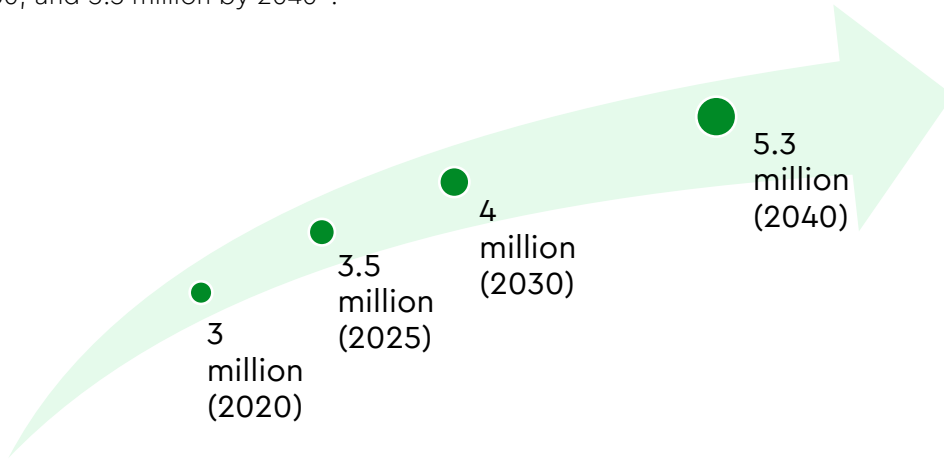# Statistics fact sheet

MACMILLAN CANCER SUPPORT

Last updated: October 2022.

Prevalence

The number of people living with cancer.

We estimate that there are currently **3 million people living** with cancer in the UK, rising to 3.5 million by 2025, 4 million by 2030, and 5.3 million by 2040 [i].

5.3 million (2040)

4 million (2030)

3.5 million (2025)

3 million (2020)

For more information, please visit **Calculating cancer prevalence**.

Incidence

New cases of cancer diagnosed each year.

In 2019, around **391,000 people** were diagnosed with cancer, in the UK.
On average someone is diagnosed with cancer every **90 seconds**, in the UK.

Nation	Every year	Every month	Every week	Every day
England	327,200	27,300	6,300	900
Scotland	33,200	2,760	640	90
Wales	20,100	1,670	390	60
Northern Ireland	10,200	850	200	30
UK	**391,000**	**32,500**	**7,500**	**1,100**

Cancer incidence in the UK has risen by **39%** since 2002, and by **19%** only in the last decade [ii].
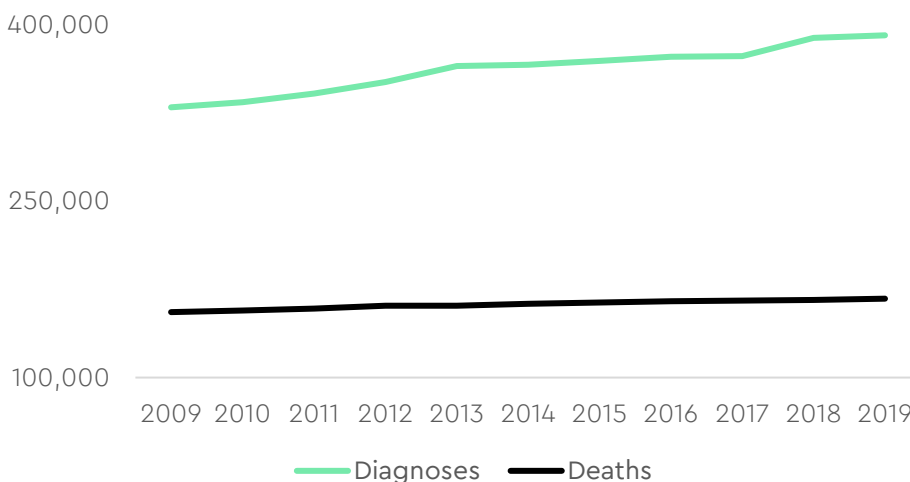This is likely due to the growing and aging population who are at higher risk of developing cancer, as well as improvements in diagnosis initiatives and public awareness.

Mortality

People dying from cancer.

In 2019, around **167,000 people** died from cancer in the UK, an average of **460 people** every day.
However, in comparison to incidence, the number of deaths from cancer in the UK have reported a less dramatic increase, rising by **7%** over 10 years.

400,000

250,000

100,000

2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019

—— Diagnoses   —— Deaths

Additionally, age-standardised rates of cancer mortality per 100,000 people have decreased by **more than 8%**, on average across UK nations, over the past 10 years [iii].

Diagnosis and treatment

Cancer waiting times and the backlog.

For many years, published figures on the number of people waiting for a diagnosis or treatment for cancer have shown the huge challenge facing NHS cancer services, with tens of thousands of people waiting for too long for diagnosis or vital treatment, especially since the start of the pandemic of COVID-19, across the UK.

Macmillan has estimated that as of December 2021 there were **more than 43,000** people 'missing' a cancer diagnosis [iv], as a result of the disruption caused by the COVID-19 pandemic. As of March 2022, two years on from the start of the pandemic, the number of people starting treatment for cancer in the UK was still **at least 37,000** lower than expected [v].

Our estimates of the impact of COVID-19 on cancer diagnoses and treatments are regularly updated and included in Macmillan's **press releases and statements**.

For further information on NHS England's Cancer Waiting Times, including an explanation of how they are measured and their performance, please read Macmillan's **Think. Improve. Change.** blog post. Other data is also available from **NHS England**. Correspondent datasets on cancer waiting times are published by **Public Health Scotland**, **GOV.WALES** and the **Department of Health** in Northern Ireland.

Survival

Following cancer and its treatment.

Based on the latest data for median cancer survival in the UK, average survival is now estimated to be **over 10 years** from diagnosis [vi]. This is up from the median survival time of one year in the 1970s and six years in 2007 [vii].

However, as outlined in the latest statistics from Public Health England, there are some noticeable differences in age-standardised net survival rates between different cancer types, with melanoma of the skin recording the highest 1-year (98%) and 5-year (95%) age-standardised net survival rates, while pancreatic cancer recording the lowest 1-year (27%) and mesothelioma the lowest 5-year (7%) survival among persons in England [viii].

Macmillan's **Think. Improve. Change.** blog outlines further information on UK-wide cancer survival, particularly for its relatively poor performance on survival for several cancer types, including bowel, lung and pancreatic, in international comparisons, according to one of the latest **SURVMARK-2** studies.

While it is clearly good news that more people are surviving cancer, progress can be a double-edged sword. '**Throwing Light on the Consequences of Cancer and its Treatment**' (and the accompanying lay summary report '**Cured – But at What Cost?**') reveals another vital aspect of the changing cancer story. We estimate around **one in four** (25%) people with cancer are living with the long-term consequences of cancer or its treatment [ix].

Times of need

The cancer journey

Macmillan has identified stages along people's cancer journey when experiences are commonly shared, with five key moments (**diagnosis**, **treatment**, **recovery**, **living with treatable but not curable cancer** and **end of life**) where there is a particularly high level of unmet need.
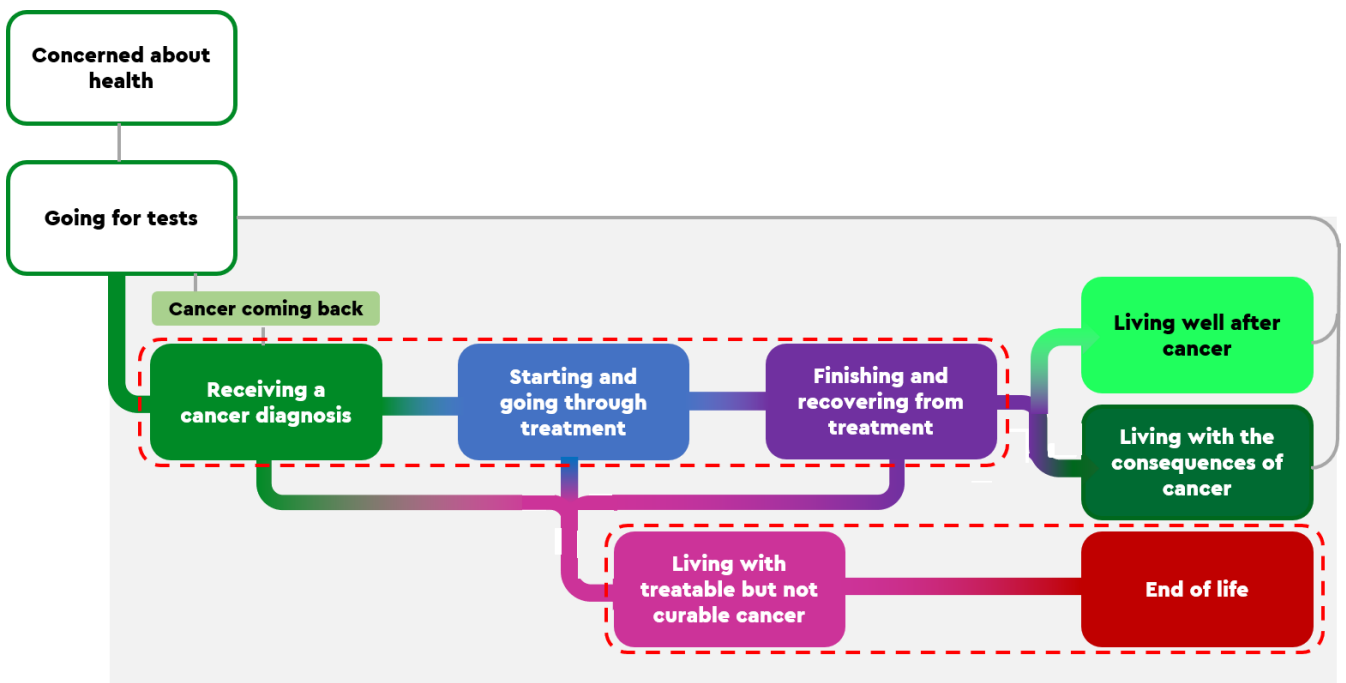
Experience

Holistic Needs Assessment (HNA)

The **Holistic Needs Assessment** (HNA or eHNA, in its electronic format) is a questionnaire to identify the concerns of people living with cancer at any stage of the cancer pathway, to facilitate a conversation about their needs and to develop a Personalised Care and Support Plan, through their cancer journey.

In 2021, **44,000** electronic holistic needs assessments were carried out through Macmillan's platform, which helped identify tens of thousands of concerns from people living with cancer. This was a 16% increase on 2020 [x].

Cancer Patient Experience Survey (CPES)

The Cancer Patient Experience Survey (CPES) is a survey to understand the experiences of people living with cancer, run by NHS England, and by Macmillan jointly with the Welsh government and Welsh Cancer network, Scottish government and the Public Health Agency, and Health and Social Care Board in Northern Ireland.

The most recent national surveys reported mostly positive results (on a scale of 0-10, where 10 is 'very good') with key areas for improvement:

- In **England**, although respondents to the most recent survey (2021) gave an average rating of 8.92 for overall care, only 71.7% of them said they were able to have a discussion about their needs or concerns prior to treatment.
- In **Northern Ireland**, on average respondents rated their overall care as 9 out of 10, in 2018.
- In **Scotland**, also in 2018, 95% of respondents to the survey said their care was positive overall, rating it 7 or more, with an area of improvement identified in the provision of emotional or psychological support by healthcare professionals during their treatment, due to 45% of respondents saying they didn't receive this.
- In **Wales**, 93% of more than 6,700 people living with cancer who took part in the 2016 survey, selected 7 or more out of 10 when rating their care, with 89% of people saying they were treated with dignity and respect.

Unfortunately, in terms of variation in experience, analyses of CPES England highlighted the following:

- For **socio-economic variation**, people from socio-economically deprived areas in England report a worse experience of their cancer care than people from the least deprived areas, with patients in the 20% least deprived areas reporting the highest score for overall care (8.93 out of 10), against patients in the 20% most deprived areas the lowest score (8.87 out of 10).
- In terms of **ethnic variation**, CPES responses in England have consistently shown, since their first publication in 2010, that people from minority ethnic groups overall report a poorer experience of cancer services than White British people. In 2021, White patients gave a score of 8.94 out of 10 for overall experience of care, in comparison with scores of 8.71 (Mixed), 8.55 (Black), 8.54 (Asian) and 8.59 (Other ethnic groups), within the survey.

For a summary of the results from the latest CPES publications from each nation, please visit the dedicated **Cancer Patient Experience Survey** on Macmillan's website.

Cancer Quality of Life Survey

Conducted by NHS England and NHS Digital, the **Cancer Quality of Life Survey** is a national survey composed of two questionnaires, focused on general health and quality of life, completed by people with cancer around 18 months after their diagnosis and, for comparison, the general population, in England.

The most recently published results from the Cancer Quality of Life Survey, including questionnaire responses received up to 31st July 2022, highlighted a lowest score for its respondents with cancer on overall health (74.3 out of 100), in comparison to that of the general population (81.8 out of 100), with respondents with cancer reporting the lowest average score in the quality of life functional categories of work or leisure (74.7 out of 100) activities. Furthermore, the latest analysis of the survey indicated difficulty sleeping (26.5%) as one of the symptom experienced by respondents with cancer which may benefit from further investigation, for its impact on quality of life.

Services

The reach and impact of Macmillan's services.

We estimate that nearly **2.4 million people** were reached by Macmillan's services, in 2021:

- **811,000 people** received 'Person to Person' support from our Macmillan Professionals or services.
- **103,000 people** were supported by the Macmillan Support Line by email, phone or webchat.
- **Over 3,000 people living with cancer** were supported by **678 Macmillan Buddies**.
- **£84.6 millions of financial gains** for people living with cancer were identified through Macmillan's services.

For more information see our latest **Annual Report and Accounts**.

References

References.

i.   Analysis based on time-limited cancer prevalence published for each nation in the UK. The relationship to complete cancer prevalence is derived from 2013 complete prevalence (Macmillan-NCRAS Cancer Prevalence Project). This is projected forwards using the UK growth rates in Maddams et al. (2012). This includes all people who have ever had a cancer diagnosis, some people in this group may no longer consider themselves to be living with cancer. See also Calculating Cancer Prevalence.
Note that the diameter and distance of the circles in the presented diagram are approximative representations of these data for complete cancer prevalence.

ii.   Based on aggregated UK-wide figures are for 2002 and 2019, the earliest and latest year for which cancer incidence data is available for all countries in the UK. Figures include all malignant neoplasms excluding non-melanoma skin cancer (NMSC) (ICD-10 codes C00-97 excl. C44. Scotland does not use C97):
Cancer Registration and Analysis Service, NHS Digital (NHSD),
Public Health Scotland
Welsh Cancer Intelligence and Surveillance Unit (WCISU)
N.Ireland Cancer Registry, Queen's University Belfast.

iii. Based on aggregated UK-wide figures and average of age-standardised rates are for 2009 and 2019, the earliest and latest year for which cancer mortality data is available for all countries in the UK. Figures include all malignant neoplasms excluding non-melanoma skin cancer (NMSC) (ICD-10 codes C00-97 excl. C44. Scotland does not use C97):
Cancer Registration and Analysis Service, NHS Digital (NHSD)
Public Health Scotland
Welsh Cancer Intelligence and Surveillance Unit (WCISU)
N.Ireland Cancer Registry, Queen's University Belfast.

iv.   The diagnosis-missing population is calculated by Macmillan Cancer Support independently for each nation utilising diagnostic activity indicators from different datasets:
New cancer diagnoses ("Rapid Cancer Registration Dataset", England)
Patients with pathological confirmation of cancer ("Cancer Pathology dashboard", Scotland)
("Patients with Pathology Samples Indicating Cancer report", Northern Ireland)
First definitive cancer treatments at one month lag ("Cancer Waiting Times", Wales).

v.   The drop in first cancer treatments in England between March 2020 and March 2022 has been estimated by calculating the difference between the reported number of first cancer treatments (NHS England, 2022) across the above period and that calculated using the 2019 average.

vi.   Macmillan Cancer Support (2011). Living after diagnosis median cancer survival times.
http://www.macmillan.org.uk/Documents/AboutUs/Newsroom/LivingAfterCancerMedianCancerSurvivalTimes.pdf

vii. Quaresma M, Coleman MP, Rachet B. 40-year trends in an index of survival for all cancers combined and survival adjusted for age and sex for each cancer in England and Wales, 1971-2011: a population-based study. Lancet. 2015 Mar 28;385(9974):1206-18. doi: 10.1016/S0140-6736(14)61396-9. Epub 2014 Dec 3. Available at:
https://www.ncbi.nlm.nih.gov/pubmed/25479696

viii. NHS Digital. Cancer Survival in England, cancers diagnosed 2015 to 2019, followed up to 2020.
https://digital.nhs.uk/data-and-information/publications/statistical/cancer-survival-in-england/cancers-diagnosed-2015-to-2019-followed-up-to-2020

ix.   Macmillan Cancer Support (2013). Throwing light on the consequences of cancer and its treatment.
https://www.macmillan.org.uk/documents/aboutus/research/researchandevaluationreports/throwinglightontheconsequencesofcanceranditstreatment.pdf

x.   Macmillan Cancer Support. Annual Report and Accounts 2021.
https://www.macmillan.org.uk/dfsmedia/1a6f23537f7f4519bb0cf14c45b2a629/8478-10061/Annual%20Report%20and%20Accounts%202021