

## Abstract

Cancer registry data have long been used for surveillance and research purposes, but they are increasingly being used in reports that speak to the effectiveness of the cancer control system, from prevention to palliation.

The incorporation of these data into public and policy reports is becoming an expectation of many cancer registries.

## Objectives



The new Manitoba Cancer System Performance Report:

- Uses cancer registry and other data to report a wide range of indicators.
- Has an engaging easy-to-read format.
- Contains reliable data that are already published, or are routinely cited, and adds new data where there are gaps.
- Uses indicator definitions that are used by at least one other partner (provincial or national).
- Shows trends or benchmarks to provide an indication of whether we are improving in a particular cancer-related area.

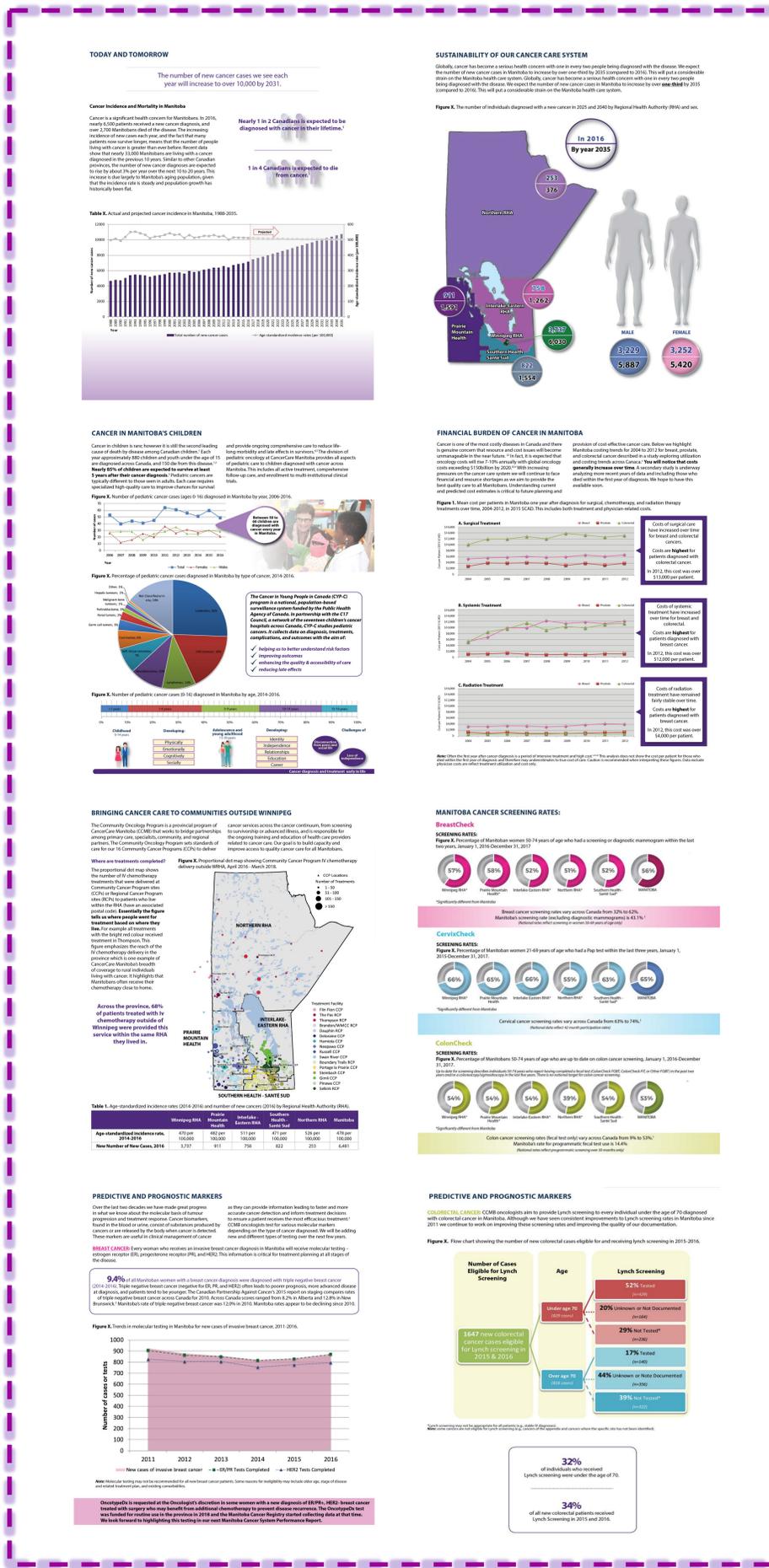
Where we present information on time-trends arrows summarize the patterns, for example:

- Increases of 10% or more, little change, or a drop of 10% or more.
- Colour shows whether the trend is good (green), neutral (yellow) or needs to improve (red).

## Methods

CancerCare Manitoba is the provincial cancer agency in Manitoba (Canada), responsible for the delivery of cancer services, research and education for the population.

The new System Performance Report uses standard cancer surveillance measures integrated with measures from other sources and clinical- and policy-relevant text to tell the story of the cancer experience in Manitoba.



## Results

Cancer registry data are featured in metrics of the impact of cancer using traditional surveillance statistics (incidence, mortality, survival, projections).

Incorporating stage and treatment data allows for the production of measures of treatment rates, concordance with clinical practice guidelines, the prevalence of biomarkers and other cancer control 'success' indicators. Variability is shown over time, by region and by population characteristics.

### KEY FINDINGS

Important themes we have identified while developing the 2019 Manitoba Cancer System Performance Report:

**THE ANNUAL NUMBER OF NEW CANCER CASES CONTINUES TO GROW.** In 2016, 6,481 Manitobans were diagnosed with cancer which is a 25% increase since 1996. The next 20 years appear to change more drastically with the number of new cancer cases reaching nearly 11,000 by 2035 (a 65% increase from 2016). Across Canada, 1 in 2 individuals is expected to be diagnosed with cancer in their lifetime. We know prevention of cancer is important to protect Manitobans from cancer risk factors. We are focusing efforts to improve our prevention services with the aim of decreasing the number of Manitobans that ever have to face a cancer diagnosis.

**THE FINANCIAL BURDEN OF CANCER ON THE HEALTHCARE SYSTEM CONTINUES TO RISE.** Cancer is one of the most costly diseases in Canada and these oncology costs are expected to rise by 7-10% every year.

**FINDING CANCER EARLY CAN MEAN MORE EFFECTIVE TREATMENT AND POSITIVE OUTCOMES.** Across Manitoba, cancers of the lung and bronchus are most often diagnosed at late stage (stage IV) with little variation between regions. For other cancers we see more individuals being diagnosed with late stage colorectal cancer in the Northern Regional Health Authority (RHA) and late-stage prostate cancer in Prairie Mountain Health.

**WAIT TIMES ARE IMPROVING.** Data shows that median wait times decreased between 2016 and 2017 across many system wait time measures including those during screening (breast screening wait times), diagnostic imaging (for prostate, lymphoma, and colon & rectum), pathology (for prostate, lymphoma, and colon & rectum), referrals to CancerCare Manitoba (for gastrointestinal), and chemotherapy (for lymphoma and all cancers overall).

**TREATMENTS FOR CANCER HAVE BECOME MORE COMPLEX.** Surgery is the most common treatment modality - with over 50% of patients receiving a surgical treatment within one year of diagnosis (compared to systemic therapy at 39% and radiation therapy at 28%). Advancements in eligibility for blood and marrow transplants and identification of cancer biomarkers have increased the complexity of patient care.

**OUTCOMES ARE IMPROVING.** Each year cancer kills over 2,700 Manitobans, however mortality rates continue to decrease year over year. This means that Manitobans diagnosed with cancer are more likely to survive the disease than ever before. One-year and five-year relative survival is higher in Manitoba for colorectal and lung cancer than the national estimate, or the estimates seen in several other countries.

**MORE PEOPLE ARE LIVING WITH CANCER.** Across Manitoba nearly 33,000 people are alive who were diagnosed with cancer in the past 10 years. This number will continue to increase into the future as the number of cancer cases continue to increase but people live longer with the disease and after treatments.

**EMOTIONAL SUPPORT.** We have heard our patients' needs for emotional support during their experience with cancer. We continue to work towards new and innovative ways to improve our emotional support services. Although the 2016 Ambulatory Oncology Patient Satisfaction Survey (AOPSS) highlighted an urgent need for further targeted improvements, we were happy to see our efforts are paying off with satisfaction scores increasing slowly, but consistently over time. We look forward to evaluating the 2019 AOPSS results to see if we have made further progress.

**REGIONAL VARIATION IN THE CANCER EXPERIENCE.** We know that Manitobans from different corners of our province have different experiences with cancer. Regional comparisons show that more individuals in the Northern RHA are diagnosed with late-stage colorectal cancer and more individuals in Prairie Mountain Health are diagnosed with late-stage prostate cancer than any other region. We also recognize that mortality rates are significantly higher in the Northern RHA than the Manitoban estimates. These examples highlight the challenges we continue to face in equitably serving our remote and underserved populations.

## Conclusions

The availability of population-wide data is an asset that is increasingly being used to monitor and report on the success of cancer services. This raises the profile of the cancer registry and increases demands for comprehensive and timely data.

## Acknowledgements

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