

PRESS RELEASE

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MORE WOMEN THAN MEN DIAGNOSED WITH BOWEL CANCER AS AN EMERGENCY DESPITE EXTRA GP VISITS

More than a third (34%) of women with bowel cancer in England were diagnosed after an emergency hospital visit compared to less than a third of men (30%), despite women having more red flag symptoms and more visits to their GP, according to research presented at the 2017 National Cancer Research Institute (NCRI) Cancer Conference in Liverpool*.

If diagnosed after an emergency hospital visit, patients are more likely to have poorer survival as the disease is usually at an advanced stage.

Data from 2799 women and 2946 men diagnosed with bowel cancer in England between 2005-2010, was analysed by researchers from University College London, the London School of Hygiene and Tropical Medicine and the University of Exeter and funded by Cancer Research UK and the British Medical Association.**

Of the women diagnosed as an emergency, one in five (20%) had alarm symptoms such as a change in bowel habits or rectal bleeding the year before the emergency diagnosis compared to fewer than one in six (14.5%) men.

Women were also more likely than men to be diagnosed with a less-serious condition, such as irritable bowel syndrome (IBS), before being diagnosed with cancer. Those who had received a less-serious diagnosis in the year before their emergency admission, were more likely to be diagnosed with cancer following a later emergency hospital visit.

Dr Cristina Renzi, one of the lead researchers based at UCL, said: "This study suggests that it's more difficult to pick up bowel cancer in women than men, since female tumours are often located in a part of the bowel which means symptoms can be confusing. IBS is also more common among women and shares many of the same symptoms as cancer."

Dr Richard Roope, Cancer Research UK's GP expert, said: "Bowel cancer can be difficult to diagnose because it can share symptoms with diseases other than cancer. The most common symptom recorded for women in the study before they were diagnosed with cancer was stomach pain, which is usually associated with other women's health conditions. This could explain why some men were diagnosed with colon cancer earlier, as stomach pains don't have as many alternative explanations for men as they do for women. Sometimes diagnosing cancer is a process of elimination, so other conditions need to be eliminated first which means a longer wait for a cancer diagnosis."

"A lot has changed since the data used in this study was collected. GPs have been given new guidance to recognise and refer suspected cancers, and work continues to raise public awareness of cancer symptoms. Emergency diagnoses remain an issue though and efforts to improve this must continue."

Professor David Weller, member of the NCRI Cancer Conference Scientific Committee, said: "Research like this helps the health service understand where it should act to help more cancer patients get diagnosed earlier. These findings are the sort of potentially practice changing research we are showcasing at the NCRI Cancer Conference."

ENDS

For media enquiries contact the Sarah Cowen-Rivers in the NCRI press office on 020 3469 6189 or, out of hours, on 07050 264 059.

NCRI Press Office

Angel Building
407 St John Street
London EC1V 4AD

T: +44 (0)20 3469 8300

T: +44 (0)7050 264 059

(out of hours)

E: press@ncri.org.uk

www.ncri.org.uk

Notes to editor:

*[Cristina Renzi, Georgios Lyratzopoulos, Bernard Rachet. Gender inequalities in emergency colon cancer diagnosis: A longitudinal data-linkage study in England on pre-diagnostic clinical history and healthcare use.](#)

** Of these, 940 women (34%) and 874 men (30%) were diagnosed as an emergency.

***56 women in the study who were diagnosed with bowel cancer as an emergency had been diagnosed with a less serious condition instead of cancer compared to 20 men. It is unknown from the data whether these were incorrect diagnoses or whether the patients had these conditions as well as cancer.

About the NCRI

The National Cancer Research Institute (NCRI) is a UK-wide partnership of cancer research funders, established in 2001. Its 19 member organisations work together to accelerate progress in cancer-related research through collaboration, to improve health and quality of life.

NCRI works to coordinate research related to cancer, to improve the quality and relevance of the research and to accelerate translation of the research into clinical practice for the benefit of patients.

NCRI Partners are: Biotechnology and Biological Sciences Research Council; Bloodwise; Breast Cancer Now; Cancer Research UK; Children with Cancer UK, Department of Health; Economic and Social Research Council (ESRC); Macmillan Cancer Support; Marie Curie; Medical Research Council (MRC); Northern Ireland Health and Social Care Public Health Agency (Research & Development Department); Pancreatic Cancer Research Fund; Prostate Cancer UK; Roy Castle Lung Cancer Foundation; Scottish Government Health Directorates (Chief Scientist Office); Tenovus Cancer Care; The Wellcome Trust; Welsh Assembly Government (Health and Care Research Wales); and Worldwide Cancer Research.

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About Cancer Research UK

- Cancer Research UK is the world's leading cancer charity dedicated to saving lives through research.
- Cancer Research UK's pioneering work into the prevention, diagnosis and treatment of cancer has helped save millions of lives.
- Cancer Research UK receives no government funding for its life-saving research. Every step it makes towards beating cancer relies on vital donations from the public.
- Cancer Research UK has been at the heart of the progress that has already seen survival in the UK double in the last forty years.
- Today, 2 in 4 people survive their cancer for at least 10 years. Cancer Research UK's ambition is to accelerate progress so that by 2034, 3 in 4 people will survive their cancer for at least 10 years.
- Cancer Research UK supports research into all aspects of cancer through the work of over 4,000 scientists, doctors and nurses.
- Together with its partners and supporters, Cancer Research UK's vision is to bring forward the day when all cancers are cured.

For further information about Cancer Research UK's work or to find out how to support the charity, please call 0300 123 1022 or visit: <http://www.cancerresearchuk.org>
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NCRI Press Office

Angel Building
407 St John Street
London EC1V 4AD
T: +44 (0)20 3469 8300
T: +44 (0)7050 264 059
(out of hours)
E: press@ncri.org.uk

www.ncri.org.uk