WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES BY DEPUTY M.R. HIGGINS OF ST. HELIER ANSWER TO BE TABLED ON TUESDAY 19th FEBRUARY 2013

Question

Will the Minister explain to the Assembly what studies, if any, have been undertaken in Jersey to investigate the incidences of cancer (of all types) found in the Island, explaining:

- (a) how and when they were carried out and their findings;
- (b) the location of ,and explanation for, any cancer 'hot spots';
- (c) what studies, if any, have been undertaken into the effects of pollutants from the Bellozanne Incinerator and their results;
- (d) details of any planned studies?

Answer

a) Since 1996 the South West Public Health Observatory (SWPHO) has produced an annual cancer registration report for Jersey and Guernsey summarising the local cancer incidence data over a three year period. Data comes from the hospital patient administration system and pathology laboratory. This is analysed and audited in line with the UK cancer registry service guidelines. The report provides numbers, rates, relative survival time and some trends for the main cancer groups, as well as comparisons with the South West and Guernsey. Public Health uses this data together with cancer deaths data to monitor the situation in Jersey.

The latest report (2007-09 data) is available on gov.je: Channel Island Cancer Registration Report 2012.

http://www.gov.je/SiteCollectionDocuments/Government%20and%20administration/R%2 0CI%20Cancer%20Registration%20Report%202012%20MC%2013012013.pdf

The next cancer registration report (2008-2010 data) will be produced by SWPHO towards the end of this year.

Public Health's' role is to monitor the health of the population and to identify risk factors for health. They routinely monitor cancer incidence and deaths data and will raise any valid concerns about risk to the health of the community.

Cancer Research UK have shown that a large number of cancer cases could be prevented by known lifestyle and environmental factors, like being a non-smoker, keeping a healthy weight, drinking less alcohol, eating a healthy balanced diet, and reducing or avoiding exposure to sunlight and occupational risk factors. Public Health advice continues to be that by living a healthy life people can reduce their risk of developing cancer.

b) An initial look at the possible clustering of cancer incidence data has been undertaken, using the available cancer registration data, but did not allow for identification of any hot

spots because of incomplete post code information (over 40% missing). Comprehensive post code data (2010 onwards) is now collected on the hospital IT system which should enable analysis in the future. Nevertheless, the health data set only gives us a location at the time of diagnosis; there is no linked information on how long people have lived in an area, where they work or where they have lived in the past. All of these factors are equally important to assess exposure to a potential cancer risk (e.g. a pollutant) for an individual. For example, someone who lived in an area of the UK for 35 years may have been exposed to a cancer risk while living and working there. If the individual then comes to live in Jersey and within 5 years is diagnosed with cancer, their cancer is linked to their Jersey post code, which may not be where they were exposed to the risk factor for that cancer.

See SWPHO Cancer Clusters Factsheet for further general information: http://www.swpho.nhs.uk/resource/item.aspx?RID=9108

c) No specific studies have been undertaken regarding Bellozanne. However, around ten years ago members of the public living around Bellozanne were invited to free health screening by their GP. This included blood screening for heavy metals. In addition staff at Bellozanne have had routine health surveillance and screening as part of T&TS health and safety requirements. This type of information is confidential and is not available for collation by the Health and Social Services Department.

The possibility of carrying out a study was discussed with analyst colleagues in SWPHO. Their expert advice was that it would be extremely hard to prove a link between an environmental effect and any health outcome, especially with the relatively small numbers of cancer cases in Jersey. SWPHO have been unable to show anything conclusive regarding suggested cancer clusters around Hinkley Point power station – (http://www.swpho.nhs.uk/resource/item.aspx?RID=35764) and for this reason were doubtful that we would be able to draw any conclusions one way or the other. Their considered advice was that even if we were to find a higher rate of cancer in the area, proving it was due to the emissions from Bellozanne would be extremely difficult.

d) There is no study planned to look specifically at Bellozanne. As explained above, a full epidemiological study is unlikely to prove anything conclusively regarding emissions and cancer incidence locally.

A report from the SWPHO looking at the main risk factors behind the cancers with the higher incidence rates in Jersey is in its final draft and the MoH will report back on this study in the second quarter or this year. This was undertaken in response to a request from Deputy Paul Le Claire for an independent report into Jerseys' higher cancer incidence rates (P144/2011).