Impact of the Covid-19 pandemic on the diagnosis & treatment of prostate cancer: Updated findings from the NPCA

Commissioned by HQIP on behalf of NHS England and Welsh Government

Based at the Clinical Effectiveness Unit,

Royal College of Surgeons / London School of Hygiene & Tropical Medicine

Clinical leadership provided by BAUS and BUG

Data partners: National Cancer Registry and Analysis Service, Wales Cancer Network













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Original Article



Impact of the COVID-19 pandemic on the diagnosis and treatment of men with prostate cancer

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NPCA Annual Report 2022: Impact of COVID-19 analysis

New for the 2022 report:

- 1. COVID impact reporting for Wales Using data up to end March 2021
- 2. Update: COVID impact reporting for England Using data up to end December 2021



Aim of NPCA Impact of COVID-19 analysis

Evaluate the impact on the **diagnosis** and **treatment** of men with prostate cancer

- 1. What is the extent of the prostate cancer **diagnostic** backlog in England and Wales?
- 2. To what extent have **surgery** and **radiotherapy** services been disrupted in England and Wales?
- 3. Was access to **systemic therapies** disrupted and has the type of therapy changed since the COVID-19 pandemic in England?



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Methods for NPCA Impact of COVID-19 analysis

Diagnostic and treatment activity in 2020 and 2021 was determined across all NHS hospital providers of PCa care in England and Wales

• compared with the same calendar periods in 2019

For England

• Using RCRD up to end **December 2021**

For Wales

• Using standard data up to end March 2021

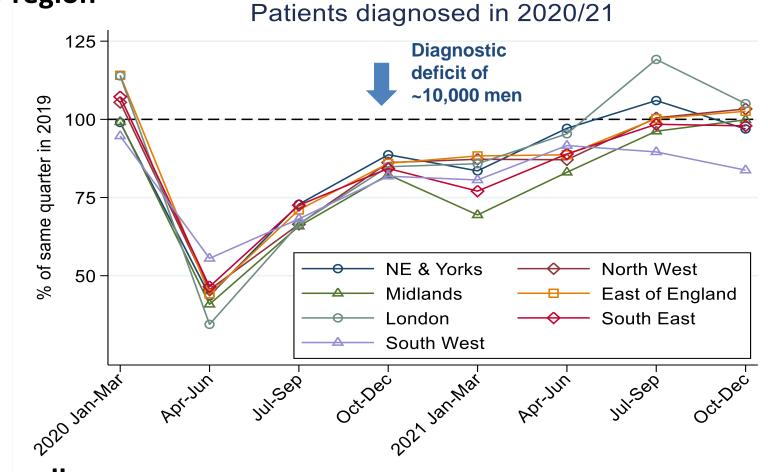


Key Findings COVID impact in England (data 1 January 2019 - 31 December 2021) Some evidence of recovery in 2021



COVID impact in England: Variation in <u>diagnoses</u>

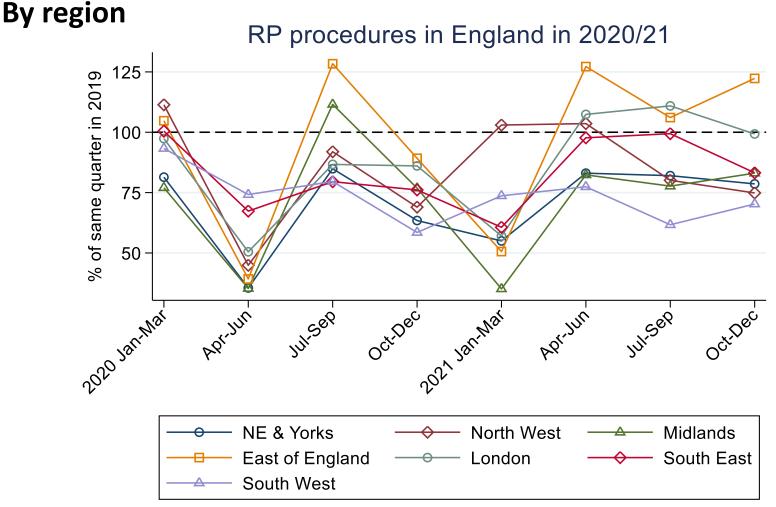




Overall

• 7% below 2019 figures (24% below in 2020)

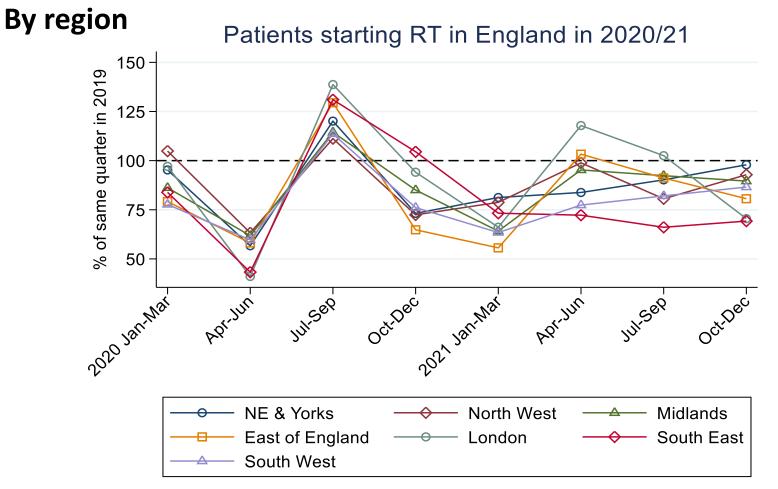
COVID impact in England: Change in <u>RPs</u>



Overall

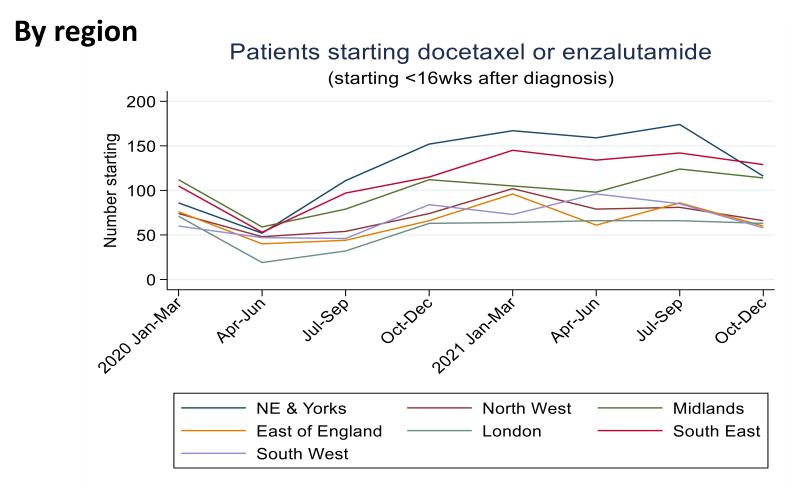
18% below 2019 figures (22% below in 2020)

COVID impact in England: Change in <u>RT</u>



- 18% below 2019 figures (13% below in 2020)
- Maintained increased use of hypofractionation

COVID impact in England: Change systemic therapy

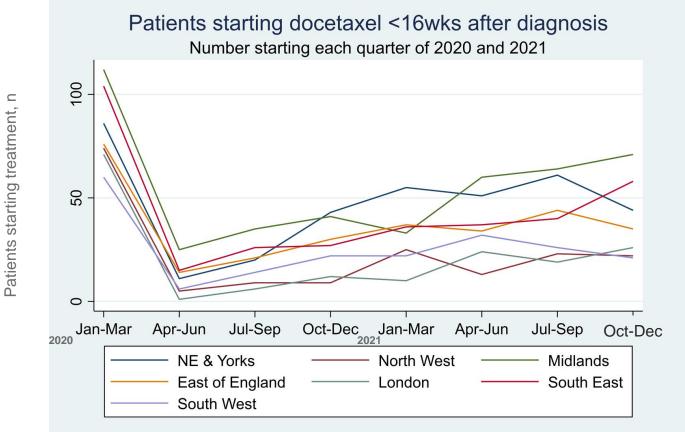


Overall

• **40% above 2019 figures** (data available for England only)

COVID impact in England: Change in docetaxel

By region

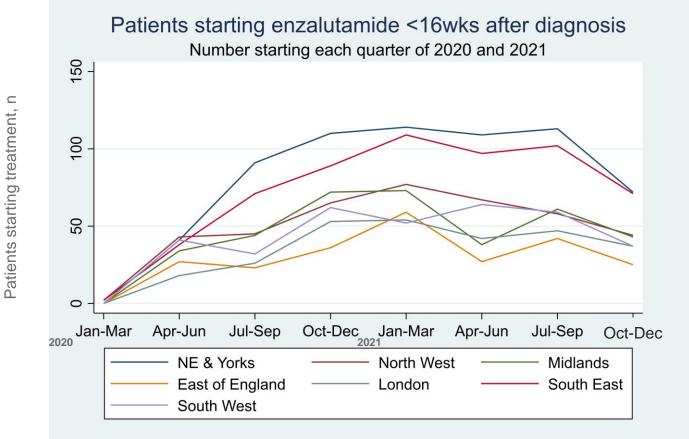


• Docetaxel use did not return to pre-pandemic levels



COVID impact in England: Change in enzalutamide

By region





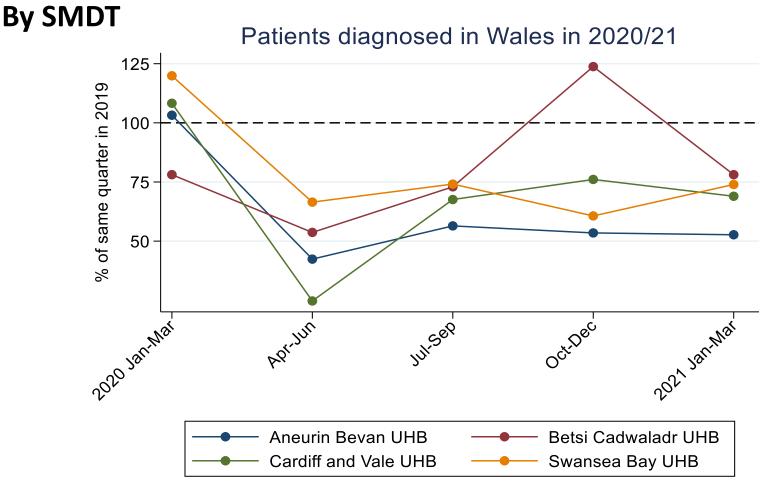
Key Findings

COVID impact in <u>Wales</u> (data 1 January 2019 - 31 March 2021)

Similar to patterns seen in England in 2020

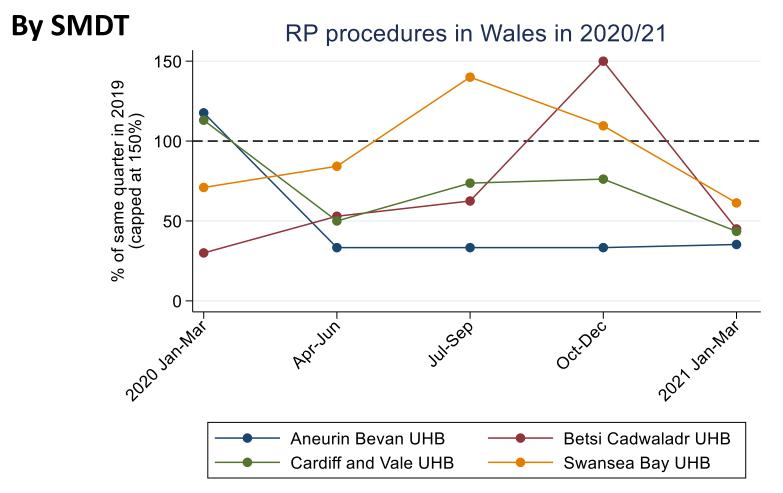


COVID impact in Wales: variation in <u>diagnoses</u>



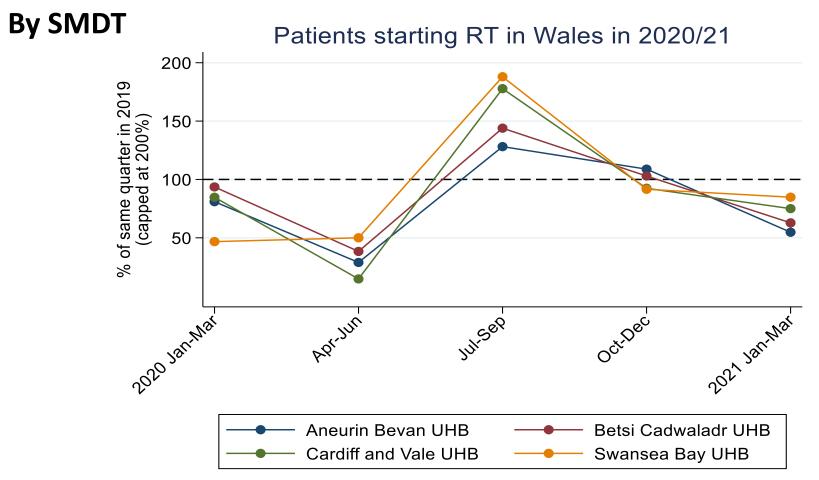
- Reached **52% reduction** in April-June 2020
- **29% reduction** by January-March 2021

COVID impact in Wales: change in <u>RPs</u>



- 43% reduction at April-June 2020; 4% in Oct-Dec 2020
- 52% reduction by January-March 2021

COVID impact in Wales: change in <u>RT</u>



- 67% reduction in April-June 2020; recovery in Q3/4 2020
- 28% reduction by Jan-Mar 2021

Summary

- Evidence of **disruption** during the pandemic but also **recovery** particularly for diagnostic pathways
- Number of treatments still lags behind 2019 numbers but will reflect **fewer diagnoses**
- Variation across regions and SMDTs apparent
- Availability of enzalutamide ensured proportion receiving adjunct treatments to ADT has increased



THANK YOU



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