



Prostate Health Advice Support and Education

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21st July 2014

Eileen Keller
Chairman
Joint Health Overview and Scrutiny Committee
Town Hall
Barking IG11 1LU

Dear Councillor Keller

Specialist cancer and cardiovascular services in North and East London and West Essex (radical prostatectomy proposals)

PHASE is a representative local body of prostate cancer patients and has therefore been involved in the recent engagement and consultation processes organised by NHS England.

Following a specialist prostate surgery workshop in Romford on the 26th June, PHASE members met on the 27th June and agreed unanimously to continue opposing the cessation of radical prostate surgery at Barking Havering and Redbridge University Hospitals Trust (BHRUT).

For the last 15 months PHASE has been raising a range of concerns including: the need for comparative outcome data in respect of radical prostatectomy surgery; advantages of retaining the current comprehensive and integrated range of prostate cancer services at BHRUT; adverse travel implications and reduced patient choice which would arise from a transfer of radical prostatectomy surgery to UCLH; lack of specific proposals to improve early diagnosis and prevention of prostate cancer; higher costs of UCLH surgery, and loss of revenues to BHRUT.

From the outset PHASE considered that changes to the provision of prostate cancer services ought to be considered on a London wide basis. Viewed from any strategic perspective – social, economic, healthcare, travel, etc – the London Cancer area does not have any clear relevance for the planning or delivery of services across London and the surrounding area. UCLH is located at the extreme western edge of the London Cancer area, and should therefore provide services for patients to the west as well as to the north and east. BHRUT is centrally located in the London Cancer area, and is best placed to provide services for most of the London Cancer area population.

Page 13 of the London Clinical Senate (LCS) report (dated 9/6/2014) indicates that UCLH carried out 276 robotic system radical prostatectomies in 2013/14 (that page also mentions a figure of about 300 per year). On that basis, LCS concludes (pages 15 and 16) that UCLH is compliant with NICE Guidance CG175 requiring a minimum of 150 procedures per year. It would not therefore be necessary to transfer patients from BHRUT to UCLH to comply with NICE Guidance. Page 15 of the LCS report states that "outcomes for individual surgeons do not plateau until they have carried out around 600 procedures". As this point only applies to robot assisted procedures it is not relevant to the current BHRUT service.

Page 9 of the LCS report refers to NICE Guidance requiring a centre which does not carry out robotic system radical prostatectomies to undertake a "minimum of 50 cases per year". BHRUT currently carries out far more than 50 laparoscopic and open radical prostatectomies per year, ensuring that it is compliant with NICE Guidance. BHRUT also carries out radical cystectomies (bladder surgery), so there is no need to separate prostate surgery from bladder surgery (LCS report page 15).

The LCS report (page 12) also found that "radical prostatectomy surgery was of a high standard at both sites" and "it would be inappropriate to base the decision as to a single or two site model on the data presented".

Page 15 of the LCS report refers to "issues of equity as the commissioner would effectively be commissioning a different provision of service for the populations at each site". Equity issues could only arise if patients were not advised that there is choice between the three alternative surgical procedures. Decommissioning the BHRUT service would mean that patients in the area would only be offered the option of robotic system radical prostatectomies, which would restrict choice.

We would appreciate it if the Joint Committee would support our opposition to cessation of radical prostate surgery at BHRUT.

Yours sincerely



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Chairman

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Appendix

PHASE represents prostate cancer patients in the BHRUT area

PHASE (Prostate Health Advice Support and Education) is a prostate cancer patient support group in the BHRUT area. PHASE was initiated in 2003 by patients and staff at the then Harold Wood and Oldchurch hospitals, and now supports patients attending King George and Queen's hospitals. A professional lead has always been available to steer the meetings which take place in the Harold Wood Neighbourhood Centre, Gubbins Lane, Harold Wood on the last Friday evening of each month from 7.00 to 9.00 pm, except for August, December and Bank Holidays. Over the years many prostate cancer patients and their loved ones have benefited from membership which is informal. Anyone interested is welcome to drop in to a meeting. The next meeting is on the 25th July.

Patients generally attend PHASE meetings during periods of treatment and follow up care, after which many leave the group. Numbers attending each meeting exceed 30, and numbers paying the annual voluntary subscription exceed 40. PHASE considers the views of its members to be representative of prostate cancer patients in the BHRUT area. PHASE is a member of the Prostate Cancer Support Federation, and is registered as a support group with Prostate Cancer UK.