SCREENING

What’s the issue?

There are a number of screening programmes in place in the UK relating to antenatal and newborn, and abdominal aortic aneurysm (AAA), diabetic retinopathy, breast cancer, cervical and bowel cancer in adults [190]. “Tests in pregnancy and in the newborn after birth are designed to help make the pregnancy safer, check and assess the development and wellbeing of the woman and her baby, and screen for particular conditions” [157-159]. Most of the screening programmes in adults can detect the condition before the person experiences symptoms, and thus can be treated earlier to prevent the disease developing or increase survival (further information is in the JSNA glossary, www.hullpublichealth.org/jsna2017.html#82). There is also the NHS Health Check programme which “aims to help prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia. Everyone between the ages of 40 and 74, who has not already been diagnosed with one of these conditions or have certain risk factors, will be invited (once every five years) to have a check to assess their risk of these conditions, and will be given support and advice to help them reduce or manage that risk” [191].

What’s our situation?

From the Public Health Outcomes Framework [26, 95], 69.8% of eligible women in Hull aged 53-70 years were screened for breast cancer in the three years up to 31st March 2016. This was lower than the percentage screened in England (75.5%), and marginally below the target of 70%. The percentage of women aged 25 to 64 years attending cervical screening within the last three years (aged 25-49) or five years (aged 50-64) as at 31st March 2016 for Hull was 73.9%. Whilst this was slightly higher than England (72.7%), it had fallen slightly since 2010 from 75.8% and is below the target of 80%. For bowel cancer, the percentage of eligible men and women aged 60-74 years screened in the last 2½ years in Hull was 55.0% compared to 57.9% for England for 2015/16. The low uptake rate is recognised nationally [192, 193]. The percentage of men offered AAA screening within the year of their 65th birthday was relatively high in Hull for 2015/16 (82.4%) being higher than England (79.9%) and second highest of 12 comparator areas, although it had fallen since 2013/14 when it was 89.0% [26, 95]. For 2015/16, the uptake rate for the newborn bloodspot screening was 97.0% in Hull which was higher than the national average of 95.6%. Almost all of newborn infants had their hearing screening test in Hull (99.7%) which was slightly higher than England (98.7%). For 2012/13, under three-quarters (73.9%) of Hull residents aged 12+ years with diabetes attended diabetic retinopathy screening. This was lower than for England (79.1%), the region (79.2%) and all ten comparator areas (range 74.3% to 83.5%). The rate in Hull had been 77% in the previous two years so has fallen for the most recent year [67]. More recent data is not available by local authority. For the NHS Health Check [26, 95], up to 2015/16, 59.5% of those who were eligible were offered a check (slightly higher than England at 56.4%). However, uptake rates in Hull were far lower (34.1%) than England (48.6%) which meant that only 20.3% of those eligible for the NHS Health Check had had their check compared to 27.4% in England. Information on screening uptake is not available on all medical conditions.

For more detailed information, see the JSNA Toolkit: Screening report.

What are the strategic needs?

There are relatively large variations in screening uptake rates within primary care practices, perhaps associated with the patients within those practices (for example, people living in more deprived areas), and it may be useful to work with practices with relatively low uptake rates to improve their rates. Where uptake rates are low, further work may be required to assess why this is the case. Furthermore, from anecdotal evidence, it is possible that some women who attend screening and have abnormal results are not attending follow-up appointments, and this should be investigated.
References


