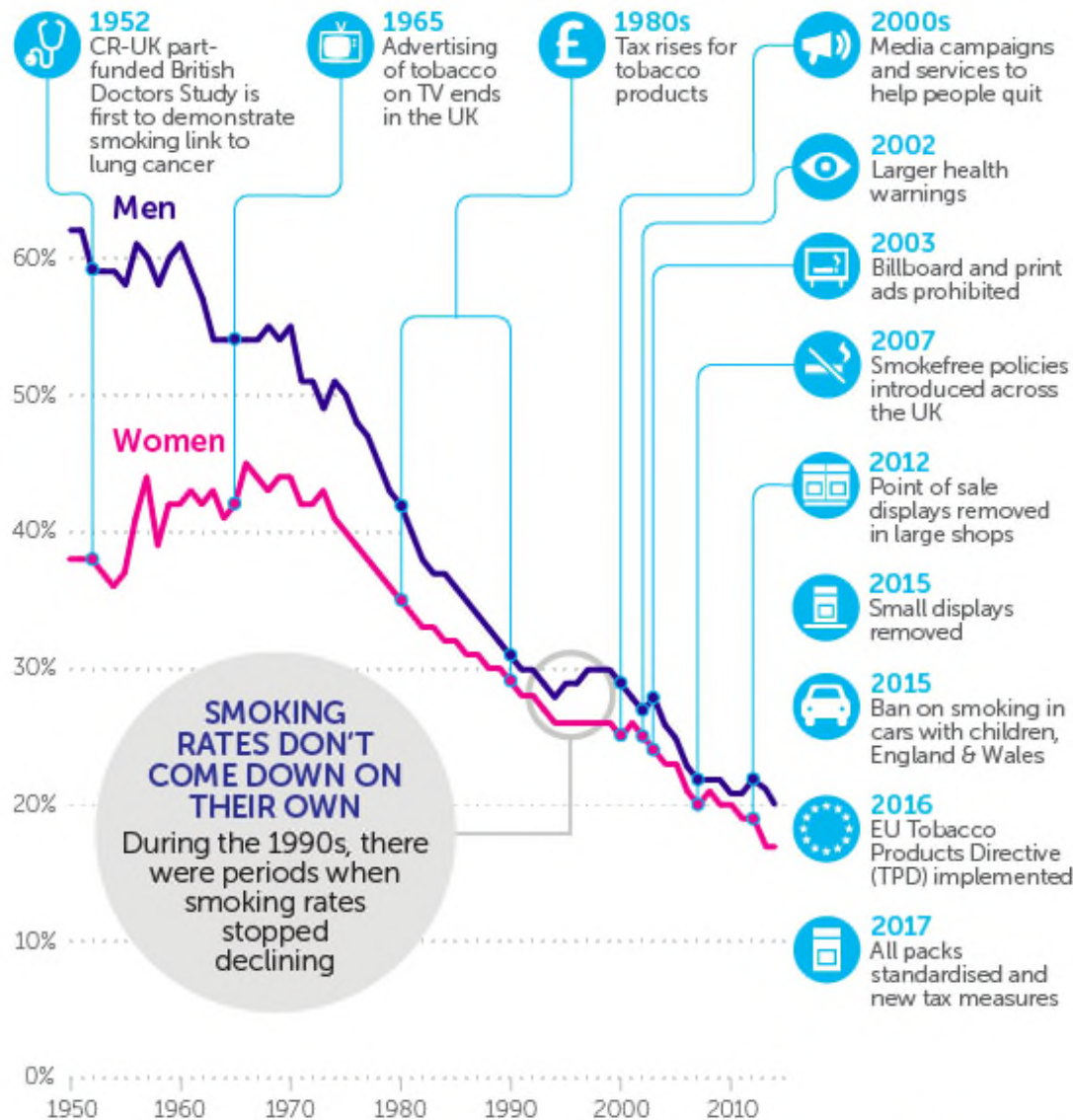
More than 8 in 10 lung cancer cases in the UK are caused by tobacco.





**SO WHAT CAN BE
DONE?**

SMOKING RATES DECLINE WITH ACTION



Source: Adult Smoking Habits in Great Britain. Opinions and Lifestyle Survey, ONS

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cruk.org



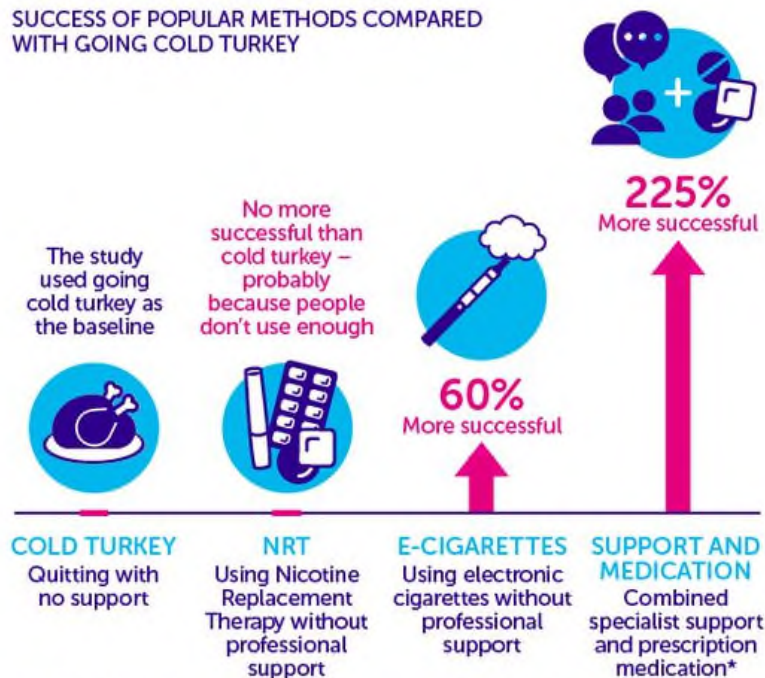
A photograph of a woman holding a baby while a healthcare professional examines the baby's head. The scene is set in a clinical or hospital environment. The image is overlaid with a blue geometric pattern and a semi-transparent blue band containing the text.

**FIVE YEAR
FORWARD VIEW**

IT PAYS TO QUIT...

WHAT'S THE MOST SUCCESSFUL WAY TO STOP SMOKING?

SUCCESS OF POPULAR METHODS COMPARED WITH GOING COLD TURKEY



*Available free from your local Stop Smoking Service [nhs.uk/smokefree](https://www.nhs.uk/smokefree)

Giving up smoking is the best thing a person can do for their health.

Comprehensive tobacco control is the best thing a local authority can do for public health

- Smokers need the specialist support to quit via local Stop Smoking Services
- Smokers are around three times more likely to quit with specialist support & medication
- Services are encouraged to be e-cigarette friendly
- “Start stopping and stop starting”



**WHAT WE'RE
DOING**

WORKING LOCALLY...

- Funding life-saving research locally
- Building relationships with local authorities to ensure prevention remains a priority
- Working in partnership with Public Health England and Healthier Futures
- Joining the Greater Manchester Third Sector Advisory Group to the GM Cancer Board
- Other groups: including local tobacco control alliances
- Providing practical support for GPs, CCGs and primary care professionals across GM
- Raising public awareness via the Cancer Awareness Roadshow





WHAT CAN YOU DO?

Embed prevention in locality planning

Tobacco control strategy and action plans

Invest in Stop Smoking Services

Quit promotion & campaigns

Health and Wellbeing strategy

Tackle the illicit trade & health inequalities

**A ROBUST TOBACCO CONTROL PLAN FOR MANCHESTER:
BUILDING POLITICAL WILL**

**NHS
Statement of Support for Tobacco Control**

Smokefree site: policy into practice

**WHO
Framework Convention on Tobacco Control**

Local Government Declaration on Tobacco Control

Tobacco Control Alliance

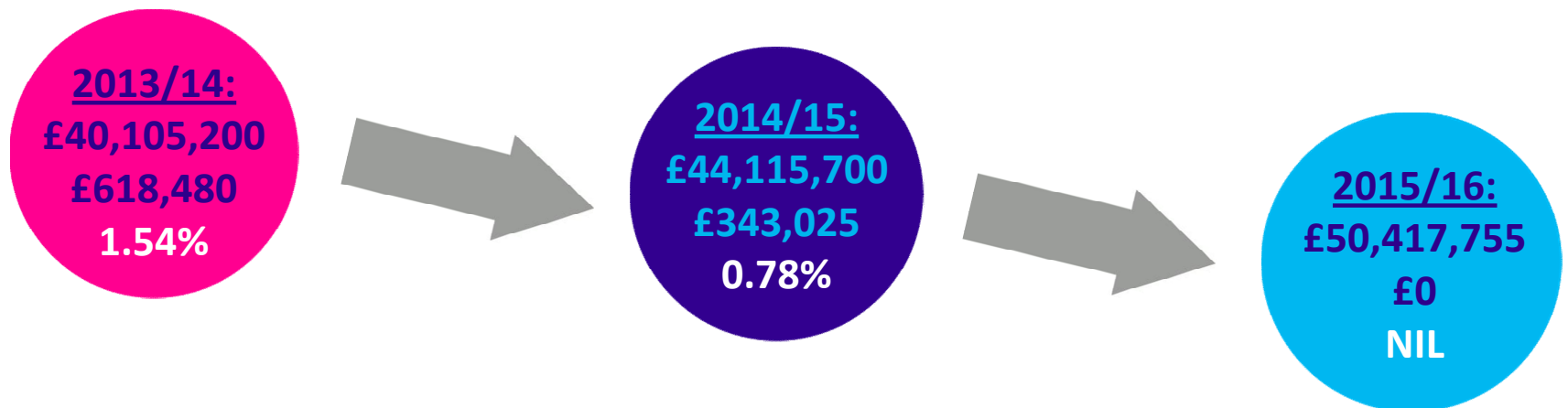
WHAT MORE CAN BE DONE...

Each year in Manchester, smoking costs society an estimated £144.7 million / £1,381 per smoker p/a



- Cost of smoking breaks = £62.3m p/a
- Smoking-related sick days = £13m p/a
- Cost to NHS in Manchester = £22.3m p/a

- increase investment in tobacco control
- recommission a specialist Stop Smoking Service
- inspire quits and drive footfall through promotion



**SKIN
CANCER**



SKIN CANCER PREVENTION PLEDGE

1. Action to prevent unintended sun exposure in the community
2. Regular audits and inspections of sunbed businesses
3. Innovative measures to reducing tanning behaviour
4. Increase public understanding of the risks of excessive UV exposure

LOCAL GOVERNMENT PLEDGE ON SKIN CANCER PREVENTION

Manchester City Council acknowledge that:

- Skin cancer can be deadly and can be a significant burden for our communities
- The vast majority of skin cancers are preventable and are primarily caused by over-exposure to ultraviolet (UV) radiation from the sun and sunbeds
- Sunbeds are a cause of skin cancer
- Excessive sun exposure can be harmful in the UK as well as abroad
- Reducing the number of skin cancer cases will save money for the NHS

As local leaders in public health we welcome the:

- Opportunity for local government to take action to reduce the number of skin cancer cases in their communities by tackling excessive exposure to UV radiation
- Endorsement of this pledge from the British Association of Dermatologists and Royal Society for Public Health

We commit our council from this date to:

- Act at the local level to prevent more skin cancer cases by helping more people be safe in the sun and to avoid sunbeds
- Work with our local NHS, communities, other Local Authorities and Public Health England to deliver action locally and support action on skin cancer regionally
- Work with our partners, communities, other authorities and Public Health England to support action on skin cancer regionally
- Reduce the health inequalities in our communities that are associated with UV exposure
- Work with businesses to prevent under-18s using sunbeds and inform all adults of the risks of sunbed use
- Support national action to prevent skin cancer



Sir Richard Leese
Leader of the Council

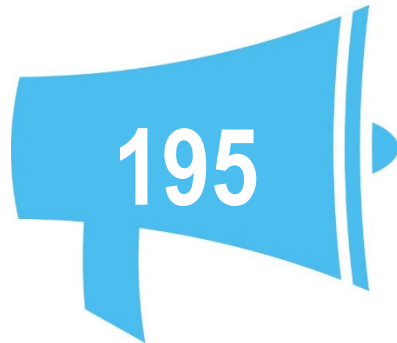
Councillor Paul Andrews
Executive Member for
Adults Health & Wellbeing

David Regan
Director of Public Health

The Local Government Pledge on Skin Cancer Prevention was developed by Cancer Research UK and endorsed by the British Association of Dermatologists and Royal Society for Public Health. For more information please contact Cancer Research UK at: localengagement@caner.org.uk

DON'T QUIT ON US...

Help us send a clear message to the Chancellor to put
Public Health Funding on a sustainable footing



Councillors
have added
their support



Representing this
many Councils

www.cruk.org/dontquionus

**ANY
QUESTIONS?**



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