

Haemato-oncology: Case for change and clinical benefits

- Liverpool has the worst cancer mortality in the country, due to high prevalence and late diagnosis. It is estimated that there are 321 new cases of blood cancer each year in the city (population 500,000); there are 1,862 people in Liverpool who have been diagnosed with blood cancer in the last 10 years and 218 people in the city die from blood cancer each year.
- Uniting the Royal Liverpool University Hospital and Aintree University Hospital blood cancer services will enable haemato-oncologists to develop the much greater sub-specialisation required to ensure patients continue getting the very best care, specifically targeted to their type of cancer and their own biology.
- Blood cancer patients will be cared for in a bespoke cancer centre, solely focused on cancer care and protected from the pressures of a busy acute hospital with an emergency department. Dedicated beds will be available for patients who need admission. Importantly, however, inpatients will also have rapid on-site access to intensive care and the other specialties provided by the Royal Liverpool University Hospital thanks to the physical links between the two buildings.
- Blood cancer patients who need urgent, out-of-hours care will have the same direct access as those with solid tumours to cancer specialists through the triage service and admissions ward provided in The Clatterbridge Cancer Centre. They will see cancer specialists from the outset. Currently, blood cancer patients who need urgent care generally attend the Emergency Department.
- Teenagers and young adults with cancer will benefit from bringing blood cancer and solid tumour services together within one team. Unlike now, teenagers and young adults (TYA) with blood cancer will have access to dedicated TYA beds in a TYA unit, designed for them and providing greater peer support. Bringing services for teenagers and young adults with blood cancers and solid tumours together will create critical mass that will allow even greater expertise and support.
- Blood cancer patients will have the same access as those with solid tumours to the extensive range of cancer support services provided by CCC, including clinical therapies, psychological support, holistic therapies, and benefits advice. Currently, blood cancer patients in Liverpool are less likely to access this support than the national average (50%, cf 59%).
- Care for blood cancer patients will be much more integrated – at the moment, those who need full body irradiation are transferred from Royal Liverpool University Hospital to The Clatterbridge Cancer Centre and then back again, interrupting their care.
- Integrating blood cancer and solid tumour care will enable clinicians to share expertise and knowledge and provide increased medical cover for all cancer patients in Liverpool.
- Seven-day cancer services will be rolled out more rapidly as there will be greater numbers of cancer doctors and nurses within CCC with the arrival of the blood cancer teams.
- Liverpool will become a hub for academic oncology, cancer research and clinical trials as bringing the different teams together will create a critical mass of staff and patients that makes the city a much more attractive prospect for potential research partners. This will have massive benefits for patients in the city, giving them even greater access to the latest treatments and trials.