

Place of Death for Children, Teenagers and Young Adults with Cancer in England

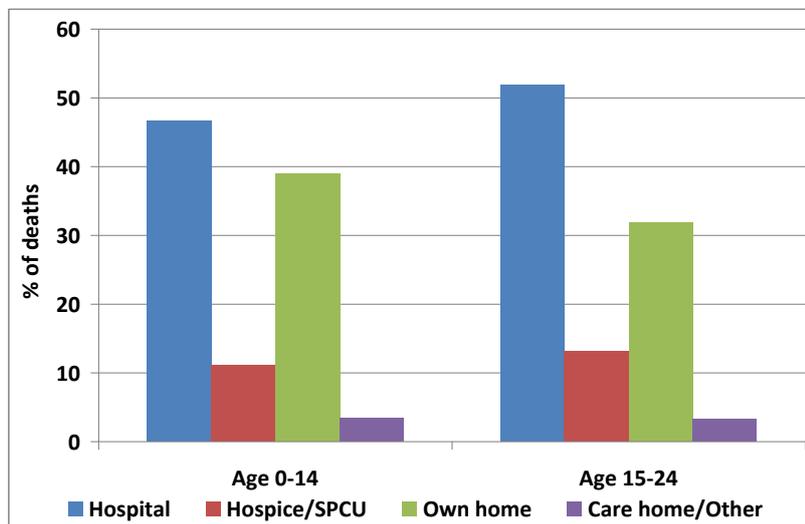
NCIN Data Briefing

Patterns of place of death for cancer patients dying at age 0-14 and 15-24 years

Survival rates of children, teenagers and young adults with cancer are the highest for any age group – more than 78% now survive at least 5 years from diagnosis. Nevertheless, neoplasms remain the leading medical cause of death at age 1-24 years; during 2000-2009, there were 2,611 cancer patients who died before 15 years of age and 2,975 who died at age 15-24 years in England.

This Data Briefing explores patterns of place of death among children, teenagers and young adults with cancer in England who died during 2000-2009. Data on category of place of death are not currently available for residents of the London and South East England Government Office Regions, and are unknown for a minority of residents of other parts of England. The data presented here refer to the 1,454 children aged under 15 years at death and 1,767 teenagers and young adults aged 15-24 years at death who were residents of regions other than London and South East England at diagnosis and for whom place of death has been assigned to one of the following categories: Hospital; Hospice/specialist palliative care unit (SPCU); Patient's own home; Care home or other known place of death.

Place of death by age at death



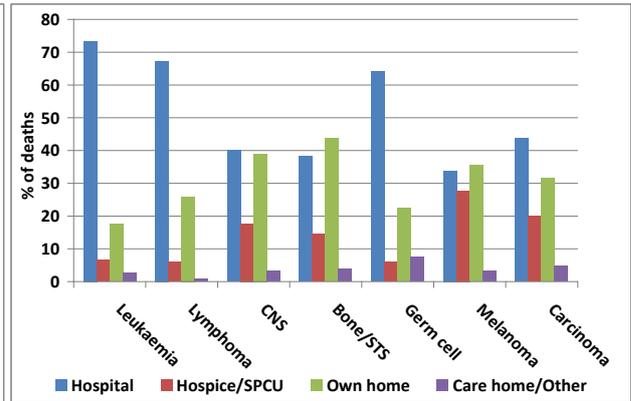
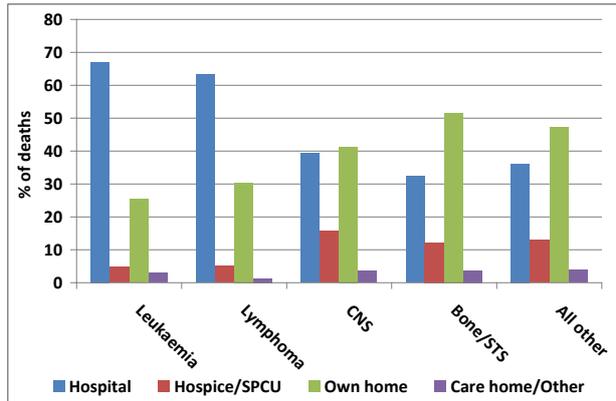
Among children, 47% died in hospital, 39% in their own home, 11% in a hospice or SPCU and 3% in a care home or other place. Among teenagers and young adults, 52% died in hospital, 32% in their own home, 13% in a hospice or SPCU and 3% in a care home or other place. The distribution of places of death was similar for males and females within both age groups.

In both age groups, deaths of patients with leukaemia or lymphoma were more likely to occur in hospital. The proportion of patients who died in a hospice or SPCU was higher than average for CNS tumours, bone tumours and soft-tissue sarcomas in both age groups. Among teenagers and young adults the proportion dying in a hospice or SPCU was also higher for patients with melanoma and carcinoma. In both age groups, the highest proportion dying in their own homes was for bone tumours.

KEY MESSAGE: Among children with cancer, 47% of deaths occurred in hospital, and 39% occurred in the patient's own home. Corresponding figures for teenagers and young adults were 52% in hospital and 32% at home. Place of death was more likely to be hospital for Asian patients than for White patients.



Place of death by type of cancer



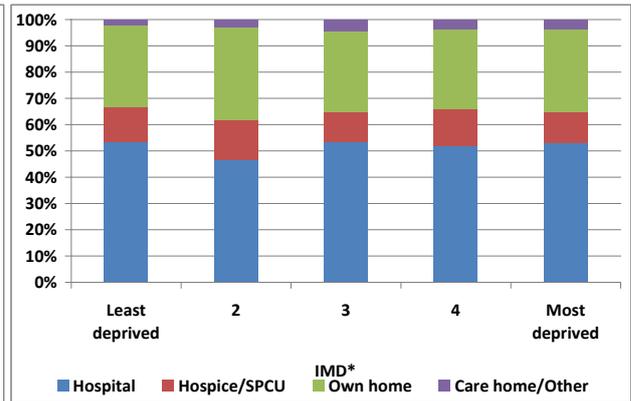
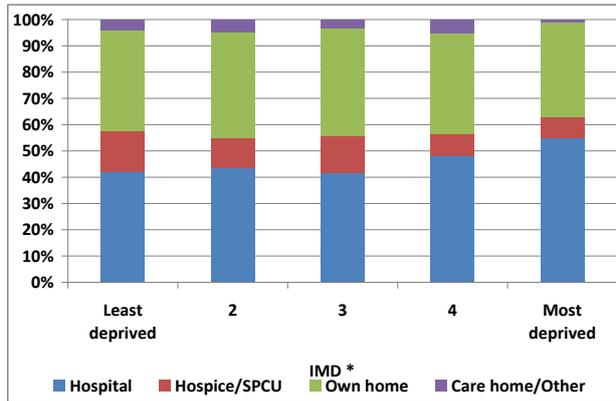
Age 0 – 14

Age 15 – 24

Place of death by deprivation

Age 0 – 14

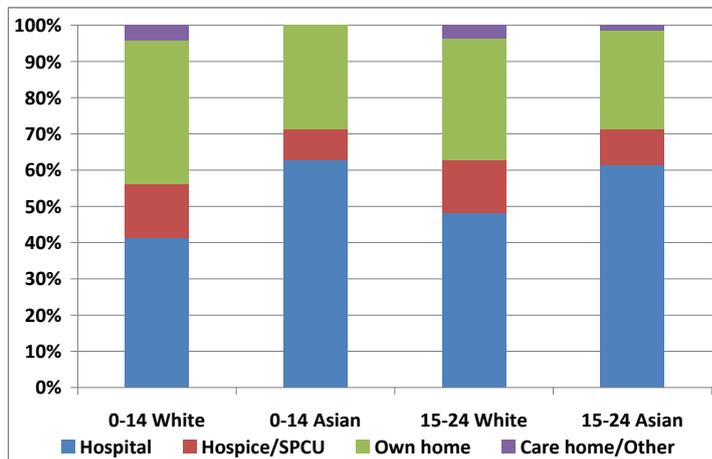
Age 15 – 24



Place of death by deprivation

Deprivation was classified according to the Index of Multiple Deprivation (IMD) of the patient's usual residence at the time of cancer diagnosis. Children who were resident at diagnosis in the 20% most deprived wards to be more likely to die in hospital and less likely to die in a hospice/SPCU, and for those who were resident in the 20% least deprived wards were more likely to die in a hospice/SPCU. Variation in place of death by deprivation for teenagers and young adults was much less marked and not statistically significant.

Place of death by ethnicity



*IMD (2007) by lower super output area (LSOA) quintiles, generated using the equal population method

Sufficient data were available for meaningful statistical comparisons of place of death between children, and teenagers and young adults only for those of White and Asian ethnicity. For both age groups, patients of Asian ethnic background were more likely to die in hospital and correspondingly less likely to die in their own home or in a hospice/SPCU. This pattern was more marked for children than for teenagers and young adults, and was only statistically significant for children.

Summary

In patients who died of cancer between 2000 and 2009, children were less likely to die in hospital than teenagers and young adults, although diagnosis played a key role in determining place of death across all ages. Ethnicity and socio-demographic status may also have influenced place of death.

The data used for this study are taken from the National Cancer Data Repository (NCDR 2008) that holds data on place of death as captured by regional cancer registries in England and there may be some differences between regions in the way place of death data are recorded. These differences should be considered when interpreting these patterns.

All data included here are available from the NWCIS and CCRG websites.

FIND OUT MORE:

Childhood Cancer Research Group (CCRG) and the North West Cancer Intelligence Service (NWCIS)

CCRG and NWCIS are the lead Cancer Registries for cancer in children and cancer in teenagers and young adults respectively.

<http://www.ccrq.ox.ac.uk>

<http://www.nwcis.nhs.uk>

Other useful resources within the NCIN partnership:

Cancer Research UK CancerStats – Key facts and detailed statistics for health professionals

<http://info.cancerresearchuk.org/cancerstats/>

The National Cancer Intelligence Network is a UK-wide initiative, working to drive improvements in standards of cancer care and clinical outcomes by improving and using the information collected about cancer patients for analysis, publication and research. Sitting within the National Cancer Research Institute (NCRI), the NCIN works closely with cancer services in England, Scotland, Wales and Northern Ireland. In England, the NCIN is part of the National Cancer Programme.