Vaughan Gething AC/AM Y Gweinidog lechyd a Gwasanaethau Cymdeithasol Minister for Health and Social Services



Llywodraeth Cymru

Welsh Government

Ein cyf/Our ref: VG/0052/19

Darren Millar AM National Assembly for Wales Cardiff Bay CF99 1NA

10 December 2019

Dear Darren,

Thank you for requesting a statement on secondary breast cancer during questions to the Minister for Finance and Trefnydd on 15 October. I would like to apologise for the length of time it has taken to respond.

I am aware of the findings reported by Breast Cancer Now and have previously responded to the charity's concerns about specialist nursing through my six-monthly meetings with the Wales Cancer Alliance. I want anyone with a secondary cancer to be investigated and treated with the same urgency as someone with a primary cancer. The survey findings reinforce the need for more focus on secondary cancer but I would caution that the sample size is relatively small.

I recognise that it can be challenging for GPs to differentiate between the underlying causes of common, non-specific symptoms and it is important they use the tools at their disposal, including the advice of the National Institute for Health and Care Excellence to refer appropriately and in a timely fashion. We have seen very large increases in the numbers of people being referred in recent years by GPs with suspected cancer and I believe this shows GPs are adopting a lower threshold of suspicion for cancer. We have supported this through a partnership with Macmillan Cancer Support that funds sessional time for GPs to work with their peers on referral and management. However, most health boards allow women with a history of breast cancer to return straight into secondary care services.

The Wales Cancer Network's breast cancer subgroup held a workshop with Breast Cancer Now and Baroness Delyth Morgan on 14 October to consider the report findings. There is still more work to be done to ensure GPs are provided with end of treatment summaries so they can adjust their index of suspicion for people with a history of previous cancer. We also recognise the need to consider how our cancer waiting time metrics capture people that are on follow-up or surveillance pathways. These issues will inform our next phase of planning for cancer services, so that we can build on the progress made in recent years. We will also continue to work closely with members of the Wales Cancer Alliance, such as Breast Cancer Now.

I hope this information is helpful.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Yours sincerely,

Vaughan Gettin

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