

LUNG CANCER UK PRICE TAG ECLIPSES THE COST OF ANY OTHER CANCER

THE COST of lung cancer to the UK economy is £2.4 billion* each year, far higher than the cost of any other cancer. This highlights the urgent need to continue to reduce the number of young people who become addicted to tobacco – as smoking causes more than eight in 10 lung cancers in the UK. The research is presented at the NCRI Cancer Conference in Liverpool today (Wednesday).

The same Oxford University study found that the total annual cost of all cancers to the UK economy is £15.8bn. Half (£7.6bn) of the total economic cost of cancer to the UK is due to premature deaths and time off work, followed by healthcare costs (35 per cent, £5.6bn) and unpaid care to cancer patients by friends and family (16 per cent, £2.6bn). Health care spending represents a cost of £90 per person in the UK population.

Each lung cancer patient costs the UK healthcare system £9,071 annually.** This compares with £2,756 for bowel cancer, £1,584 for prostate cancer and £1,076 for breast cancer survivors. The average healthcare*** spend on each cancer patient in the UK is £2,776.

Research author, Dr Jose Leal, at the Health Economics Research Centre, University of Oxford, said: "Lung cancer costs more than any other cancer – mainly because of potential wage losses due to premature deaths from people in employment - about 60 per cent of the total economic costs – and high health care costs. The death rate from the disease remains high at 56 deaths per 100,000 people in the UK population annually, and almost a quarter of these occur before retirement.

"Our research shows that cancers impact the economy as a whole - and not just the health service. Premature deaths, time off work and unpaid care by friends and family account for 64 per cent of all cancer costs (£10.2bn) in the UK in 2009. These wider costs should be taken into account when deciding research priorities. Cancers with the highest economic cost could offer the highest expected returns from investment in research."

Each year in the UK in the UK 41,500 people are diagnosed with lung cancer and almost 35,000 people die from the disease. Around 157,000 children aged 11-15 start smoking in the UK each year, enough to fill over 5,000 classrooms.

Dr Jane Cope, director of the NCRI, said: "These figures remind us that cancer has a cost, not just in professional healthcare but also in loss of earnings for patients, and for loved ones who give up work to look after them. Since 86 per cent of lung cancer deaths are linked to smoking, we can reduce these financial and societal costs by helping people to stop smoking."

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For media enquiries please contact Emma Rigby in the NCRI press office on 0151 239 6043 / 6044 / 6045 or, out-of-hours, the duty press officer on 07050 264 059.

Notes to Editors:

* The total economic costs of other cancers are: Bowel cancer - £1.6bn, breast cancer - £1.5bn, and prostate cancer - £0.8bn.

** Cancer patients are defined as those people who have previously been diagnosed with cancer and who are still alive. These may be newly diagnosed individuals, individuals with stable disease being followed-up regularly, or individuals considered to be cured.

***The healthcare costs rather than economic costs are calculated per cancer patient. The total economic cost of cancer includes potential wage losses of patients who have died from cancer in a given year and should, therefore, not be divided by the number of cancer patients who are still alive.

The economic burden of cancer was estimated using patient-level studies and aggregate data on morbidity, mortality and health care use. Costs of unpaid care and lost earnings due to morbidity and premature death were included in the study.

To see the abstract click here: http://www.ncri.org.uk/ncriconference/programme/speakerAbstracts/2012_parallel_Jose_Leal.asp

Oxford University's Medical Sciences Division is one of the largest biomedical research centres in Europe, with over 2,500 people involved in research and more than 2,800 students. The University is rated the best in the world for medicine, and it is home to the UK's top-ranked medical school.

From the genetic and molecular basis of disease to the latest advances in neuroscience, Oxford is at the forefront of medical research. It has one of the largest clinical trial portfolios in the UK and great expertise in taking discoveries from the lab into the clinic. Partnerships with the local NHS Trusts enable patients to benefit from close links between medical research and healthcare delivery.

A great strength of Oxford medicine is its long-standing network of clinical research units in Asia and Africa, enabling world-leading research on the most pressing global health challenges such as malaria, TB, HIV/AIDS and flu. Oxford is also renowned for its large-scale studies which examine the role of factors such as smoking, alcohol and diet on cancer, heart disease and other conditions.

www.ncri.org.uk/ncriconference

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About the NCRI Cancer Conference

The National Cancer Research Institute (NCRI) Cancer Conference is the UK's major forum for showcasing the best British and international cancer research. The Conference offers unique opportunities for networking and sharing knowledge by bringing together world-leading experts from all cancer research disciplines. The eighth annual NCRI Cancer Conference is taking place from 4–7 November 2012 at the BT Convention Centre in Liverpool. For more information visit www.ncri.org.uk/ncriconference

About the NCRI

The National Cancer Research Institute (NCRI) was established in April 2001. It is a UK-wide partnership between the government, charity and industry which promotes co-operation in cancer research among the 22 member organisations for the benefit of patients, the public and the scientific community. For more information visit www.ncri.org.uk

NCRI members are: the Association of the British Pharmaceutical Industry (ABPI); Association for International Cancer Research; Biotechnology and Biological Sciences Research Council; Breakthrough Breast Cancer; Breast Cancer Campaign; Cancer Research UK; CHILDREN with CANCER UK; Department of Health; Economic and Social Research Council; Leukaemia & Lymphoma Research; Ludwig Institute for Cancer Research; Macmillan Cancer Support; Marie Curie Cancer Care; Medical Research Council; Northern Ireland Health and Social Care (Research & Development Office); Prostate Cancer UK; Roy Castle Lung Cancer Foundation; Scottish Government Health Directorates (Chief Scientist Office); Tenovus; The Wellcome Trust; Welsh Government (National Institute for Social Care and Health Research); and Yorkshire Cancer Research.

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