A Year on in Haematology- Benefits of Re-configuration

Ronjon Chakraverty 27th July 2017
The 20 Most Common Causes of Cancer Death in 2014

Number of Deaths per Year, All Ages, UK

- Lung
- Bowel
- Breast
- Prostate
- Pancreas
- Oesophagus
- Bladder
- Brain, other CNS and Intracranial
- Liver
- Non-Hodgkin Lymphoma
- Leukaemia
- Stomach
- Kidney
- Ovary
- Head and Neck
- Myeloma
- Mesothelioma
- Melanoma Skin Cancer
- Uterus
- Cervix
- Other Sites

Number of Deaths
Blood cancer is the 3rd biggest cancer killer, and the 5th most common cancer in the UK

Bloodwise
The blood cancer research charity
### Top 5 Things to Know About Neutropenia

A low white blood cell count, or neutropenia, can put people at risk for getting an infection.

**Neutropenia is one of the most dangerous side effects of chemotherapy.**

1. **It's Life Threatening**
   - 60,000 cancer patients in the U.S. are hospitalized each year because of this side effect.
   - One in 14 (or 4,300) will die from this complication.

2. **You Have High Risk Days**
   - You could develop neutropenia 7-12 days after each chemotherapy dose.

3. **Why Chemo Can Put You at Risk**
   - Chemo kills both normal (immune) and abnormal (cancer) cells in your body.
   - When this happens, your risk of getting an infection goes up.

4. **Infections Can Get Serious Fast**
   - Call your doctor immediately if you have a fever.
   - If you have to go to the emergency room, tell the person checking you in that you have cancer and are getting chemo.

5. **You Can Help Prevent Infection**
   - Wash your hands a lot.
   - Talk to your doctor or nurse about when you should get a flu shot.
   - Take a bath or shower every day and use an unscented lotion so your skin won’t get dry or cracked.
   - Ask your doctor or nurse when your white blood cell count will be at its lowest.

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- Intensive chemotherapy
- Very low immunity against infections
- Need for isolation facilities
- 1 in 6 require ICU admission
- Treatment lasting several weeks-months
• Model of Care for Cancer Services, August 2010

• BSCH Facilities for the treatment of adults with haematological malignancies - 'Levels of Care’, 2009

• Manual for Cancer Services v1.1, April 2013
78% of respondents said that they were definitely involved as much as they wanted to be in decisions about their care and treatment.

87% of respondents said that, overall, they were always treated with dignity and respect while they were in hospital.

94% of respondents said that hospital staff told them who to contact if they were worried about their condition or treatment after they left hospital.

63% said that they thought the GPs and nurses at their general practice definitely did everything they could to support them while they were having cancer treatment.

* Figures exclude responses that did not provide any information on positive or negative experience.
Acute myeloid leukaemia
intensive Rx

Level 2b

- BHRUT

Level 3

- Barts Health (St Bartholemew’s Site)
- UCLH
Haematopoietic Stem Cell Transplantation

Level 3

- Barts Health (St Bartholemew’s Site)
- UCLH
Re-site RFL malignant haematology service at UCLH

Level 1
Royal Free London

Level 3
- Barts Health (St Bartholomew’s Site)
- UCLH
• Increased critical mass at UCLH

• Further specialization into disease-specific teams

• Pooling of expertise in six disease-specific sMDTs

• Extended network of consultants with joint appointments
The best of clinical pathway redesign
Practical examples delivering benefits to patients
4 patient pathways - **one** team for each patient

- **Myeloma and other plasma cell disorders and autologous HSCT**
- **Lymphoma and autologous HSCT**
- **Acute leukaemia**
- **Allogeneic HSCT**
- Specialism
- Continuity-of-care
- Consultant ward rounds every weekend
Bone marrow test

Flow cytometry

Diagnosis

Correct & timely Rx
Planning for the future
Pan-London Treatment Guidelines for Blood Cancers October 2017

Catchment area 10 million

Annual Educational Meeting

South East LONDON Accountable Cancer Network

RM Partners Accountable Cancer Network

LONDON CANCER
Six videos explaining common diagnostic & therapeutic procedures:

- Lumbar puncture
- Bone marrow test
- PICC line insertion
- PET-CT scan
- Lymph node biopsy
- Blood transfusion

Created with patients

Translated into 10 languages
Level 1
- Homerton Hospital
- Barts Health (Royal London Hospital Site)

Level 2a
- Princess Alexandra Hospital
- Whittington Hospital
- Barts Health (Newham & Whipps Cross)

Level 2b
- BHRUT
- North Middlesex University Hospital
- Barnet Chase Farm Hospitals

Level 3
- Barts Health (St Bartholemew’s Site)
- Royal Free Hospital
- UCLH
Common investigation algorithms

Common reporting templates

- Avoid delay and cost of duplication
- Improved integration of care between sites
- Better information e.g. staging
- Optimize treatment decisions
Challenges
HOW AND WHEN CANCER PATIENTS ARE DIAGNOSED

% OF PATIENTS DIAGNOSED

- Via national screening programmes: 6%
- By urgent GP referral for suspected cancer symptoms: 34%
- By routine GP referral: 25%
- In an emergency, via emergency GP referral to hospital, or as a hospital patient, or via A&E: 21%
- Hospital in or outpatient: 11%
- Unknown data: 3%

STAGE WHEN DIAGNOSED

- EARLY (STAGE I)
  - Via national screening programmes: 63%
  - By urgent GP referral for suspected cancer symptoms: 34%
  - By routine GP referral: 11%
  - In an emergency, via emergency GP transfer to hospital, or as a hospital patient, or via A&E: 34%
  - Hospital in or outpatient: 34%
- LATE (STAGE IV)
  - Via national screening programmes: 3%
  - By urgent GP referral for suspected cancer symptoms: 22%
  - By routine GP referral: 58%
  - In an emergency, via emergency GP transfer to hospital, or as a hospital patient, or via A&E: 29%
  - Hospital in or outpatient: 29%

Source: National Cancer Intelligence Network, data for England 2012-2013

LET'S BEAT CANCER SOONER

cruk.org
Feeling bloated, most days, for 3 weeks could be a sign of ovarian cancer.

1 in 3 women who get breast cancer are over 70, so don’t assume you’re past it.

Know 4 sure

1. Unexplained blood that doesn’t come from an obvious injury
2. An unexplained lump
3. Unexplained weight loss, which feels significant to you
4. Any type of unexplained pain that doesn’t go away

If you notice any of these signs, tell your doctor.