



Ein cyf/Our ref: VG/0036/19

Nick Ramsey AM
National Assembly for Wales
Cardiff
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12 November 2019

Dear Nick,

Thank you for raising the issue of ovarian cancer diagnosis with the Minister for Finance and Trefnydd and with me directly during plenary on 23 October. I was sorry to hear about the experience of your constituent and understand how difficult a time this must be for the family and for anyone effected by such a diagnosis.

The Welsh Government is fully committed to doing all that it can to improve cancer outcomes and we recognise that there are some cancer types that have much poorer survival outcomes. This results mainly from the advanced stage at which some cancers tend to present. Nonetheless, I am pleased to report that the latest one and five year survival figures show that cancer of the ovary made the largest gains in both one and five year survival (8 percentage points and 7 percentage points respectively) between 2007-11 and 2012-16. The European age-standardised mortality rate for ovarian cancer has also fallen to 13 per 100,000 people. In the most recent Cancer Patient Experience Survey, 95% of people with a gynaecological cancer rated their care positively, and this was higher than the survey average of 93%. Although we are making progress in improving people's outcomes, we are not complacent and will continue to take forward the approach set out in the Cancer Delivery Plan for Wales.

We recognise that it is enormously challenging for GPs to differentiate between the underlying causes of common and non-specific symptoms. Nonetheless, we are taking action through our national approach to cancer services and also have an important partnership with Macmillan Cancer Support that funds GP and nurse time in primary care to work with their peers on the referral and management of cancer. We have also seen significant increases in referrals for suspected cancer, in the order of 43,000 additional referrals a year compared to five years ago. This shows that GPs are referring more people and at a lower level of risk, in accordance with national guidance, in order to detect more cancers at earlier stages. We also have two health board-wide rapid diagnostic centres in place for vague symptoms. These have completed their two-year pilots and the evaluation reports are due imminently. Finally, we have introduced the UK's first single cancer pathway which will help to speed up people's diagnosis and treatment.

More than 90% of people referred with suspected cancer will not have the disease, but those that do have a confirmed diagnosis will receive rapid access to expert care delivered

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

in line with national standards. The Wales Cancer Network delivers a programme of peer review to support services to deliver high quality care. The most recent round of review for gynaecological cancers took place in 2018 and all units have to develop actions plans to respond. As part of the single cancer pathway we are standardising and optimising each of the cancer type pathways against guidance. We also have important work underway to ensure cancer pathways deliver person-centred cancer care and we are planning to conduct a third cancer patient experience survey next year.

I recognise the value that clinical trials can have in supporting cancer treatment and care in Wales. The Welsh Government, through Health and Care Research Wales, provides infrastructure to support and increase high-quality research. This includes funding of approximately £15 million to NHS organisations, including Velindre University NHS Trust to enable them to undertake clinical trials and other high quality research studies into cancer. This funding is complemented by a research infrastructure investment that supports the design, development and conduct of clinical trials for novel cancer treatments and includes the Wales Cancer Research Centre, Wales Gene Park and the Cardiff Experimental Cancer Medicine Centre. We also have a Cancer Research Strategy in development.

Currently in Wales, there are a number of interventional studies specifically established to assess the efficacy of drug treatments in various stages of disease. This includes research identifying biomarkers for ovarian cancer for the early detection and treatment of the disease. Additionally, in terms of the challenge associated with early diagnosis of ovarian cancer, Wales is a site in the Aldo study (Avoiding Late Diagnosis in Ovarian cancer), a clinical genetics study supported by University College London Hospitals NHS Foundation Trust and the UCLH Cancer Collaborative, focused on improving the care pathway for women with specific genetic mutations who could be at high risk of developing ovarian cancer.

Further information of the studies currently underway in Wales are available via the Health and Care Research Wales Directory which can be accessed at:

<https://www.healthandcareresearch.gov.wales/research-studies-in-wales/>

I hope this information is helpful.

Yours sincerely,

A handwritten signature in black ink that reads "Vaughan Gething". The signature is written in a cursive, slightly slanted style.

Vaughan Gething AC/AM

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services