THE DEPARTMENT OF HEALTH

MIKE NESBITT MLA

Castle Buildings, Ballymiscaw, Stormont, Belfast BT4 3SQ

Stewart Dickson MLA NI Assembly Parliament Buildings Ballymiscaw Stormont

> 13 December 2024 AQW 18976/22-27

Stewart Dickson MLA asked:

To ask the Minister of Health to detail the current funding allocated for oesophageal and gastric cancer prevention, broken down by Health and Social Care Trust.

ANSWER

There is no funding allocated specifically to health and social care trusts for oesophageal and gastric cancer prevention. In Northern Ireland several organisations contribute to cancer prevention but primary responsibility lies with the Public Health Agency (PHA). The PHA lead on health promotion and disease prevention initiatives including programmes which may reduce cancer risk such as promoting healthy lifestyle choices (e.g. smoking cessation healthy eating and physical activity), implementing awareness campaigns on lifestyle cancer risks, and supporting screening programmes for early detection.

The proportion of cancer incidence in Northern Ireland attributable to modifiable lifestyle and environmental factors is estimated to be in the 30% to 40% range, this includes oesophageal and gastric cancers. A population approach, supported by policy and legislative measures, is required to

encourage and support people to live healthier lives and reduce the prevalence of cancer risk factors such as tobacco and alcohol consumption, obesity, lack of physical activity.

The Cancer Strategy for Northern Ireland 2022 – 2032 emphasises cancer prevention as a key element in its approach and highlights increasing public awareness of cancer-related risk factors through specific strategies on tobacco, substance use, and overweight and obesity – including diet and physical exercise. A Cancer Strategy Progress Report is due for publication in early 2025 which will include further detail against actions. A new 3-year cancer strategy plan is also under development which will consider the need for prevention work.

It is important to note that all Health and Social Care Trusts carry out surveillance for patients with the premalignant condition, Barrett's oesophagus. Barrett's oesophagus can increase risk of oesophageal cancer. Surveillance focusses on detecting early signs of precancerous changes to the oesophagus in those diagnosed with Barrett's Oesophagus. Patients have regular endoscopic surveillance with frequency dependent upon the nature of their condition. Work has also commenced to establish the need for targeted surveillance for other gastric premalignant conditions as part of Cancer Strategy Action 11.

Alex Ja

MIKE NESBITT MLA