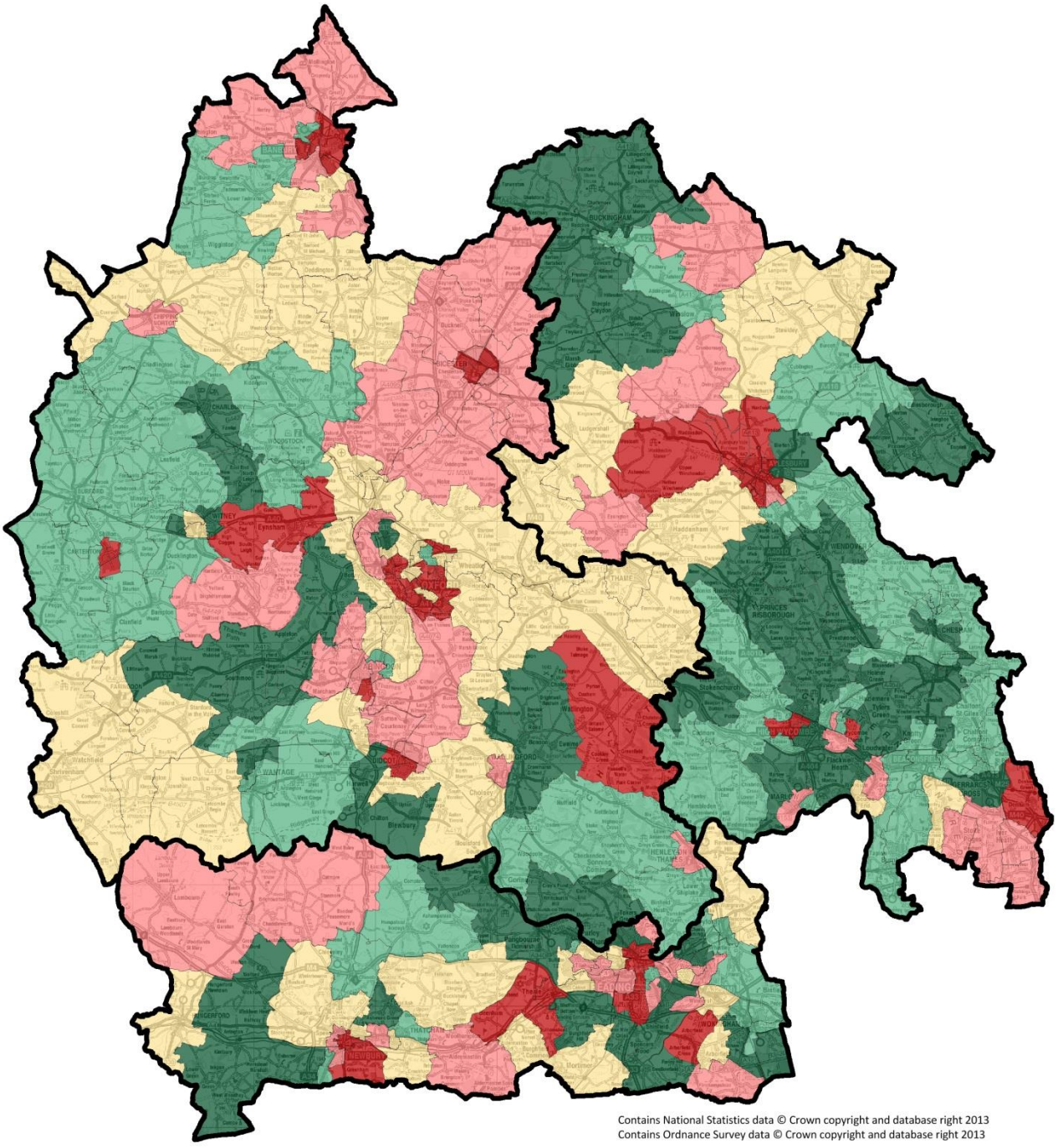
Incidence of lung cancer



Produced by Buckinghamshire Public Health (publichealth@buckscc.gov.uk), May17

Incidence of lung cancer by Ward, SIR
Population-weighted quintiles

- Q1: 20.1 - 57.0
- Q2: 57.3 - 68.3
- Q3: 68.6 - 81.3
- Q4: 81.5 - 95.2
- Q5: 95.4 - 163.1

Population-weighted quintile estimates from ward-level data in Local Health.

Quintile thresholds are adjusted to include all wards with tied indicator values. Wards are allocated to the 'better' quintile.

Incidence of lung cancer

The worst quintile in BOB includes 49 wards (out of 293 wards with recorded data), and makes up 19.8% of the total population. Buckinghamshire has 13 wards in the worst quintile, and the worst ward in BOB, and these are;

- Walton Court & Hawkslade (**293**) – worst ranked in BOB
- Southcourt (289)
- Elmhurst (283)
- Riverside (279)
- Central & Walton (271)
- Watermead (267)
- Gatehouse (265)
- Denham (259)
- Micklefield (257)
- Waddesdon (254)
- Coldharbour (249)
- Sands (247)
- Oakridge and Castlefield (246)

[Rank in brackets, where 293 is worst in BOB]

The population in each quintile, for this indicator, is as follows;

Quintile	Population	#Wards
Q1	335,759	62
Q2	338,118	73
Q3	330,425	55
Q4	329,558	54
Q5	336,232	49
Total	1,670,092	293

For this indicator 89,519 people in Bucks are in quintile 5 (27% of the quintile); this is lower than expected.

Notes on the indicator

No wards in BOB were suppressed for this indicator.

Methodology/Suppression: No suppression required. Expected number of new cases of lung cancer (ICD10 C33-C34) calculated by applying age-sex-specific incidence rates for England in 2010-14 to each area's population. Ratios calculated by dividing the observed total number of new cases in the area by the expected number and multiplying by 100.

Ward figures are **estimated** from the MSOA level data. Each MSOA is made up of a number of constituent Output Areas, and each of these has been assumed to have the same level of incidence as their 'parent' MSOA. For each Output Area, a numerator and denominator has been estimated by distributing the numerator and denominator of the MSOA, weighted by the relevant population. The numerators and denominators of the Output Areas were then aggregated to wards, in order to calculate the indicator for these geographies.

Definition: Standardised incidence ratio for lung cancers.

Source: English cancer registration data from the National Cancer Registration and Analysis Services' Cancer Analysis System (AV2014 CASREF01).