

Information on bowel cancer in New Zealand

This is a summary of the [bowel cancer domain of the Atlas of Healthcare Variation](#). The Atlas is an online tool showing differences in the type and quality of health care people with bowel cancer receive in different district health board (DHB) and regional cancer network (RCN) regions. It is published by the Health Quality & Safety Commission.

The differences that are shown are a good starting point for asking questions about why people may receive different treatment in different DHBs. When these questions are asked it can help DHBs improve their services. We hope this Atlas domain will encourage you to ask questions about how health services for people suffering bowel cancer in New Zealand can improve.

What the Atlas shows

Here are some of the important things we know from the Atlas about bowel cancer in New Zealand. Note that in the Atlas we include people in the DHB where they usually live. This is not always the DHB that provided treatment.

- In a quarter of people the cancer was limited to the place where it started. For one in five people the cancer had spread to distant parts of the body at the time of diagnosis.
- About a quarter of people with bowel cancer were diagnosed following a visit to an emergency department (ED).
- Two-thirds of people with bowel cancer had surgery in a public hospital and on average people stayed in hospital for 10 days after surgery.
- On average one in twenty people died within three months of surgery for bowel cancer. This varied up to two-fold between DHBs.
- More than two-thirds of people were alive two years after being diagnosed with bowel cancer.
- There was wide variation between DHBs in the treatment of rectal cancer before surgery with radiotherapy and up to two-fold variation in surgery that is likely to result in a permanent colostomy for people with rectal cancer.
- Many of the indicators showed variation between ethnic groups and/or age groups. There was wide variation between DHBs for presentation rates at an emergency department (ED) prior to bowel cancer diagnosis for Māori.

About bowel cancer

Bowel cancer is the most commonly reported cancer in New Zealand, with approximately 3000 cases and 1200 deaths each year.

Bowel cancer is the second highest cause of cancer death in New Zealand, but it can be treated successfully if it is detected and treated early.

About the bowel cancer Atlas domain

This Atlas domain shows how DHBs vary in diagnosing and treating people with bowel cancer. It also shows what happens to people's health after they've had bowel cancer. The treatment indicators (surgery, chemotherapy and radiotherapy) include people who were treated in public hospitals, but not those treated in private hospitals.

How do bowel cancer services in New Zealand compare with services in other countries?

The best comparison for the New Zealand data is available from the annual [National Bowel Cancer Audit Reports](#), which cover England and Wales.

More people with bowel cancer are diagnosed after a visit to an emergency department in New Zealand (27 percent, 2009–13) than in England and Wales (20 percent, 2013–14).

The surgery rate for New Zealand bowel cancer patients (63 percent, 2009–13) is the same as the overall England and Wales rate (63 percent, 2013–14).

Survival at three months after surgery was 95 percent in both New Zealand (2009–13) and England and Wales (2009–13). Overall two year survival was 67 percent for both New Zealand (2009–13) and England and Wales (2010–11).

More information

This domain includes indicators for all people with bowel cancer and some indicators for only those people who have rectal cancer.

The indicators come from the Ministry of Health's hospital admission, outpatient, pharmaceutical dispensing and mortality data.

The bowel cancer Atlas used the [Standards of Service Provision for Bowel Cancer Patients in New Zealand](#) as the starting point for the indicators in this Atlas.

The Ministry of Health's national tumour standards describe the services a person with cancer should get in New Zealand. They are used by the DHBs as the benchmarks for high-quality care for different types of cancer and help ensure patients receive timely, good quality care along the cancer pathway.

About the bowel cancer domain: www.hqsc.govt.nz/altas/bowel-cancer.

About bowel cancer health services in New Zealand:
<http://www.health.govt.nz/your-health/conditions-and-treatments/diseases-and-illnesses/bowel-cancer>.