

# Age Well

## Screening and Vaccination

### Introduction

Screening is the process of identifying healthy people who may be at increased risk of a disease or condition. As a result, they may be offered information, further tests and appropriate treatment to help reduce their risks or complications arising from the disease<sup>1</sup>.

A screening programme can be described as a sieve that sifts through a healthy population to identify people with a higher risk of developing a condition or disease. These people i.e., those at a higher risk, will go on to have further confirmatory tests to determine whether they have the disease<sup>5</sup>.

This sub-chapter will be focusing on cancer and non-cancer screening. Cancer and non-cancer screening programmes are free and available to anyone in the target groups, irrespective of gender, income, and disability. The main aim of the screening is to detect disease at an early stage so there is a better chance of a successful treatment<sup>2</sup>.

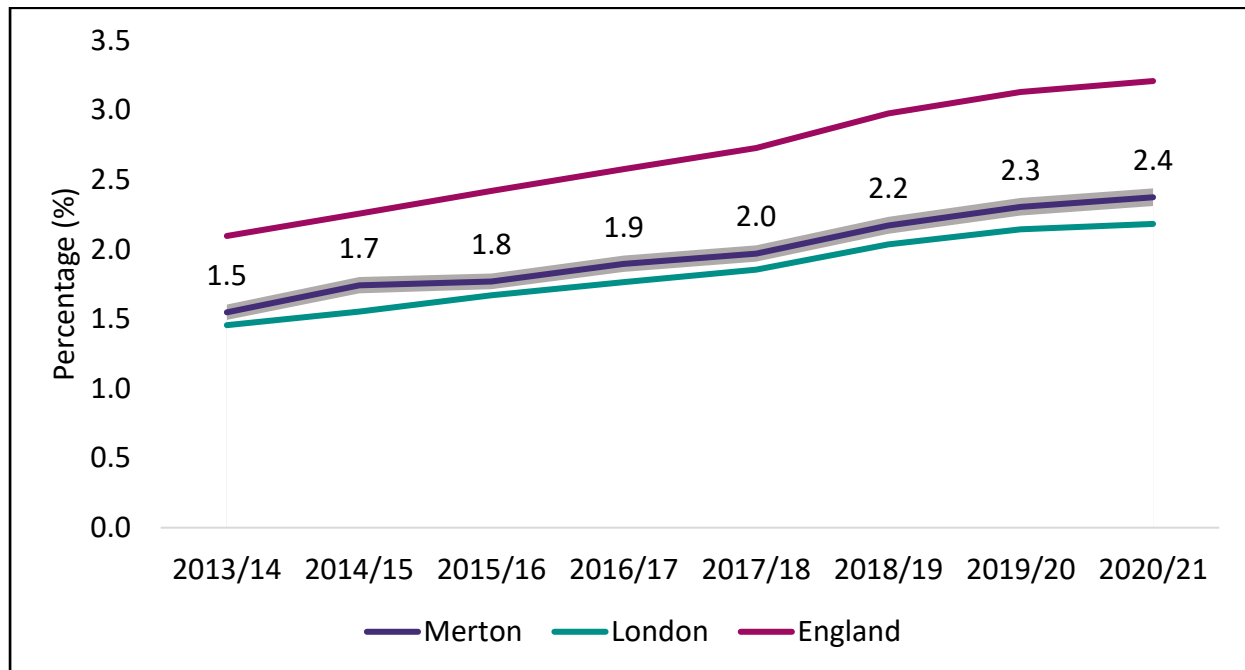
Immunisation is the most effective way of protecting individuals and communities from infectious diseases, complications, and possibly early death through administering vaccines. Immunisation programmes provide protection to both vaccinated individuals and the wider unvaccinated population.

Topics covered in this subchapter include cervical cancer, bowel cancer, breast cancer, abdominal aortic aneurysm (AAA) and diabetic retinopathy screening. In terms of immunisation, this chapter focuses on flu. Antenatal and newborn screening, along with childhood immunisations are picked up in the 'Start Well' chapter.

### Cancer prevalence

In Merton, based on the GP register for the period 2020/21, the prevalence of cancer was 2.4%<sup>3</sup>. This is significantly lower than Southwest London's prevalence (2.6%) and England's prevalence (3.2%) but significantly higher than London's prevalence (2.2%). Although, in Merton (2020) the mortality rate from all cancers combined among people aged 65 and over was 993.5 per 100,000, this was similar to the England average (1050.4 per 100,000)<sup>4</sup>.

Figure 1: The percentage (%) of patients with cancer, as recorded on practice disease registers (register of patients with a diagnosis of cancer excluding non-melanotic skin cancers from 1 April 2003) between 2011/12 and 2020/21 in Merton in comparison to London and England. Source: National General Practice Profiles, OHID, Quality Outcomes Framework, NHS Digital<sup>3</sup>.



### Impact of Covid-19 on cancer screening and treatment

In last year’s Merton Story 2021, we reported on the initial impact of the pandemic on cancer screening and cancer services. More information is available now<sup>5</sup>. Key points include:

- Prior to the pandemic the number of patients on the cancer pathway was increasing (due to an ageing population) and cancer standards nationally were already frequently missed<sup>6</sup>.
- For breast cancer screening stopped during March 2020 with urgent screening starting up again in April 2020 and screening back in all areas by June 2020<sup>7</sup>.
- Covid 19 restrictions lengthened appointment times and increased times between patients, reducing capacity whilst patients may have postponed appointments voluntarily if they were shielding<sup>8</sup> or concerned about the risks around Covid-19.
- In 2020/21 across all screening programmes there were 1 million fewer screening invites sent nationally, a 9% reduction on 2018/19 and there were 45,000 fewer patients starting cancer treatment<sup>9</sup>.
- Screening programmes have been working above their usual levels to catch up on activity missed at the start of the pandemic<sup>9</sup>.
- Challenges still remain, for example there have been screening backlogs for cervical cancer and breast cancer screening in London during 2022<sup>10</sup>

- The number of patients receiving cancer treatment in November 2021 was 10% higher than pre-pandemic<sup>11</sup>.

The urgent referral for cancer (14 days) target measures the time taken to see a cancer specialist following an urgent referral. In May 2022, 83.2% of patients nationally were seen against a target of 93%. This target has not been met since May 2020<sup>12</sup>.

### Cancer screening programmes

Under the UK breast cancer screening programme, women from the age of 50 to their 71<sup>st</sup> birthday are invited for regular breast screening every 3 years. In England, 64.2% of women aged 53 to 70 were eligible for breast cancer screening as of 31<sup>st</sup> March 2021<sup>13</sup>. Among women invited for screening in 2020/21 in England, 61.8% were screened within 6 months of invitation<sup>14</sup>. Merton's coverage (women eligible screened in the last 3 years) has decreased significantly from 70.4% in 2020 to 59.9% in 2021 and is significantly lower than the national target for breast cancer screening (70%)<sup>15</sup>. This is likely due to the reduction in cancer screening services during the pandemic where around 1 million fewer people were invited to cancer screening, and around 1.3 million fewer people participated in screening, in England in the first year of the pandemic versus comparable earlier periods<sup>16</sup>.

In the UK, cervical screening is offered to women from the age of 25 to 64. Women aged 25 to 49 are invited every 3 years, and women aged 50 to 64 are invited every 5 years<sup>17</sup>. Locally, Merton's cervical cancer coverage in people aged 24 to 49 decreased significantly from 63.4% in 2020 to 61.1% in 2021, though the latest screening coverage was affected by the pandemic<sup>18</sup>. Merton's coverage is significantly lower than England's (68.0%) and significantly higher than London's (59.1%). Coverage in Merton among women aged 50 to 64 is consistently lower than London and England's in the past 6 years.

Bowel cancer screening is offered to both men and women aged 60 to 74, every two years. People over the invitation age range are not invited but can request screening every two years. Locally, Merton's bowel cancer coverage in people aged 60–74 has increased significantly from 58.2% in 2020 to 62.9% in 2021<sup>19</sup>. Merton's value is significantly higher than the London's coverage (59.3%) but significantly lower than the England coverage (65.2%).

Table 1: Cancer screening programmes in Merton, in comparison with London and England, 2021. Source: Public Health Profiles, OHID. Please note, recent trends are based on the most recent 5 years.

Indicators	Value type	Period	Merton	Recent Merton trend	London	England
<b>Breast Cancer</b>						
Percentage of women eligible for breast cancer screened in the last 3 years	%	2021	59.9	Decreasing and getting worse	55.2	64.1
Percentage of women screened within 6 months of invitation	%	2021	49.8	Decreasing and getting worse	-	62.8
<b>Cervical Cancer Screening</b>						
Percentage of women aged 25 to 49 eligible for cervical cancer screened within the target period (3.5 years)	%	2021	61.1	Decreasing and getting worse	59.1	68.0
Percentage of women aged 50 to 64 eligible for cervical cancer screened within the target period (3.5 years)	%	2021	70.3	Decreasing and getting worse	70.9	74.7
<b>Bowel Cancer Screening</b>						
Percentage of men and women invited for screening who had a faecal occult blood test result in the previous 30 months	%	2021	62.9	Increasing and getting better	59.3	65.2

## Non-cancer screening programmes

### Diabetic retinopathy screening

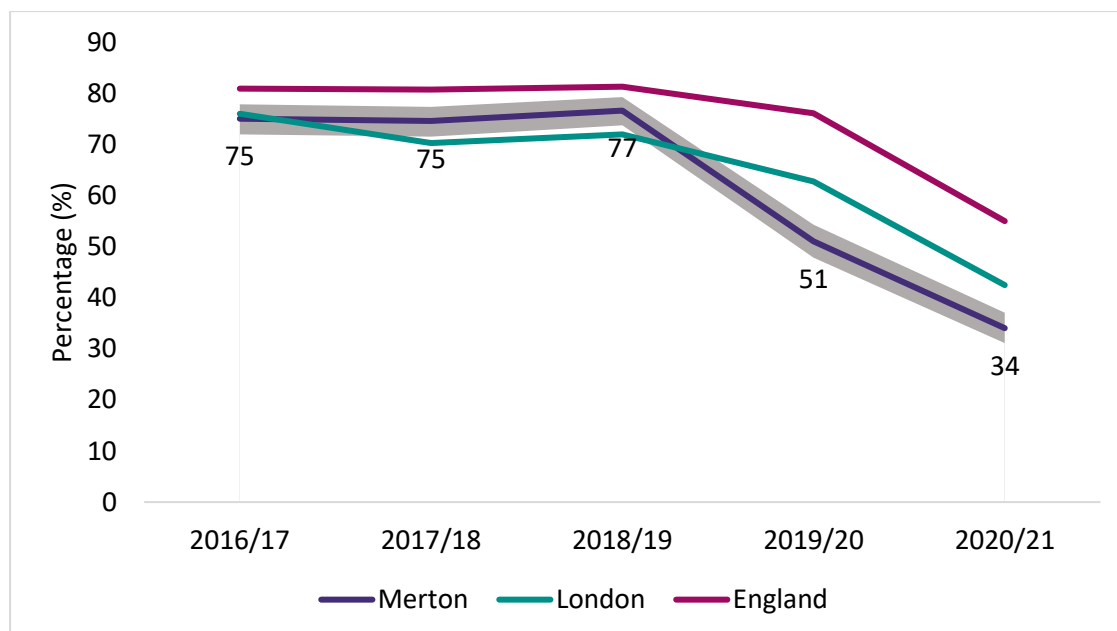
Diabetic retinopathy is a condition that occurs when diabetes affects small blood vessels in the retina and is the most common cause of blindness in diabetic patients in the UK. The risk of developing retinopathy can be reduced by good management and control of diabetes (glycaemia control) and blood pressure<sup>20</sup>. In 2020/21, London's uptake was 70.5%, this is

better than England's at 67.9%. London's uptake has significantly decreased since 2014/15 and is getting worse<sup>21</sup>.

### Abdominal aortic aneurysm screening

The NHS Abdominal Aortic Aneurysm (AAA) screening programme is available for all men aged 65 and over in England. Uptake of abdominal aortic aneurysm (AAA) screening in Merton (34.1%) was significantly lower than London (42.5%) and England (55.0%) in 2020/21. Locally, AAA screening has decreased significantly from 51.1% in 2019/20 to 34.1% in 2020/21<sup>22</sup>.

Figure 1: Proportion (%) of men aged 65 and over eligible for AAA screening who were conclusively tested in Merton between 2016/17 and 2020/21, in comparison to London and England. Source: Public Health Profiles, OHID<sup>22</sup>.



### Immunisations – Flu Vaccinations

Uptake of flu vaccination in Merton residents aged 65 and over in 2020/21 was (70.7%) significantly lower than London (71.8%) and England (80.9%) in 2020/21. Locally, flu vaccine uptake increased significantly from 63.2% in 2019/20 to 70.7% in 2020/21<sup>23</sup>. Care homes (in partnership with primary care) play a key role in ensuring some of Merton's most vulnerable older residents are vaccinated.

## Service User and Resident Views

National videos of service users with a learning disability on their screening experience and challenges they faced around screening can be found at [Powerful service user videos remind us why focusing on inequalities is so important - PHE Screening \(blog.gov.uk\)](#)

Recommendations for data collection and analysis involve monitoring the uptake of screening and flu vaccination during 2022.

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- <sup>3</sup> Office for Health Improvement and Disparities. National General Practice Profiles [Internet]. Fingertips. [cited 28 September 2022]. Available from: <https://fingertips.phe.org.uk/profile/general-practice/data#page/1/gid/1938132829/pat/167/par/E38000245/ati/204/iid/276/age/1/sex/4/cat/-1/ctp/-1/yrr/1/cid/4/tbm/1>
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- <sup>5</sup> Performance Measures Across the Cancer Pathway: Key Stats [Internet]. Cancer Research; 2022 [as of 13 January 2022] [cited 28 September 2022]. Available from: [https://www.cancerresearchuk.org/sites/default/files/cancerpathwaykeystats\\_jan22.pdf](https://www.cancerresearchuk.org/sites/default/files/cancerpathwaykeystats_jan22.pdf)
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- <sup>8</sup> NHS Breast Screening Programme, England 2020-21, COVID-19 Impact During 2020-21 [Internet]. NHS Digital; 2022 [cited 28 September 2022]. Available from: <https://digital.nhs.uk/data-and-information/publications/statistical/breast-screening-programme/england---2020-21/covid-impact---programme-summary-2020-21>
- <sup>9</sup> Performance Measures Across the Cancer Pathway: Key Stats [Internet]. Cancer Research; 2022 [as of 13 January 2022] [cited 28 September 2022]. Available from: [https://www.cancerresearchuk.org/sites/default/files/cancerpathwaykeystats\\_jan22.pdf](https://www.cancerresearchuk.org/sites/default/files/cancerpathwaykeystats_jan22.pdf)

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<sup>10</sup> Agenda for Healthier Communities and Older People Overview and Scrutiny Panel on Monday 20 June 2022, 7.15 pm - Merton Council [Internet]. Merton Council; 2022 [cited 28 September 2022]. Available from:

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