

Answers for Ireland, provided by the Department of Health Ireland

Which are the NCCP priorities with regards to rare cancers?

The 2006 National Cancer Control Strategy recommended that the Health Service Executive (the national health authority) plan their services to meet the needs of patients requiring highly specialised national services. The National Cancer Control Programme was established in the HSE in 2007 to reorganise cancer services to achieve better outcomes for patients. Following its establishment, the Programme initially focussed on the centralisation of cancer care in 8 designated cancer centres.

Where are rare cancer patients treated in Ireland?

Cancer care is centralised in 8 designated cancer centres for a variety of common cancers e.g. breast, rectal, prostate, lung, as well as a smaller number of these centres providing care for patients with relatively uncommon cancers (e.g. brain, pancreas, oesophageal and lung cancer surgery). All designated cancer centres are large general hospitals with established multidisciplinary teams treating cancer patients. Rare cancer patients are treated in designated cancer centres, with the exception of childhood cancers which are carried out in a designated paediatric hospital (Our Lady's Hospital for Sick Children, Crumlin, Dublin). In addition, radiation oncology treatment is located in Dublin, Cork and Galway.

How have these hospitals been identified? Did you use any criteria?

All designated cancer centres are large general hospitals with established multidisciplinary teams treating cancer patients. Factors taken into consideration when selecting a smaller number of these designated cancer centres to treat rarer cancer include (not in order of priority):

- Cancer incidence and projections
- Pre-existing patterns of care, location of recognised clinical expertise
- Pre-existing co-location of critical disciplines where this was relevant e.g. ENT, oral and maxillo-facial surgery, dietetics for Head and Neck cancers
- Evidence base where one existed
- Volume of activity
- Complexity of surgery
- Results of audit; monitoring of key performance indicators
- Advice of leading clinicians in the field
- Geographic access
- Consideration also of requirements of complex benign disease, emergency presentations and/or trauma