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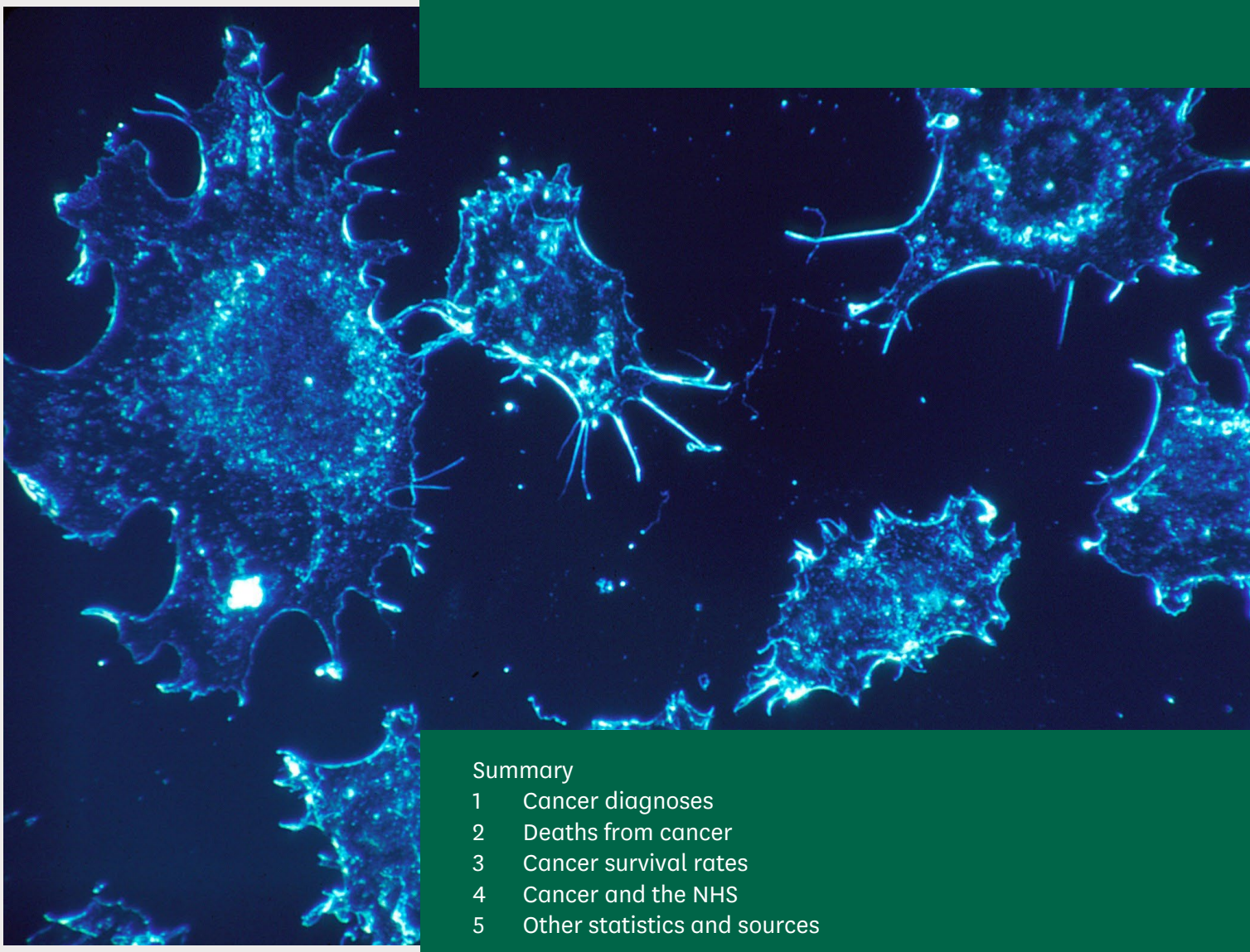
By Carl Baker,
Zoe Mansfield
7 February 2023

Cancer statistics for England



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Summary

Cancer is the cause of just over a quarter of all deaths in England in a typical year. In 2021, 134,802 people died from cancer in England.

This paper provides statistics on new cancer diagnoses, deaths, and survival rates in England.

New diagnoses of cancer

In 2020 there were 288,753 new cases of cancer diagnosed in England. Incidence rates (the number of new diagnoses per 100,000 head of the population) rose between 1995 to 2013 but have changed little since, with only a slight fall.

2020 saw the largest fall in new cases since 1995. However, it is important to consider the impact that the Covid-19 pandemic had on cancer testing and diagnoses throughout 2020.

Overall incidence of cancer was 21% higher in men than in women in 2020. Over half of people newly diagnosed with cancer are aged over 70. Among people aged 25 to 54, incidence rates are higher in women than in men. Among people aged over 65, incidence rates are around 50% higher in men than in women.

Over half of cancers fall into four types: prostate, breast, lung, and colorectal.

Deaths have increased but rates have fallen

In 2021 in England, 134,802 people died from cancer. The number of deaths has increased by 6% since 2001. But after accounting for the fact that England's population is both growing and ageing, the rate of cancer deaths has fallen by 23% among men and 16% among women.

Survival of cancer

Cancer survival rates vary between types of cancer.

Over 95% of people diagnosed with breast, prostate or skin cancer between 2015 and 2019 survived for one year after their diagnosis. However, less than 50% of people with stomach, oesophageal, lung, liver, and pancreatic cancer survived for one year after their diagnosis.

Cancer and the NHS

The NHS currently offers screening for bowel, cervical and breast cancer. Coverage, which refers to the proportion of the eligible population who have been screened within the recommended time-period, has been falling for cervical and breast screening, but rising for bowel cancer.

There were 27,500 patients waiting for NHS cancer treatment in December 2022. This treatment backlog has been falling since late October.

Urgent GP referrals for people with suspected cancer have more than doubled in the last decade, to an average of 8,300 daily referrals in November 2022. The waiting time targets for cancer appointments and treatments are currently not being met. During the first Covid-19 lockdown, the number of daily treatments fell by almost 50%. However, the number of treatments after urgent GP referrals have been mostly at pre-pandemic levels since September 2020.

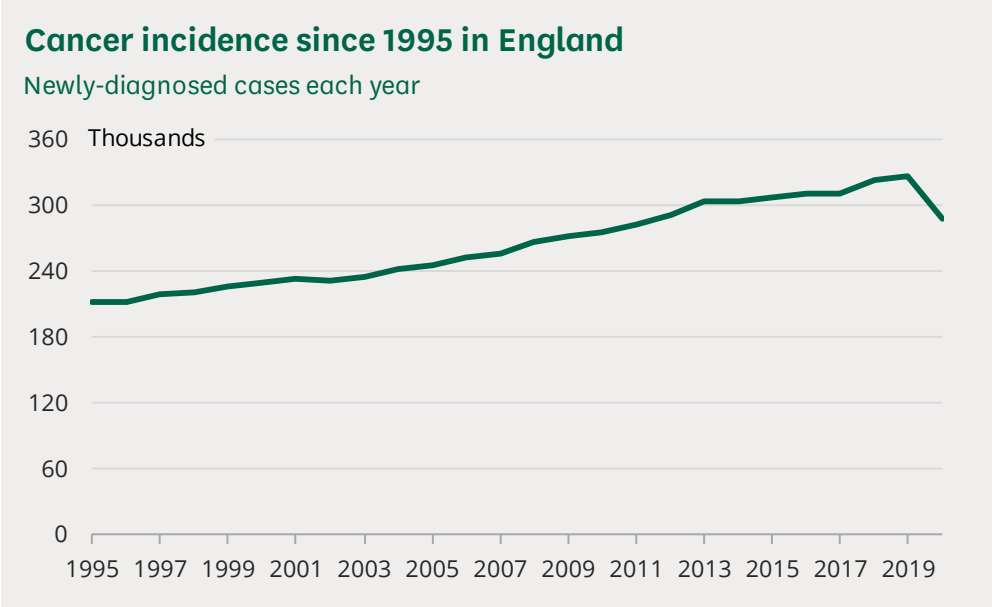
Cancer and the Covid-19 pandemic

Figures reported from 2020 onwards should be treated with caution. In many cases, incidence and deaths from cancer were reported to be lower during 2020 and parts of 2021. However, the reduction in reported new cases was likely influenced by the pandemic's impact on cancer testing and diagnostic services.

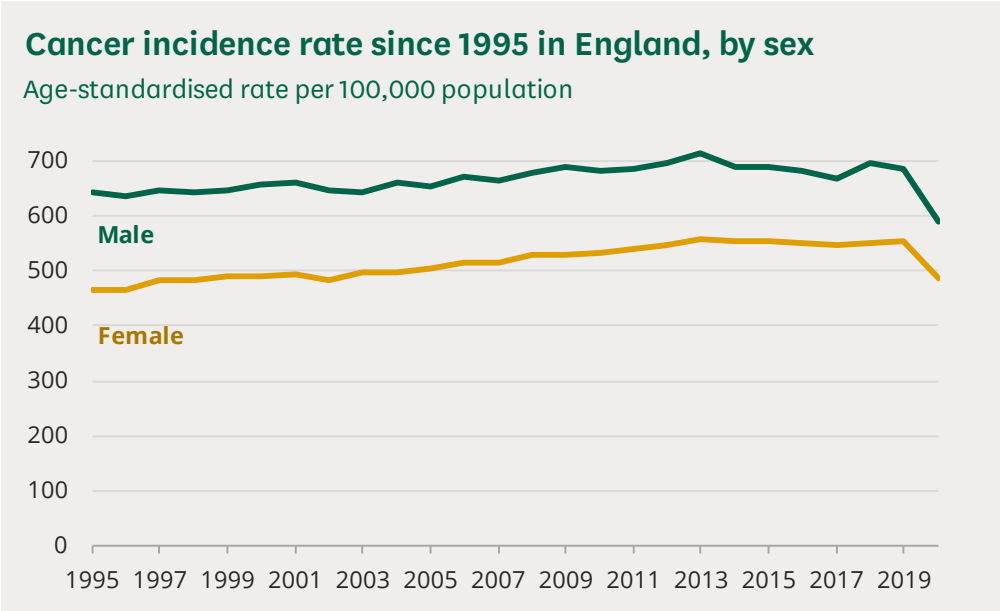
The impact of the coronavirus pandemic on cancer services has been researched and reported by a number of UK organisations, for example, Cancer Research UK and the Nuffield Trust.

1 Cancer diagnoses

There were 288,753 new cases of cancer diagnosed in England in 2020. The first chart below displays annual data since 1995, showing a steady increase until 2020. Incidence refers to how many people get cancer in a given year.



This trend can be partly explained by the growing and ageing of England's population. The chart below shows the age-standardised cancer incidence rate, which is the number of new cases each year relative to the size and age of the population. Rates rose slowly between 2005 and 2013. Since then there has been little change. In 2020 rates fell, which is likely to be due to the Covid-19 pandemic.



Source: NHS Digital, Cancer Registration Statistics, England 2020, Incidence data tables, Table 5

More men than women are diagnosed with cancer each year. In 2020, the age-standardised incidence rate for men was 21% higher than for women. This is a slightly smaller gap between the sexes than recorded in previous years.

The female incidence rate rose by 20% between 1995 and 2013, while the male incidence rate rose by 11%.

Types of cancer

Around half of cancers fall into four categories. Among women, breast cancer, lung cancer and colorectal cancer account for 52% of cancers diagnosed. Among men, prostate cancer, lung cancer and colorectal cancer account for 50% of cancers diagnosed.

The table below shows the twelve most common cancers diagnosed in 2020 in England broken down by sex.

Most common cancers, for each sex
Newly-diagnosed cases in England, 2020

Male

Cancer type	Number	Percent of total
Prostate	36,016	24%
Lung	19,161	13%
Colorectal	19,010	13%
Bladder	6,391	4%
Skin	6,317	4%
Non-Hodgkin lymphoma	6,140	4%
Kidney	5,743	4%
Lip, oral cavity and pharynx	5,322	4%
Oesophagus	5,043	3%
Pancreas	4,853	3%
Leukaemia	4,619	3%
Liver	3,546	2%

Female

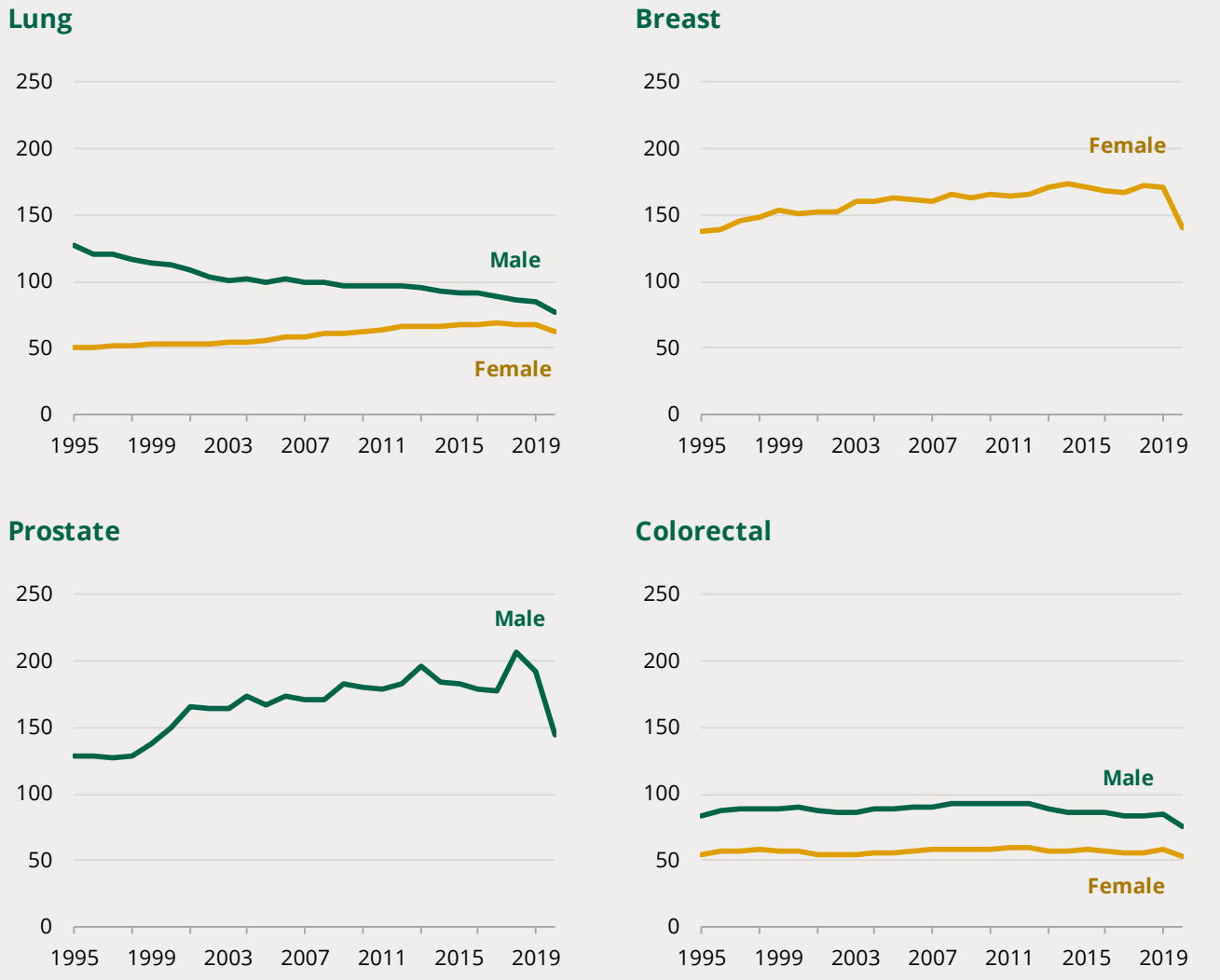
Cancer type	Number	Percent of total
Breast	39,871	28%
Lung	18,076	13%
Colorectal	15,395	11%
Uterus	7,701	5%
Skin	6,160	4%
Ovary	6,111	4%
Non-Hodgkin lymphoma	4,570	3%
Pancreas	4,515	3%
Kidney	3,254	2%
Leukaemia	3,029	2%
Lip, oral cavity and pharynx	2,637	2%
Cervix	2,371	2%

Source: NHS Digital, Cancer Registration Statistics, England 2020, Cancer Diagnoses (incidence) data tables, Table 2

The charts below show trends in diagnosis rates for the most common cancers.

Trends in incidence for selected cancers

Age-standardised diagnosis rate per 100,000 population, by sex, England



Note: The age-standardised rate takes into account changes in the size and age structure of the population over time.
Source: NHS Digital, Cancer Registration Statistics, England 2020, Cancer Diagnoses (incidence) data tables, Table 5

Between 1995 and 2019, lung cancer incidence fell by 33% among men, but rose by 32% among women. The rate of men diagnosed with lung cancer was around 25% higher than among women in 2020. This gap was much narrower than in previous decades; in 1995, the rate among men was two and a half times as high as in women.

From 1995 to 2019, breast cancer incidence among women rose by 25%.[1] In 2020, recorded breast cancer incidence was 18% lower than the previous

[1] Breast cancer does occur in men but is around 120 times less common. Male breast cancer trends are not included on the chart.

year. Prostate cancer incidence rose by 49% between 1995 and 2019. In 2020 rates were 25% lower than the previous year. Colorectal cancer rates have changed little since 1995 but fell by 10% in 2020. The rate amongst men was 45% higher than amongst women in 2020.

How age and sex affect cancer rates

Cancer is more common among older people. The chart below shows incidence rates by five-year age groups and by sex in 2020.

A woman aged 80-84 was 17 times more likely to be diagnosed with cancer than a woman aged 30-34 in 2020.

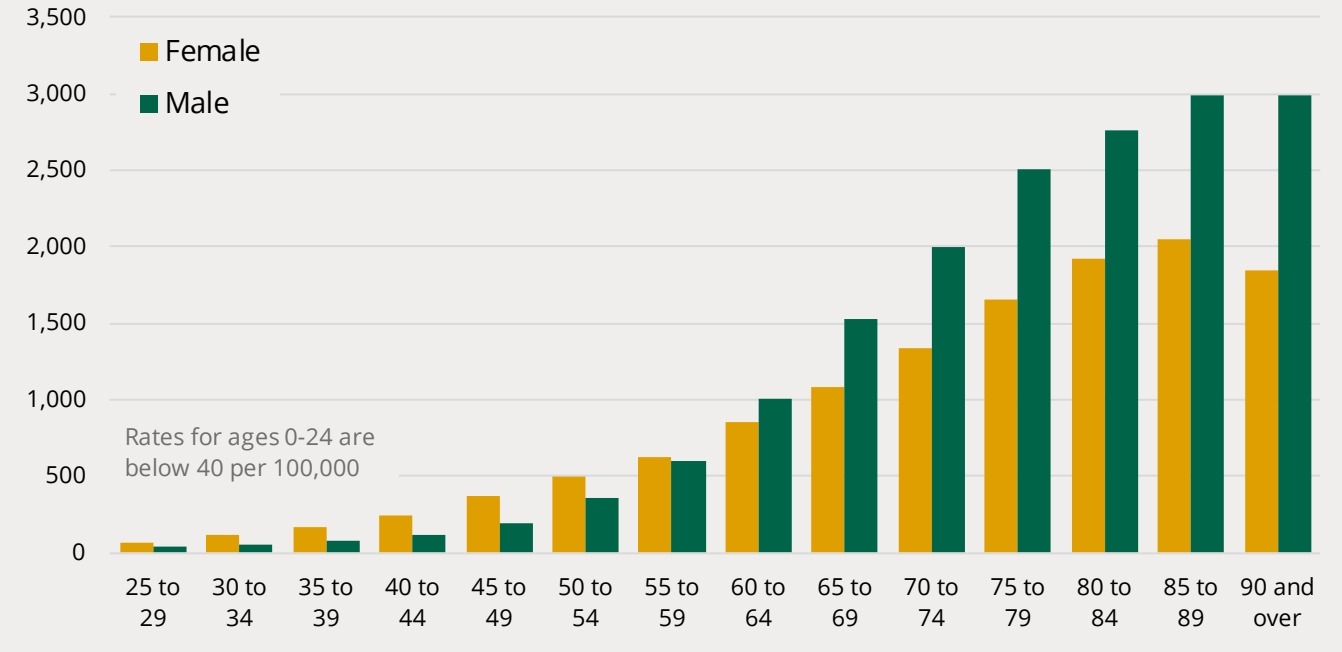
A man aged 80-84 was 50 times more likely to be diagnosed with cancer than a man aged 30-34.

Cancer is more common among women than men between ages 15 and 59. Among older age groups, cancer is around 50% more common among men than women.

Common cancers that mainly affect women, such as breast and cervical cancer, are more likely to develop in younger people than common cancers that affect men (such as prostate cancer).

Cancer incidence rate by age and sex, England, 2020

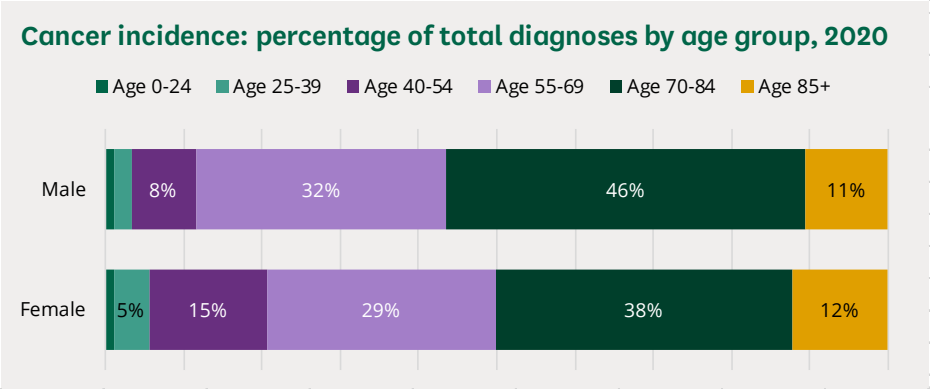
Age-specific rate per 100,000 population



Source: NHS Digital, Cancer Registration Statistics, England 2020, Cancer Diagnoses (incidence) data tables, Table 2

The chart below shows a percentage breakdown of cancer cases by age group and sex in England. Most cancers are diagnosed in people aged over 70.

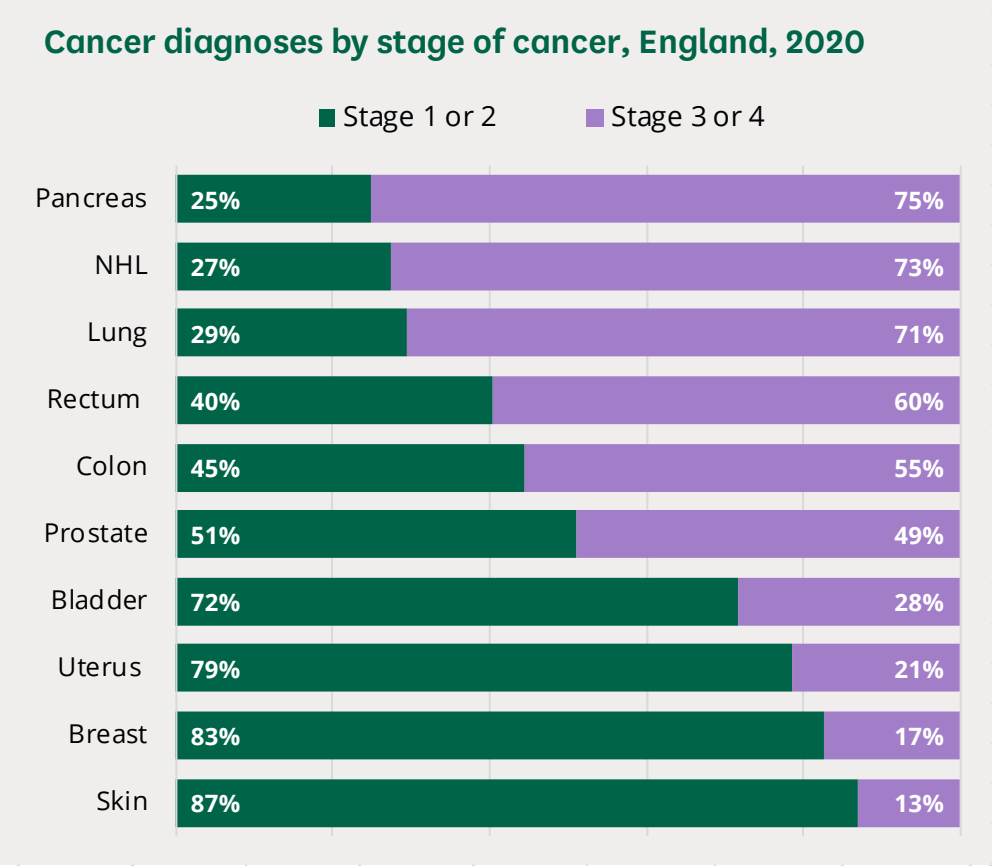
Of men diagnosed with cancer, 57% are aged 70+, compared with 50% of women. Of women diagnosed with cancer, 21% are aged 0-54, compared with 11% of men.



Source: NHS Digital, Cancer Registration Statistics, England 2020, Cancer Diagnoses (incidence) data tables, Table 2

Cancer stage at diagnosis

Cancer stages are described by the size of a tumour and how far it has spread.[2] The chart below shows what stage common cancers were diagnosed at in 2020. Diagnosis at later stages is associated with lower survival rates.



Note: NHL refers to Non-Hodgkin lymphoma
Source: NHS Digital, Cancer Registration Statistics, England 2020, Cancer Diagnoses (incidence) data tables, Table 3

Seven in eight cases of skin cancer are diagnosed at stage 1 or 2, indicating a lesser progression of the disease before being diagnosed. Diagnosis is also more common at an earlier stage for breast, uterine and bladder cancers.

One in four cases of pancreatic cancer are diagnosed at stage 1 or 2, suggesting that most cases progress to a more serious stage of illness before a diagnosis is made.

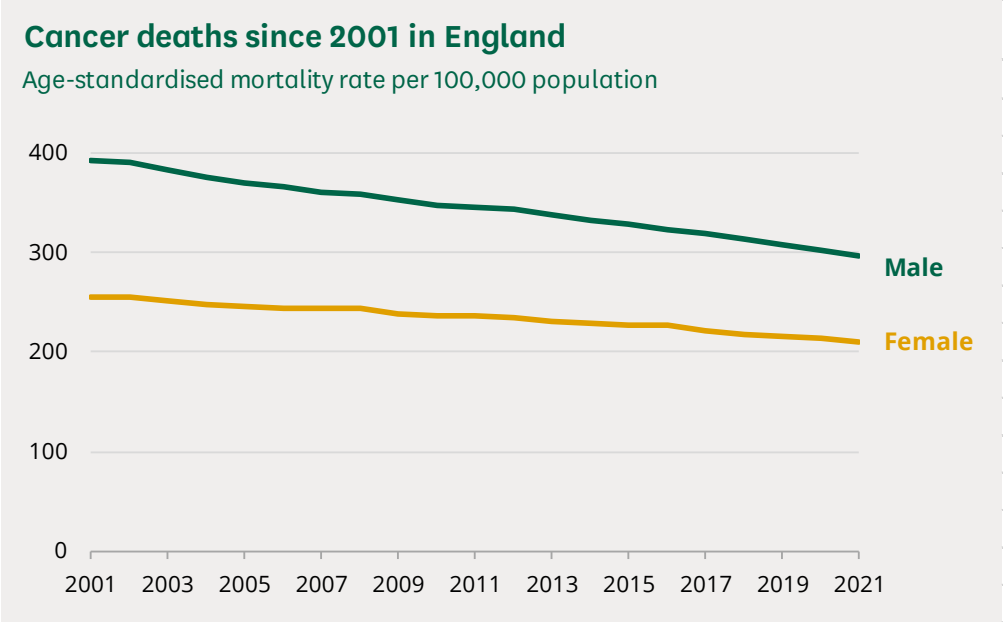
[2] See Cancer Research UK, Stages of Cancer

2 Deaths from cancer

In 2021, 134,802 people died from cancer in England. The number of deaths has increased by 6% since 2001. But after accounting for the fact that England's population is both growing and ageing, the rate of cancer deaths has fallen.

The chart below shows the age-standardised mortality rate from cancer in England since 2001. This represents the rate of deaths per 100,000 population, taking into account changes in the size and age structure of the population over time.

More men die from cancer than women. The male mortality rate is 40% higher than the female rate. However, this gap is smaller than in 2001, when the male mortality rate was 53% higher than the female rate.



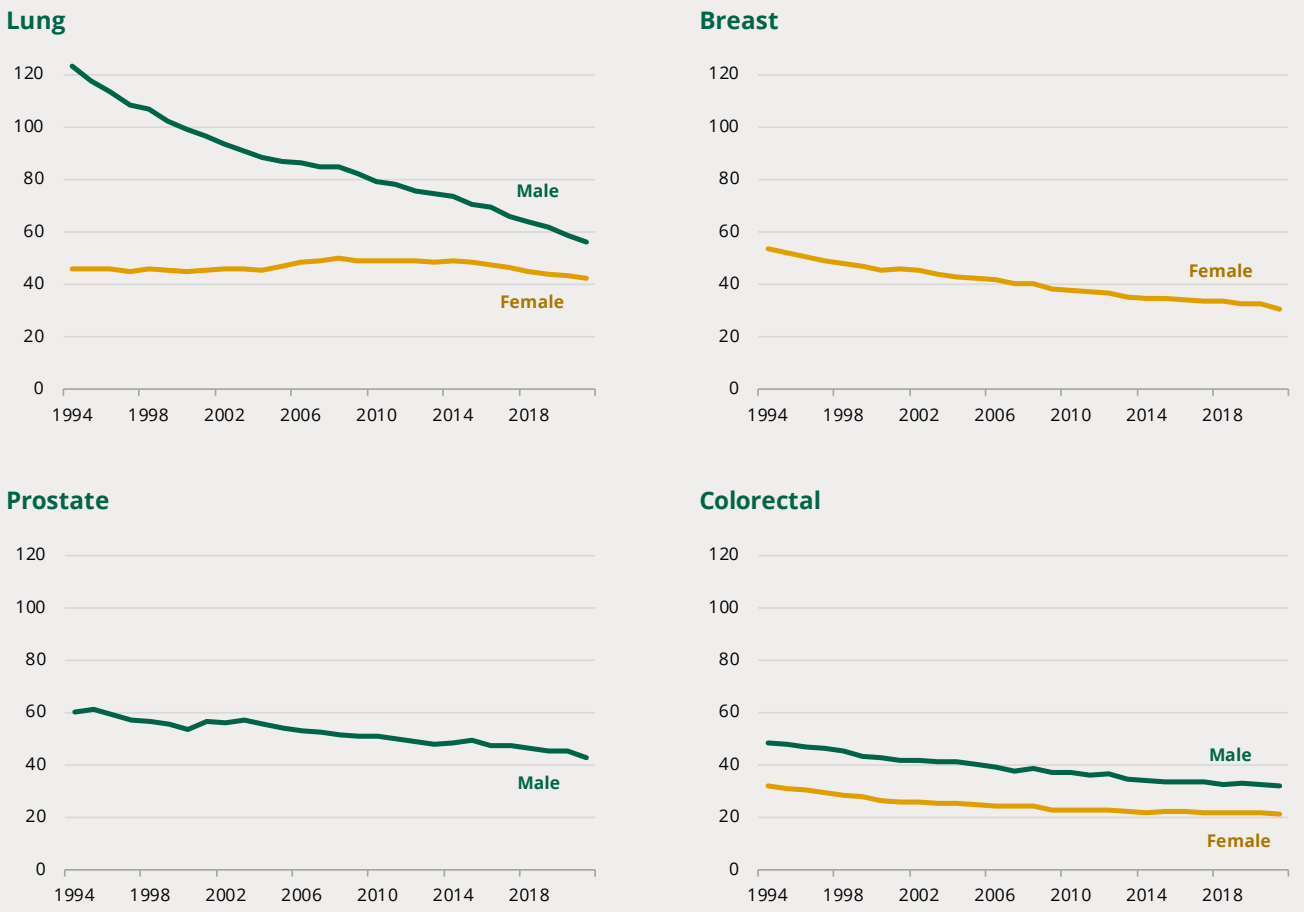
Source: Office for National Statistics NOMIS, Mortality statistics

Cancer is the cause of 27-28% of all deaths in England in a typical year. The percentages were slightly lower in 2020 and 2021 because a larger number of people died than usual (due to the Covid-19 pandemic). However, the number of cancer deaths registered in 2021 was consistent with previous years.

The charts below show trends in age-standardised death rates for types of cancer. The number of people dying from prostate or breast cancer each year per 1,000 head of population is falling. More men die from lung cancer and colorectal cancer than women, and the death rate is also falling for these cancers.

Trends in death rates from selected cancers

Age-standardised mortality rate per 100,000 population, England, 1994-2021



Source: Office for National Statistics NOMIS, Mortality statistics

The lung cancer death rate among men was a third higher than among women in 2021, but this gap had narrowed slightly from the previous year. Since 1994, the rate that men die from lung cancer has halved. However, the female death rate has changed little.

For colorectal cancer, the death rate has fallen by around 33% among both men and women. The male death rate is 48% higher than the female rate, which is a slightly smaller gap than the year before.

The breast cancer death rate among women fell by 43% between 1994 and 2021.[3] The male death rate from prostate cancer has fallen by 29%.

[3] The male death rate from breast cancer is around 0.4 per 100,000 population and has changed little since 2001. This is not shown on the chart.

The risk of dying from cancer grows with age

In 2021, a man aged 80-84 was 18 times more likely to die of cancer than a man aged 50-54, and 211 times more likely than a man aged 30-34. A man aged over 90 was twice as likely to die from cancer than a man aged 80-84.

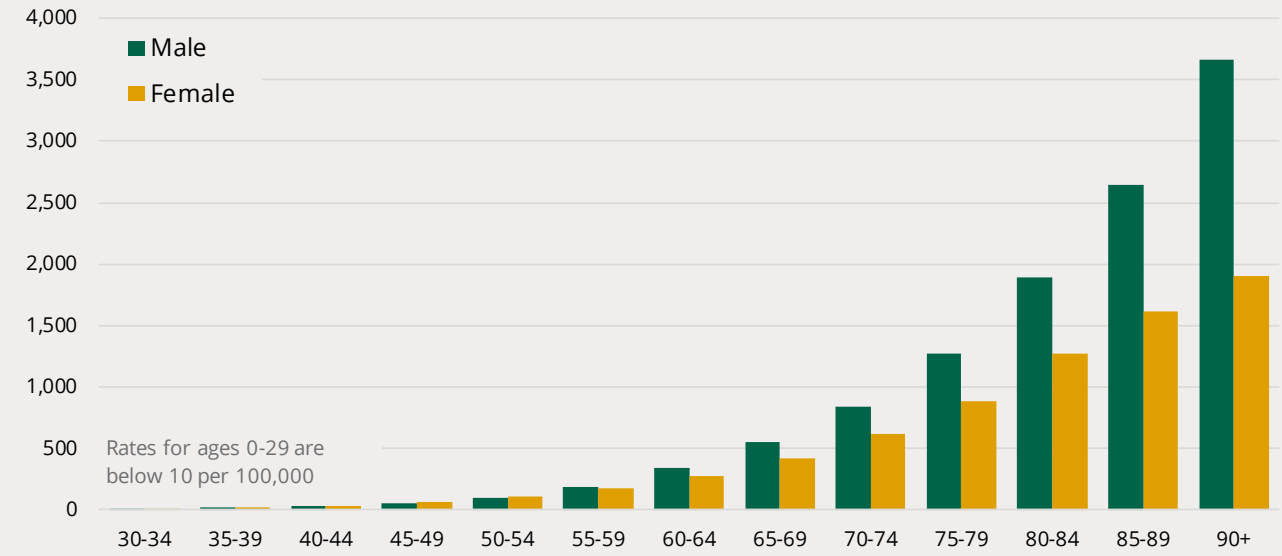
A woman aged 80-84 was 12 times more likely to die of cancer in 2021 than a woman aged 50-54, and 107 times more likely than a woman aged 30-34. The chances of dying from cancer for women aged over 90 were larger than women aged 80-84, but this difference was smaller than in the male population.

The chart below shows the rate of deaths due to cancer broken down by age and sex.

88% of those who die from cancer are aged 60 or above. 56% are aged 75 or above. The mortality rate is higher among women than men between the ages of 30 and 54, and higher among men thereafter.

Cancer deaths by age and sex, England, 2021

Age-specific mortality rate per 100,000 population



Source: Office for National Statistics NOMIS, Mortality statistics

Areas with high deprivation have higher mortality rates

The table below shows the 12 local authorities in England with the highest and lowest mortality rates from cancer among people aged under 75 between 2017 and 2019.

The number of deaths per 100,000 head of population in Manchester was 182 in 2019 but 87 in Westminster.

Under-75 mortality rate from cancer by upper-tier local authority

Age-standardised mortality rate per 100,000 population, 2017-2019

Highest

Local authority	Rate	Lower CI	Upper CI
Manchester	182	173	192
Knowsley	180	167	194
Middlesbrough	175	161	190
Liverpool	169	162	177
Stoke-on-Trent	166	157	177
Blackpool	166	154	180
Halton	166	153	180
Kingston upon Hull	166	155	176
Sunderland	165	156	174
Salford	165	154	176
Oldham	163	152	174
Hartlepool	160	145	176

Lowest

Local authority	Rate	Lower CI	Upper CI
Westminster	87	79	96
Harrow	92	84	100
Kensington and Chelsea	95	86	106
Barnet	99	92	106
City of London	99	63	149
Redbridge	103	95	111
Wokingham	103	94	113
Richmond upon Thames	104	95	113
Surrey	106	102	109
West Berkshire	108	98	118
Bromley	109	102	116
Brent	109	101	117

'CI' = confidence interval. A confidence interval expresses the degree of uncertainty associated with a statistic. Here, the CI's reflect how much random variation there may be in the rate, and indicates that that true mortality risk in an area may lie somewhere between the lower and upper confidence interval. You can use the overlap in confidence intervals as a quick way to check for statistical significance. In general, if the intervals do not overlap there is a statistically significant difference (at a certain level of confidence – usually 95%) whereas if there is an overlap, then the difference is not significant. For example, as the confidence intervals for Manchester and Knowsley overlap, it's not possible to say that one has a higher risk of under-75 mortality from cancer than the other, as some of the difference may be due to random variation.

Source: Office for Health Improvement & Disparities, Public Health Profiles

Mortality rates were highest in the most deprived areas. In 2020, the age-standardised mortality rates in the most deprived quintile[4] of England were 53% higher for men and 55% higher for women than in the least deprived quintile[5].

[4] A 'quintile' refers to one of five groups that areas have been divided into. The 'most deprived quintile' refers to the most deprived fifth of areas in England, according to the Index of Multiple Deprivation (IMD).

[5] Source: NHS Digital, Cancer Registration Statistics, England 2020, mortality data tables. Table 3

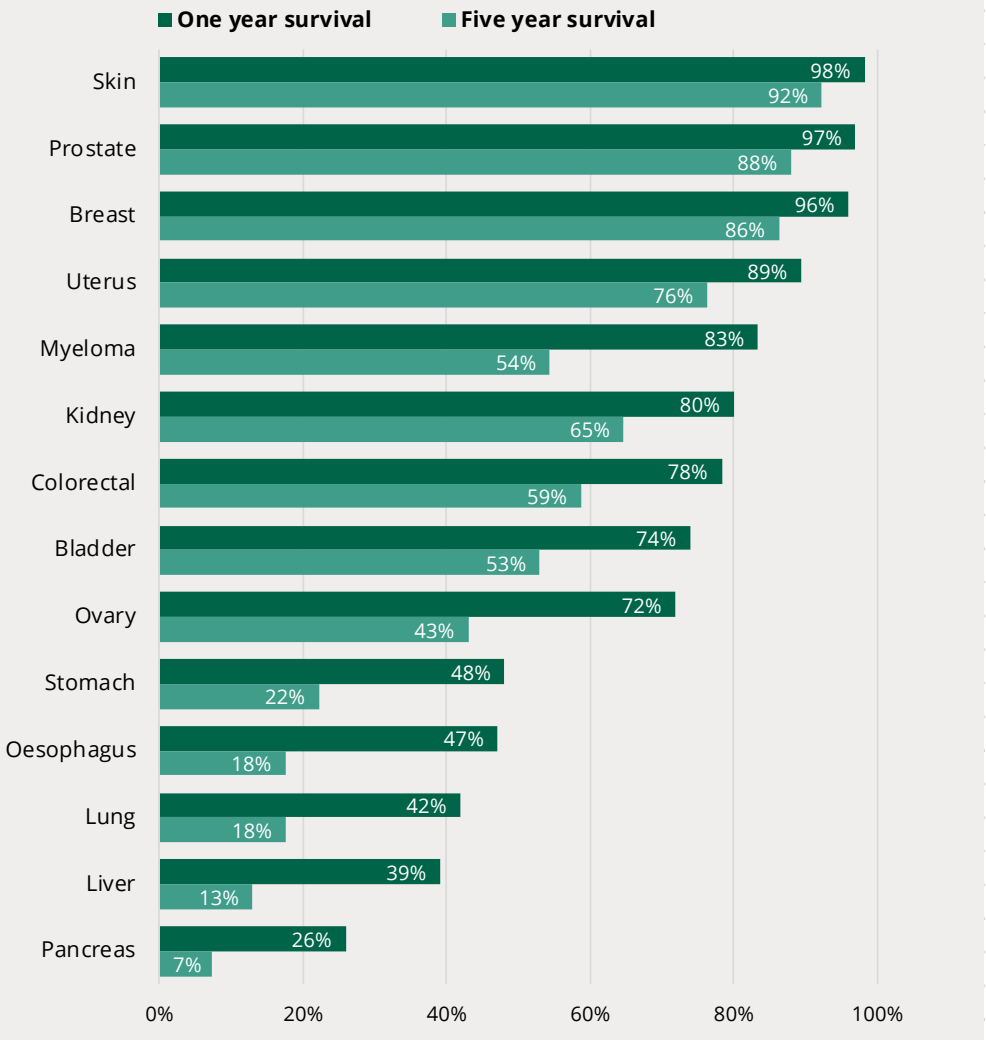
3 Cancer survival rates

Cancer survival varies depending on the type of cancer someone has.

The chart below shows one-year and five-year survival rates for adults diagnosed with selected cancers between 2014 and 2018 in England, followed up to 2019.[6] This refers to the percentage of people diagnosed with a particular cancer who survive for a year or more, or for five years or more after their diagnosis.

Cancer survival in England: one year and five years after diagnosis

Patients (aged 15-99) diagnosed in 2014-2018, followed up to 2019, England



Source: Public Health England, Cancer survival in England for patients diagnosed 2014-18, Adult cancer data tables, Table 3.

[6] Data is available for 2020 but not for all cancer types, so the 2019 data is used. Most figures are similar.

Someone diagnosed with breast, prostate or skin cancer had more than 95% chance of surviving for one year after diagnosis. However, less than 50% of people with stomach, oesophageal, lung, liver, and pancreatic cancer survived for one year after diagnosis.

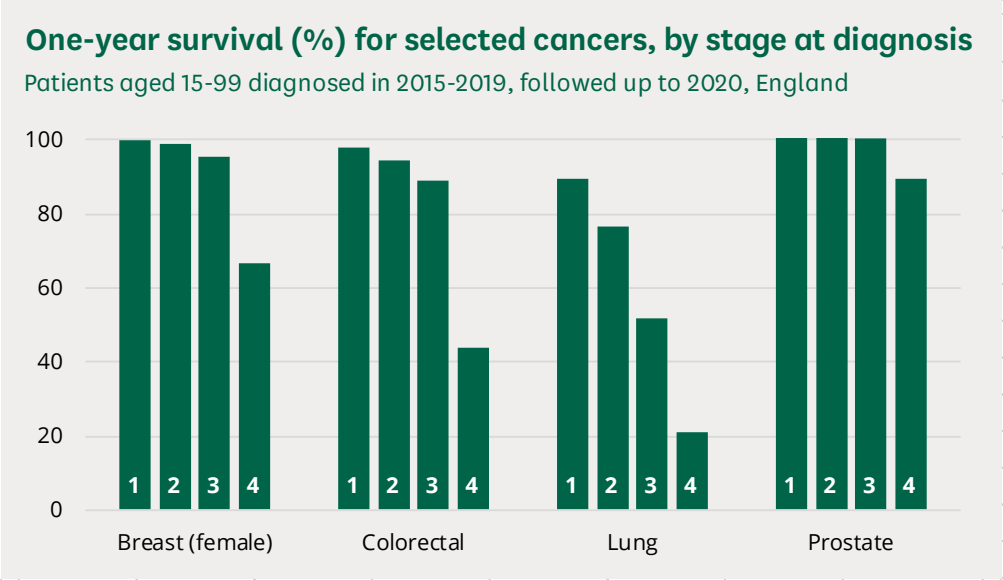
For those with breast, prostate and skin cancers, there was an 85% chance of surviving for at least five years after diagnosis. This was 20% or below for people with oesophageal, lung, liver and pancreatic cancers

Survival by stage of cancer at diagnosis

Cancer survival rates are lower when the cancer is at an advanced stage when diagnosed[7]. The chart below looks at common types of cancer in England and shows one-year survival rates by stage of diagnosis.

When diagnosed at stage 1, there was close to 100% chance that someone with breast cancer will survive for one year. However, when diagnosed at stage 4, this falls to 67%.

For lung cancer, people diagnosed at stage 1 had a 90% chance of surviving for one year. This fell to 21% when diagnosed at stage 4.



Source: NHS Digital, Cancer survival in England for patients diagnosed between 2015 and 2019, and followed up to 2020, Adult cancer survival data tables, Table 2.

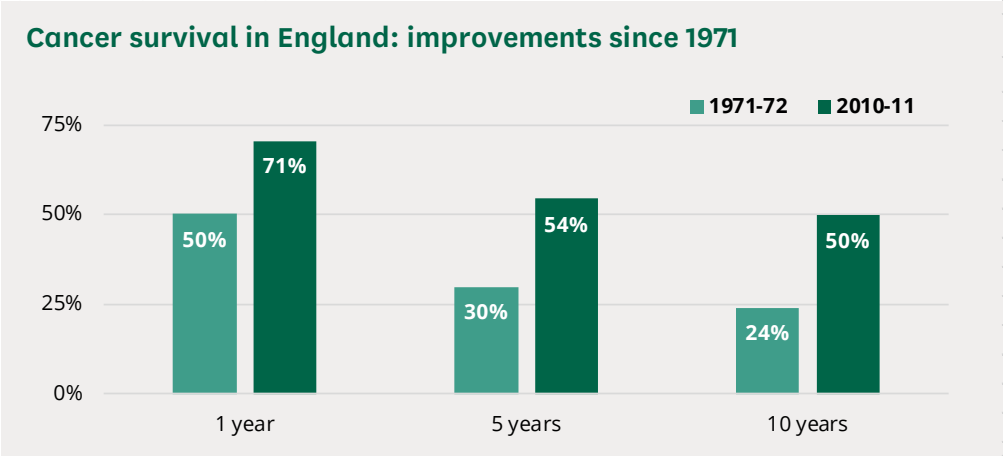
[7] See Cancer Research UK, Stages of Cancer

Historical comparisons

Ten-year survival rates for people with cancer rose between 1971 and 2011.

The chart below shows the improvement in survival rates for cancer between 1971/72 and 2010/11 in England.

Over this forty-year period, the one-year survival rate rose from 50% to 71%, the five-year survival rate rose from 30% to 54%, and the 10-year survival rate rose from 24% to 50%.



Source: ONS, 2016, How do survival estimates compare for common cancers?

The largest improvements in one-year survival over this period were for multiple myeloma (rising from 37% to 77%), leukaemia (34% to 69%) and non-Hodgkin lymphoma (50% to 80%).

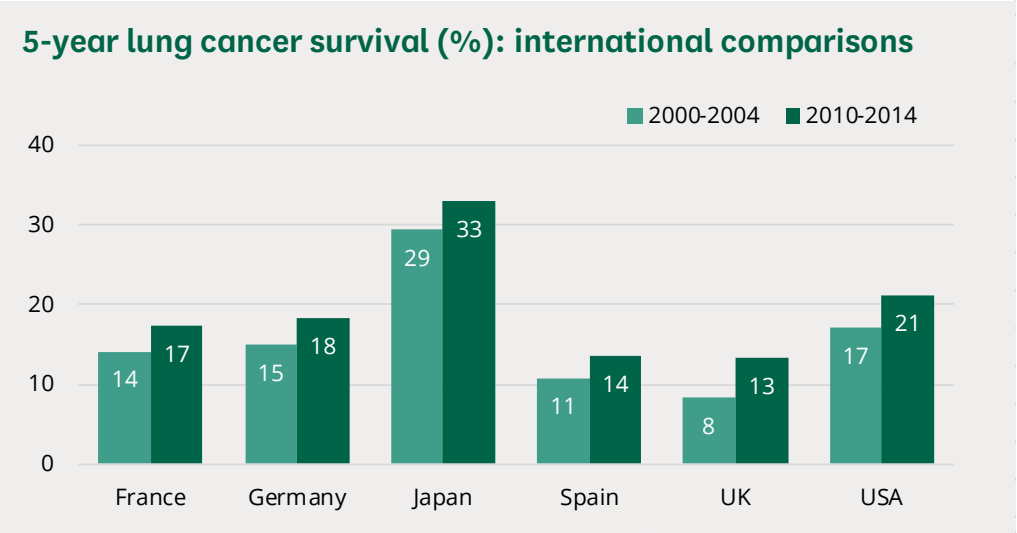
The smallest improvements were for larynx cancer (81% to 85%) and cervical cancer (74% to 83%).

International comparisons of cancer survival

Cancer survival rates in the UK are lower than in some other countries.

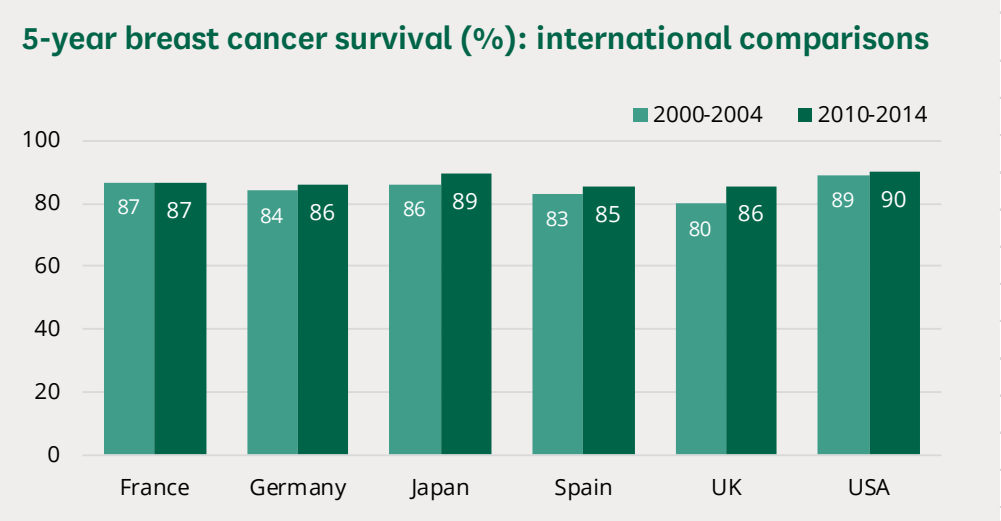
The charts below show data from the OECD comparing selected countries for two time periods: 2000-2004 and 2010-2014.

The rate of surviving for five years after being diagnosed with lung cancer in the UK was lower (at 13%) than the USA (21%), France (17%) and Germany (18%).



OECD, Health Care Quality Indicators

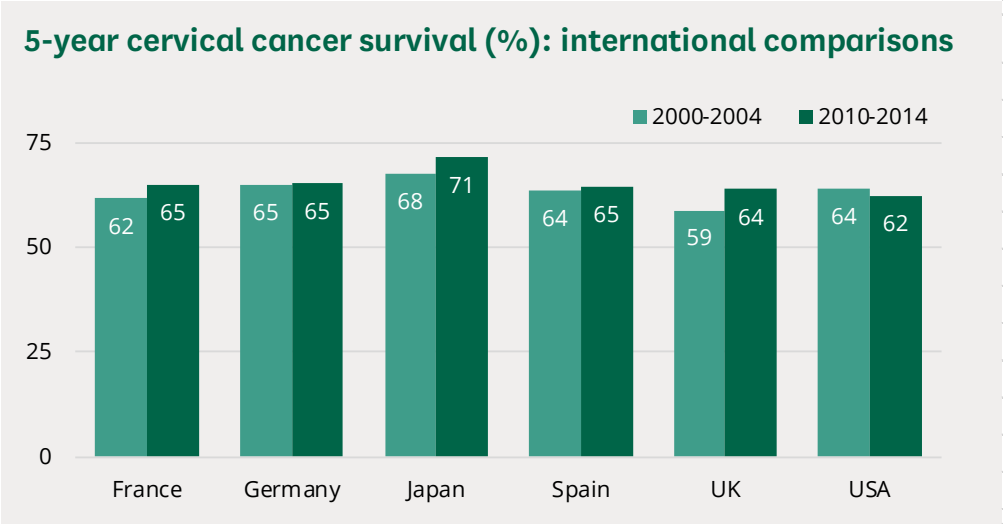
The UK's five-year breast cancer survival rate was below the five countries shown in 2000-2004, but had improved to be similar by 2010-2014.



OECD, Health Care Quality Indicators

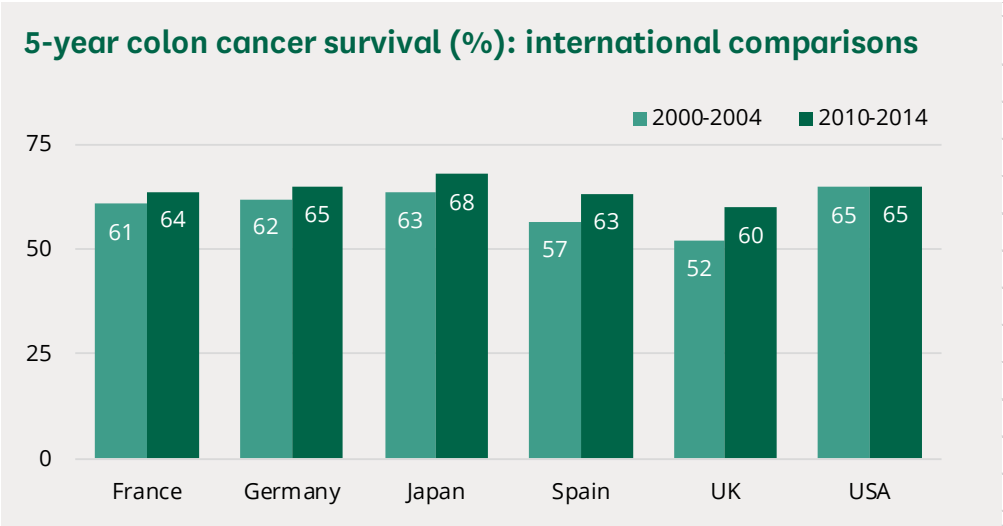
The rate of surviving for five years after a cervical cancer diagnosis in the UK was lower than in the other countries shown between 2000 and 2004.

By 2010-2014 it was similar to Spain, Germany, France and the USA, but lower than in Japan.



OECD, Health Care Quality Indicators

For colon cancer, UK five-year survival rates made a larger improvement over this period than the five other countries shown. However, the UK's rate remained lower than France, Germany, Japan, Spain or the USA.



OECD, Health Care Quality Indicators

International comparisons of cancer survival rates are complicated because different methodologies are used by cancer registries in different nations.

However, there are some projects that provide meaningful comparisons by ensuring that data is collected and analysed in a comparable manner. One such project is the CONCORD programme led by the London School of Hygiene & Tropical Medicine. The OECD use data from the CONCORD programme for their estimates of five-year survival from breast, cervical and colorectal cancer.

The other major international programme studying cancer survival is the EUROCARE (EUROpean CAncer REgistry-based study on survival and CARE of cancer patients) study. EUROCARE is a cancer epidemiology research project on survival of European cancer patients based on a collaboration between

cancer registries from 31 European countries. A summary its latest data is available online: EUROCARE Cancer survival summary slides.

4 Cancer and the NHS

Waiting times for appointments and treatment

Around 300,000 people receive their first treatment for cancer each year in England's NHS. Cancer services are subject to waiting time standards. Some of the following data on waiting times is reproduced from our briefing on NHS Key Statistics.

Urgent GP referrals for suspected cancer

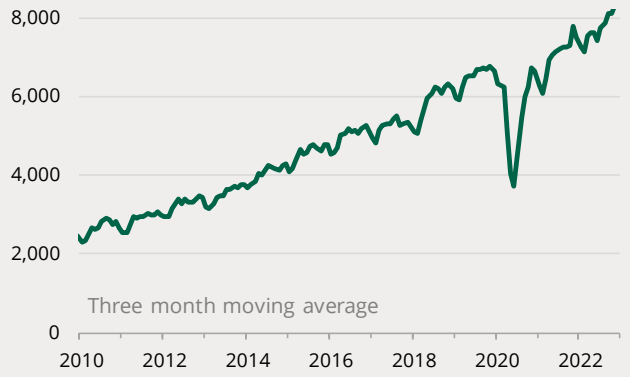
GPs can urgently refer patients to a consultant if they suspect the patient has cancer.

The NHS target is that 93% patients should have their first consultant appointment within two weeks of referral. This target was almost always met until 2018 but has not been met consistently since then.

Performance remained stable during the early part of the Covid-19 pandemic. However, it fell from August 2020 onwards and in recent months has been at its lowest level on record, falling to 73% of patients in September 2022 before rising to 79% in November.

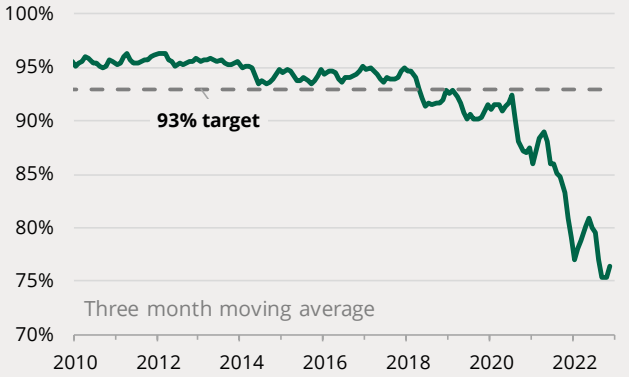
Urgent GP referrals with suspected cancer have more than doubled in the last decade

Average number of referrals per day in England



Performance on the 2-week cancer referral waiting time target has fallen to record lows

% waiting under 2 weeks from referral to consultant appt



Source: NHS England, Cancer Waiting Times, National time series with revisions, Monthly Data, 1st table.

The number of urgent GP referrals has more than doubled over the past decade. In July 2022 there was an average of 7,700 urgent referrals with suspected cancer each day, compared with 2,800 per day in July 2010. Referrals fell sharply during the first national lockdown in 2020 – in June 2020 there were 43% fewer referrals than in June 2019. However, since then referrals have continued to rise. In November 2022, there were 8,300 daily referrals, a record high, and 22% higher than the figure for November 2019.

First treatments for cancer after an urgent GP referral

When a person is diagnosed with cancer after an urgent GP referral, the target is that they receive their first treatment within 62 days (two months) of the initial GP referral. This is a key measure of cancer waiting times and it is expected that 85% of patients should be treated within this time frame.

This target has not been met since 2015, and performance has been below 80% since 2018.

Performance declined in 2018 and 2019 before a further fall after the initial stages of the Covid-19 pandemic. In October 2022, 60% of patients were treated within 62 days of an urgent GP referral, this rose very slightly in November.

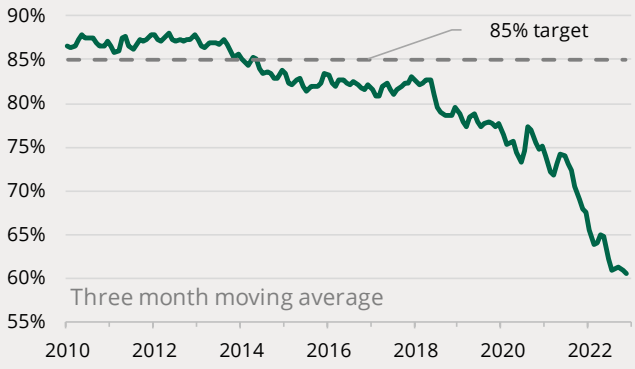
The charts below show trends on this measure for waiting times and the number of people treated.

Cancer treatments after GP referral have increased by 50% over the past decade

Average number of treatments per day in England

Around 60% of cancer patients are treated within 62 days of referral - the target is 85%

% waiting less than 62 days from GP referral to treatment



Source: NHS England, Cancer Waiting Times, National time series with revisions, Monthly Data, 7th table.

During the first Covid-19 lockdown, the number of treatments fell by 42% in May 2020 compared to the previous year. However, the number of treatments after urgent GP referral has been mostly at pre-pandemic levels since September 2020.

Waiting lists and backlogs

Most data on cancer waiting times focuses on the time waited by those on a course of treatment, measured from the point of starting. This means that data is not routinely published on how many people are waiting for their treatment to begin (waiting lists or "backlogs").

However, since the coronavirus pandemic, NHS England has begun to publish data showing the backlog of patients who are waiting over 62 days (two months) for treatment after an urgent GP referral with suspected cancer. The chart below shows trends on this measure.

Backlog of patients waiting over 62 days for cancer treatment after an urgent GP referral

Source: NHS England, Management information on cancer: 62 day-wait backlog.

In early March 2020, the backlog of patients waiting over 62 days for cancer treatment was around 11,000. This rose to 34,000 by late May 2020.

The backlog gradually fell back to around 16,000 by December 2020. After rising during the early 2021 national lockdown, the backlog stabilised at around 15,000 until June 2021.

The backlog rose in August and September, plateaued, and then rose in early January 2022. After falling during the summer, the backlog rose to 33,500 in October 2022 and then fell to 27,500 by December – over double the pre-pandemic figure.

Target for first treatments

The NHS target is that 96% of patients should receive their first treatment within 31 days of a decision to treat. This covers all routes to diagnosis, unlike

the 62-day target discussed above which only includes those urgently referred by their GP.

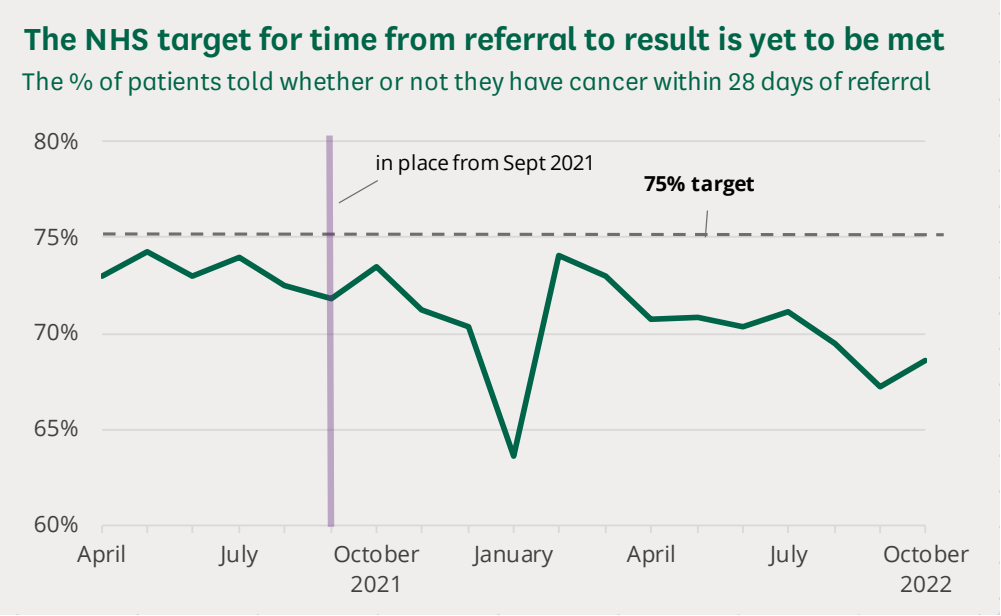
This target was always met until 2019, when it was breached in five out of twelve months. As of October 2022, the target had not been reached since December 2020 and has been under 93% each month since April 2022.In 2019/20, 315,000 people in England had a first treatment for cancer. This was 32% higher than nine years earlier in 2010/11.

Cancer treatments fell during the pandemic – in May 2020 there were around two thirds of the number of treatments there were in May 2019. As of October 2022, the number of treatments has risen close to its pre-pandemic level.

Faster diagnosis

From April 2021 a new standard was introduced measuring the waiting time between an urgent referral and a patient being told either they have cancer, or cancer is definitively excluded.

The target, applying from September 2021, is that 75% of patients should be told within 28 days of referral. This standard has not yet been met. In October 2022, 69% of patients were given a result within 28 days of referral. This can be seen in the chart below.



Source: NHS England, Cancer Waiting Times, National time series with revisions, Monthly Data, 10th table.

As mentioned, the Covid-19 pandemic has had an impact on cancer diagnosis and treatment services. The NHS has published the Cancer services recovery plan which sets out how provisions for diagnosis, treatment and follow up care are to be restored.

Cancer screening in England

The UK Government has several cancer-screening programmes.[8] Currently, the NHS provides screening to groups at high risk of bowel cancer, cervical cancer and breast cancer.[9] Screening looks for indicators of these types of cancer such as abnormal cells, the removal of which can prevent the chance of cancer developing.

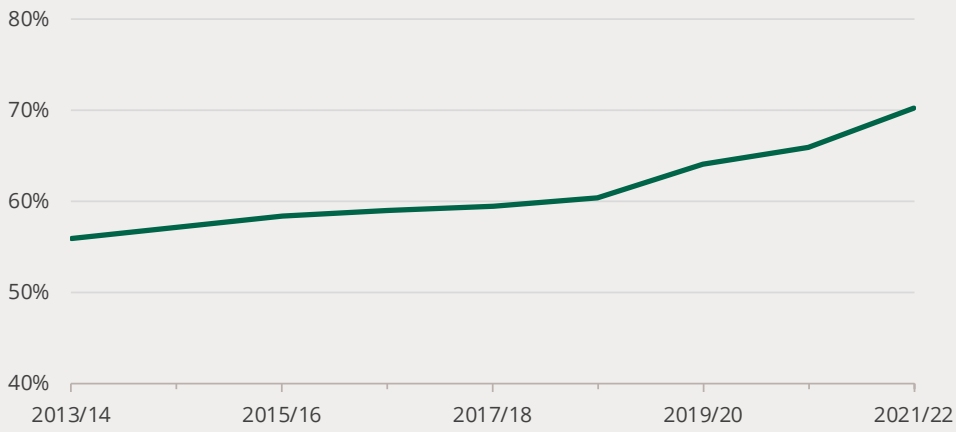
Bowel screening

Bowel cancer screening is offered to men and women between the ages of 60 and 74 every two years.[10] Those over the age of 74 are not invited but can request screening.

In England, the coverage of bowel cancer screening has been increasing over the last decade. This means that a higher proportion of people aged 60 to 74 are being screened for bowel cancer each year within the appropriate time, as illustrated in the chart below.

The proportion of people screened for bowel cancer in England is increasing

% of persons aged 60-74 screened in the last 30 months (2.5 year coverage)



Source: Office for Health Improvement and Disparities, Cancer services: persons, 50-64, screened for bowel cancer in the last 30 months.

In 2019/20, of the 2.9 million people screened for bowel cancer, 59,000 required further testing and 4,200 were eventually diagnosed with cancer[11].

[8] GOV.UK, Health and Social Care, Population screening programmes
[9] NHS, NHS Screening
[10] Public Health England, Bowel Cancer Screening Programme overview
[11] OHID, NHS Screening Programmes in England: 2019-20

Cervical screening

Cervical screening (a smear test) is automatically offered to people registered as female with their GP. The first invitation is sent at 24½ years of age. Women[12] aged 25-49 receive an invitation every three years and women aged 50 to 64 receive an invitation every five years.[13]

Coverage for cervical screening refers to the proportion of who have received a test within the recommended time-period. This is within 3.5 years for those aged 25-45 and 5.5 years for those aged 50-64.

Total coverage has fallen from the start of 2019, when it was 72.5%, to 69.7% at the start of 2022.[14]

Coverage varies across different regions in England and has consistently been lowest in the North West and highest in London over the last four years.

In the first quarter of 2022, approximately 16 million people in England were eligible for cervical screening. Of these people, 11 million had been screened within the appropriate period.

Uptake differs between the eligible age groups. In the first quarter of 2022, 67% of the eligible population between 25 and 49 had been screened within the recommended period. By comparison, 75% of the eligible population aged 50 to 64 had been screened in the recommended period.

Breast screening

In England, breast screening is currently offered to women aged 50 to 71,[15] who are invited for screening every three years.[16]

Breast screening coverage fell slightly each year from between 2011 and 2020, from 77.2% to 74.2% of women. Between 2020 and 2021 coverage fell by 10 percentage points, to 64.2% of women.

Coverage for breast screening also varies by region. For 2020-21, coverage was the lowest in London[17].

In 2019-2020, 2.1 million women were screened for breast cancer. Of these, 17,800 were diagnosed with cancer following further testing.[18]

[12] Note: Patients registered as female with their GP
[13] Public Health England, Cervical Screening Programme overview
[14] NHS Digital, Cervical Screening Programme statistics, coverage statistics, DataTable_LA_Q1
[15] Public Health England, Breast Screening Programme overview
[16] Public Health England, NHS breast Screening: helping you decide, 2021
[17] NHS Digital, Breast Screening Programme, England 2020-21, Table 1
[18] OHID, NHS Screening Programmes in England: 2019-20

5 Other statistics and sources

Many other cancer statistics are available. This briefing provides only an overview. Selected links to other statistics and sources are given below.

Devolved nations

Data for Scotland can be found on the Public Health Scotland site.

Data for Wales can be found on the Welsh Cancer Intelligence and Surveillance Unit site.

Data for Northern Ireland can be found on the Northern Ireland Cancer Registry site.

Other sources

Both the NHS CancerData site and the National Cancer Registration and Analysis Service site collate a wide range of statistics and sources.

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