

MEDIA RELEASE

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New research highlights gaps for young adults with bone cancer

Delays in diagnosis, variations in treatment and lack of participation in clinical trials may all contribute to poorer outcomes for young Australians with bone cancer

Young adults and teenagers with bone cancer are being let down by diagnosis delays and inconsistencies in treatment that could be impacting survival rates, a national meeting of cancer experts will be told today (18/11).

Researchers analysed state-based cancer registries and medical records from across the country to compare treatment records for 15 to 24 year olds diagnosed with bone cancers such as Ewing's sarcoma, osteosarcoma and chondrosarcoma between 2007 and 2012.

President of the Medical Oncology Group of Australia, Associate Professor Rosemary Harrup, presenting at the Clinical Oncology Society of Australia's Annual Scientific Meeting in Hobart, said the research found significant delays in the amount of time it took for a young person with bone cancer to be diagnosed after symptoms first developed.

"On average, adolescents and young adults with Ewing's sarcoma waited eight weeks from first experiencing symptoms to seeing a health professional for the first time. For other bone cancers the typical delay was 12 weeks.

"This is a significant delay that probably relates to a lack of awareness that bone cancer can occur in younger people – adolescents and young adults just don't recognise the need to get symptoms such as persistent pain and swelling checked out.

In 25% of cases it took more than 2 months for a diagnosis to be made after the first consultation with a health professional.

"The combined effect of the delay in patients heading to the doctor and the amount of time it takes for a diagnosis to be confirmed means that often patients aren't told they have bone cancer until 10 to 15 weeks after symptoms first appear.

"During this time their cancer may have become more difficult to treat."

Professor Harrup said the data also showed inconsistency in treatment and recruitment to clinical trials depending on where a patient was treated, which could contribute to lack of improvement in survival rates over time.

"Seven in ten young bone cancer patients were treated in metropolitan adult hospitals, almost two in ten in paediatric hospitals and one in ten were in regional hospitals.

"There were some inconsistencies in chemotherapy protocols in metropolitan adult hospitals compared to children's hospitals and children's hospital patients were more likely to be recruited into clinical trials."

Clinical Oncology Society of Australia President, Professor Mei Krishnasamy, said the research was significant because it represented the largest population based study of bone cancer management in adolescents and young adults in Australia.

"This study highlights the gaps in our health system when it comes to young people and bone cancer," Professor Krishnasamy said. "Bone cancer is rare, with only around 40 adolescents and young people diagnosed each year.

"We haven't seen a significant improvement in bone cancer survival rates like we have in other cancer types. More needs to be done to not only ensure that treatment is consistent across all hospitals, but to also ensure that all patients are given opportunities to participate in suitable clinical trials."

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Notes to Editors:

Management of Bone Cancers in Australian Adolescents and Young Adults (AYAs) will be presented on Wednesday 18 November, at the Clinical Oncology Society of Australia's Annual Scientific Meeting, Hobart.