Northern Ireland Cancer Registry

Newsletter

January 2026 | Volume #31

Northern Ireland Cancer Registry New Website

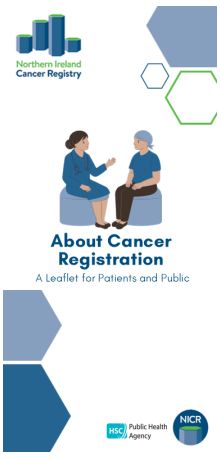
We're excited that our updated Northern Ireland Cancer Registry (NICR) website went live on 2nd February 2026. In addition to the new branding, the updated website features a new layout, simplifying the process of navigating through the website.

We have created a section containing information that would be helpful for individuals with cancer. The updated website also features a contact form, to allow easier submission of information or data requests to the registry. Information available through the website include Official Cancer Statistics, Northern Ireland reports, NICR newsletters, and reports by cancer site. View the website by scanning the adjacent QR code shown, or click here.

We would like to especially thank Peter Crowther, Michael McCollough and Caitriona Brannigan for their help and guidance as we updated our website. Elements of the website are still under development. If you have any questions around this, please let us know via nicr@qub.ac.uk.

Patient Information Leaflet

We have released an updated Patient Information Leaflet containing useful information about the NICR and cancer registration. If you would like a copy of the leaflet, please see our website - click here. If you would like to request copies of the Patient Information Leaflet for dissemination at your organisation, please contact nicr@qub.ac.uk.



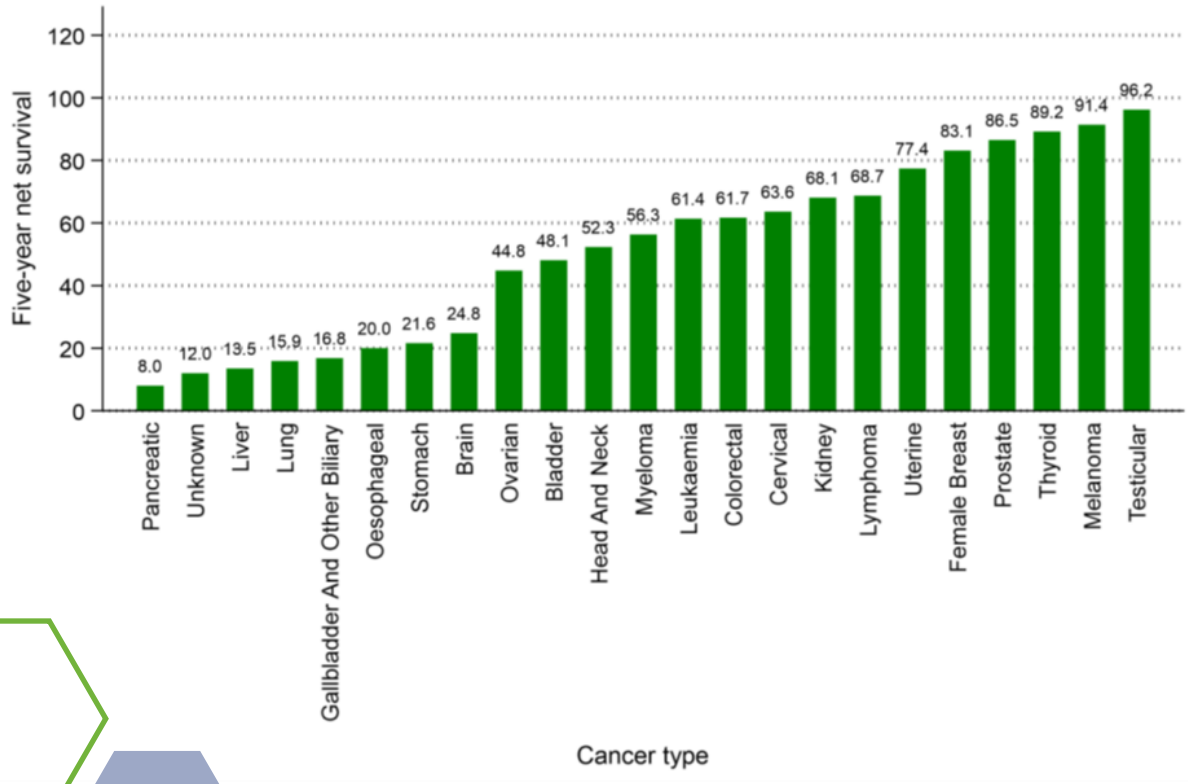
Official Statistics

Cancer incidence and survival:1993-2022

Official statistics on cancer diagnosed during 1993-2022 were published on 2nd July 2025. This release provided details of the number of cancer cases diagnosed each year along with incidence rates over time and data for a range of geographic areas. Survival trends and prevalence (the number of people alive) were also provided. This data can be accessed here. Key points from the release include:

- 10,319 (5,278 male, 5,041 female) cancers diagnosed each year during 2018-2022 (excluding non-melanoma skin cancer).
- The most common cancer types diagnosed were breast, prostate, colorectal and lung.
- Cancer cases per year increased by 8.7% from 9,489 cases in 2013-2017 to 10,319 cases in 2018-2022.
- Among patients diagnosed with cancer in 2013-2017 one-year net survival after diagnosis was 73.8%, while five-year net survival was 57.4%.
- Cancer survival improved between 2008-2012 and 2013-2017 with five-year survival increasing from 55.9% to 57.4%.

Five-year survival by cancer type (Patients diagnosed 2013-2017)



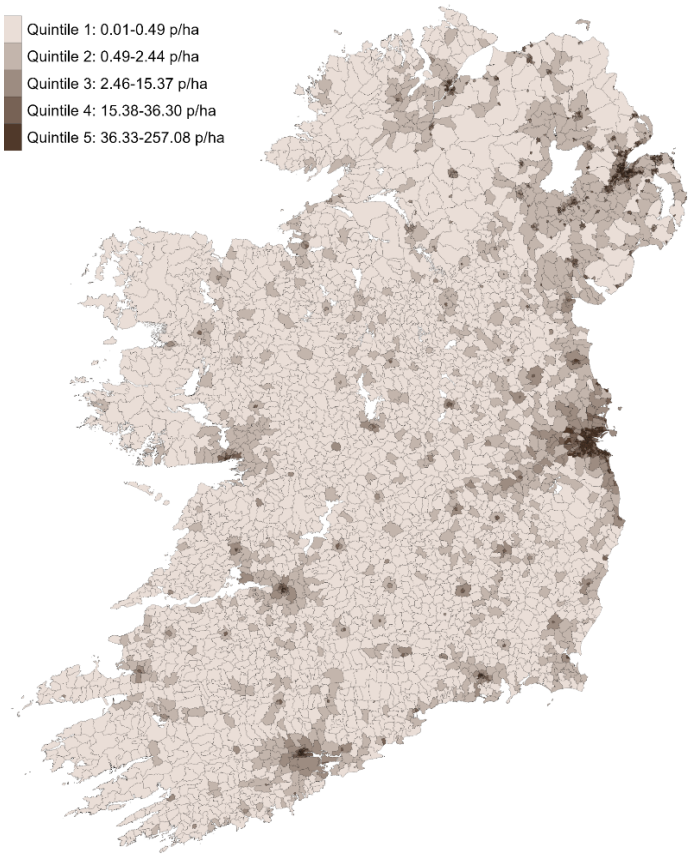
All-Island Cancer Atlas

Analysis of geographical variation in cancer risk has been a subject of research since cancer registration began. The first All-Ireland Cancer Atlas, a collaboration between the National Cancer Registry Ireland and Northern Ireland Cancer Registry, reported on cancers diagnosed in 1995-2007 at small geographic level. It highlighted variations in most cancer types throughout the island.

Since then, significant changes, both in terms of demographics and cancer services, have occurred in both jurisdictions. It is thus timely to update the previous atlas.

The second all-Ireland cancer atlas (funded by the Health Research Board Ireland) builds on previous work. It will present results for the most common cancers diagnosed in 2007-2021 and aims to describe the socio-economic and demographic effects on cancer risk (e.g. population density, figure below) along with geographical variation at small area level. It is due to be published in the second half of 2026.

Population density in 2021



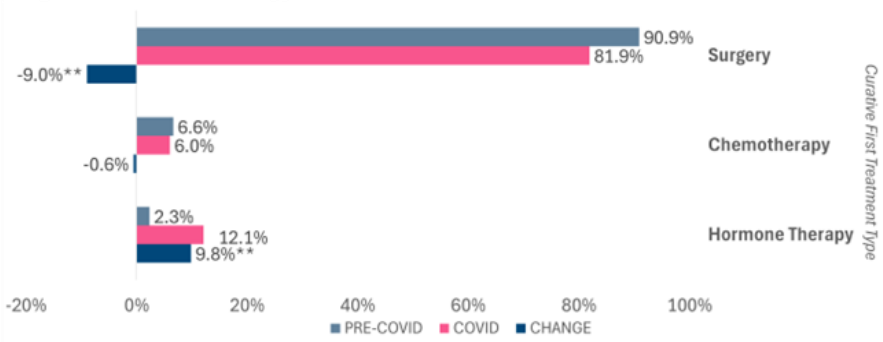
NICR Audits

Breast Cancer Now

COVID-19 Impact Study

In 2022 NICR received a grant from Breast Cancer Now to undertake a study on the impact of COVID-19 on breast cancer patients. The quantitative audit component, led by Helen Mitchell and Sinead Hawkins, covered approximately 2200 patients diagnosed in March - December 2018 and 2020. Analysis is now complete and the final report will be published in early 2026. A methodology paper has been published in PLOS One in September 2025.

Figure 1: **First Treatment Type for Patients Treated with Curative Intent**

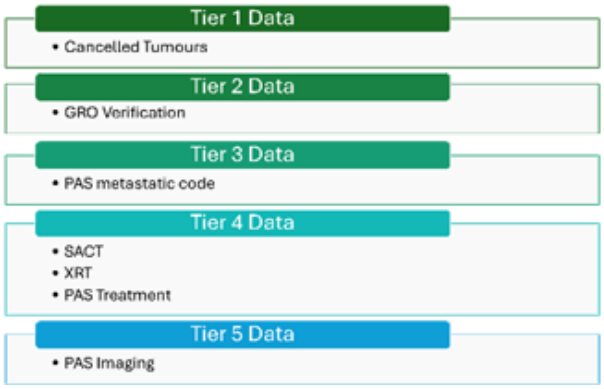


The mixed methods component of this project is led by Dr Charlene McShane and Dr Lynne Lohfeld and assisted by Dr Meena Sharma at the Centre for Public Health. The online patient survey had over 2,000 responses and analysis is being undertaken by Dr Meena Sharma with a publication due to be submitted in early 2026. Analysis of patient interviews conducted by Dr Lynne Lohfeld is underway and a draft publication has been prepared.

Metastatic Breast Cancer Research Audit

Cancer Focus supported the NICR to develop the first ever metastatic breast cancer (MBC) research audit in Northern Ireland. Progressive cancer events are not routinely recorded in many cancer registries including Northern Ireland. For patients initially diagnosed with locoregional breast cancer (i.e. stages I-III) there is no specific health service data collected by registries on the numbers of patients who develop progressive or recurrent metastatic breast cancer. The NICR has undertaken a three-phase process to deliver on an MBC audit.

Figure 1: Hierarchy of information sources to estimate earliest date of MBC

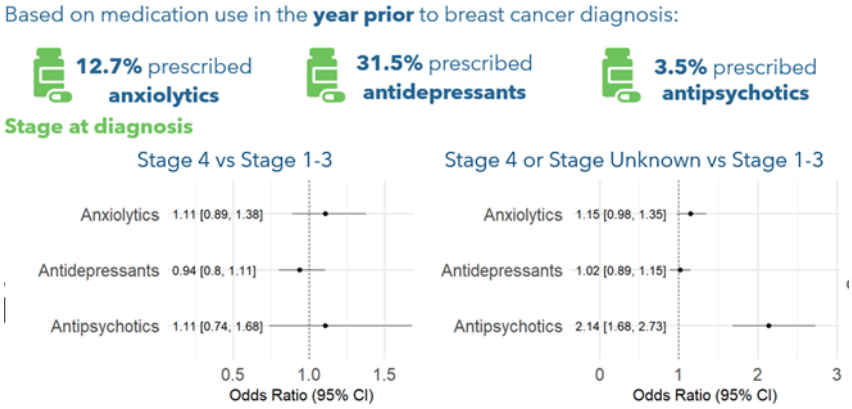


Phase 2 of this project is to improve accuracy of the MBC diagnosis using a range of datasets available to the cancer registry. Each of these datasets have been evaluated for accuracy and a hierarchical model was developed to give the earliest identified date of MBC for patients. Results of this phase will be released in early 2026.

Breast Cancer Now Inequalities Study

Professor Chris Cardwell and Dr Charlene McShane, along with Dr Damien Bennett and NICR and CPH staff, have investigated if some women in Northern Ireland experience inequalities in breast cancer care and outcomes, thanks to funding from Breast Cancer Now. NICR staff have successfully developed novel linkages with BSO and NISRA datasets to allow investigation of the impact of, for example, mental health problems, remote living, and socio-economic status on stage at diagnosis and survival outcomes. An online survey and qualitative interviews will also be conducted of a sample of breast cancer patients to understand how inequalities impact on their experiences of living with a breast cancer diagnosis.

To date, a paper examining the impact of mental health conditions on breast cancer outcomes has been published in Breast Cancer Research and Treatment, a paper investigating house value as an individual measure of socio-economic status has been submitted to Breast Cancer Research and Treatment and a paper examining the impact of travel times to from GP and treatment centres and breast cancer outcomes has been submitted to Cancer Causes and Control. Furthermore, a paper is currently being developed which examines the impact of health inequalities on breast cancer outcomes. Poster presentations were given for the mental health conditions and breast cancer outcomes study at the European Network of Cancer Registries (ENCR), where the poster was awarded ENCR Best Poster, and at the All-Island Forum on Cancer Data. Poster presentations were also given for the house value and breast cancer outcomes study at UK Interdisciplinary Breast Cancer Symposium, where it was awarded Best Poster, and at the All-Island Forum on Cancer Data. In addition, Dr Sarah Baxter has been awarded the Professor Dermot O'Reilly Prize for her contribution to the manuscript *"Stage at diagnosis and breast cancer specific mortality in breast cancer patients treated with antidepressants, anxiolytics, and antipsychotics: a population based cohort study from Northern Ireland"*.

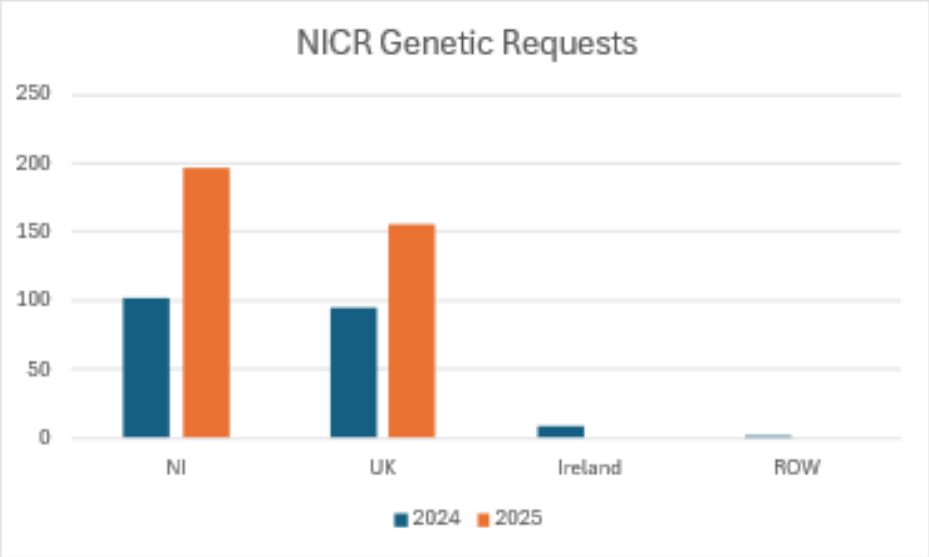


NICR Ongoing Work

Genetic requests

The NICR provides support to Clinical Genetics Departments locally, nationally and internationally by providing cancer diagnosis information. This information is used to support family history clinics, carry out a risk assessment of patients and their families who may have a higher risk of developing cancer.

In 2025, NICR provided information for **352 Genetic Requests, all of which were completed within the 10 working day timeframe.** 197 were for NI patients, a rise of **93% compared to 102 last year** and the remaining 155 of these were for UK genetics departments, making an **increase of 63% from last year (95)** . This upward trend is driven by several factors, including advancements in genomic medicine, national strategies to embed genomics in NHS services and updated clinical guidelines in recent years.



The policy of the United Kingdom and Ireland Association of Cancer Registries (UKIACR) concerning the release of data for the purposes of genetic counselling requires that a named registered medical practitioner shall be responsible for the confidentiality, use and security of data. A Data Release form, accepting responsibility for this data, must be signed and returned to NICR prior to the release of any patient information.

Requests for cancer registry information from Genetics Departments concerning living family members related to a proband undergoing counselling, should be accompanied by a signed consent form obtained from each family member about whom information is requested. NICR will not release information regarding living cancer patients without their signed consent.

When a genetic request is received by NICR, a highly skilled Cancer Intelligence Officer will process and complete the request within 10 working days. The information provided by the Genetics Department will be checked against Praxis, the NICR electronic database, and also the Card Registry legacy system that was in place prior to the inception of the Registry in 1994. If a match is found, the requested information is returned to the requester including, but not limited to Name, Address, Date of Birth, Cancer Site, Morphology, Laterality, Date of Diagnosis, Hospital and Other Primary Cancers, in accordance with the NICR Policy Regarding Security, Confidentiality and Issue of Data.

Northern Ireland referrals are dealt with by a visiting member of staff from the Clinical Genetics Service in the Belfast Trust.

NICR External Research

Northern Ireland Barrett's Register (NIBR)

The NIBR has been updated to include over 28,000 patients diagnosed with Barrett's oesophagus between 1993 and 2021. Analysis of incidence trends and risk of progression is currently ongoing for cancer and survival outcomes up to end December 2022. This work has been conducted by Dr Victoria Child, with oversight from Professor Helen Coleman.

Endoscopic treatment data for dysplastic Barrett's oesophagus patients are currently being updated in collaboration with Dr David Johnston (Clinical research fellow), Dr Zara Kirkwood (ACF), Professor Richard Turkington and the Clinical Gastroenterology teams at the Belfast Health and Social Care Trust.

Student projects

The NIBR continues to support a number of student projects, including:

- **Dr Erin McGrattan** who passed her **PhD viva** subject to minor corrections in November 2025. Erin's thesis was titled 'Characteristics of Asymptomatic Barrett's Oesophagus and Oesophageal Cancer Patients to Inform Novel Prevention and Early Detection Opportunities', supervised by Professor Helen Coleman, Professor Richard Turkington and Dr Victoria Child, funded by the Brian Conlon Foundation.
- **Anna Blair** (Year 3 Biomedical Sciences dissertation project and an externally funded summer studentship from Breakthrough Cancer Research)
- Two Centre for Public Health summer studentships in Summer 2025 for **Aksh Sharma** (Year 2 Medical student) and **Marianne Toal** (Year 3 Medical student).

These projects added new information to the NIBR on gastric and/or intestinal metaplasia classifications, allowing the team to investigate the risk of neoplastic progression for Barrett's oesophagus for these subtypes. The projects were supervised by Professor Helen Coleman, Dr Damian McManus and Dr Victoria Child. Anna's summer studentship also investigated trends in 'indefinite for dysplasia' diagnoses in this cohort of patients. This work will inform clinical guidelines on surveillance intervals for Barrett's oesophagus patients.

Huge congratulations to Marianne Toal (pictured below, right) who won **first prize for Best presentation** at the CPH summer studentship symposium in July 2025.

Conference Presentations

The Irish Association of Cancer Research Conference 5-7 March 2025, Europa Hotel, Belfast:

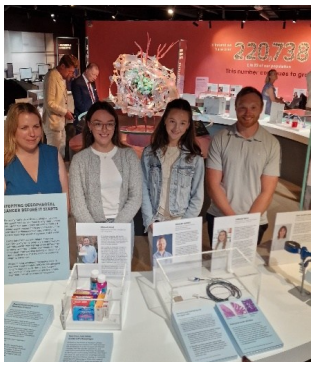
- Dr Erin McGrattan presented an oral presentation '*Burning Matters: Differing Characteristics of Barrett's oesophagus patients according to Reflux History has implications for early detection initiatives*'
- Dr Victoria Child presented a poster '*Evaluating Barrett's oesophagus, Dysplasia incidence and Treatment trends across the island of Ireland*'.
- British Society of Gastroenterology Live '25, 23-26 June 2025, SEC Glasgow:
  Prof Helen Coleman was an invited speaker on '*Global epidemiology of oesophageal cancer and the changing UK population*'.
  Dr Victoria Child presented a flash poster '*Risk of malignant progression in Barrett's oesophagus patients: results from a large population-based study between 1993-2018*'.
- INSPIRE Academic Research Symposium,4 October 2025, Belfast: Marianne Toal presented an oral presentation and Aksh Sharma presented a poster presentation on their work '*Understanding the Malignant Potential of Gastric Metaplasia of the Oesophagus: A Population-based Study*'

AllCaN All-Island Oesophageal Cancer Network

Dr Victoria Child has continued work on the AllCaN All-Ireland oesophageal cancer network (funded by Breakthrough Cancer Research) to co-ordinate the linkage of two unique large-scale Barrett's registry data sources (NI Barrett's register and National Barrett's registry of Ireland).

Professor Helen Coleman, Richard Murray (Year 2 AllCaN PhD student), summer students Anna Blair and Marianne Toal, and Mr John Clarke (AllCaN PPI representative) attended the launch of the **Breakthrough Cancer Research Open Exhibition *'Cancer Revolution: Science, Innovation and Hope'*** in St. Stephen's Green shopping centre, Dublin, on Thursday 14th August 2025.

Prof Jacintha O'Sulllivan (AllCan Lead, Trinity College Dublin), Mr John Clarke (PPI representative) and Prof Helen Coleman (AllCan co-lead)



Prof Helen Coleman (AllCan co-lead), Anna Blair, Marianne Toal and Richard Murray

AllCaN Oesophageal Symposium 2025

The **second AllCaN Oesophageal symposium** was held at Riddel Hall, Queen's University Belfast on Monday 20th October 2025 with many colleagues, students and PPI representatives from the Cancer Epidemiology Research group, CPH, NICR and the Johnston Cancer Research Centre (JCRC) attending.

Several AllCaN funded trainees presented their research including four QUB PhD students (Abigail Jeyaraj, Kelly Tang, Richard Murray and Sedina O'Kane), MPhil student (Dr Orla Carney) and MPH student (Rachel McMenemy). Topics focussed on the themes of *Prevention*, *Intervention, Targeted Diagnostics* and *Novel Therapeutics*.

The afternoon featured a panel discussion (pictured above) with participation from charity representatives (Dr Frances Drummond, Breakthrough Cancer Research and Carmel Doyle, CEO Oesophageal Cancer Fund), AllCaN PPI representatives Feargal Delaney and Mark Kelly, industry representatives (Dr Debra Higgins, OncoAssure) and clinical collaborators (Dr Damian McManus, Consultant Histopathologist).

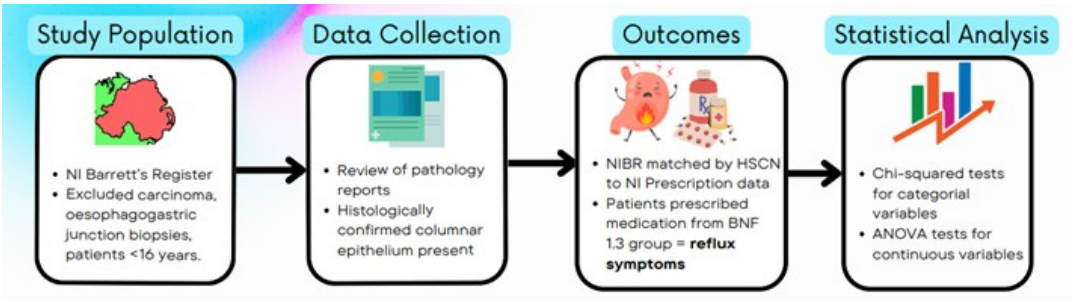
Erin McGrattan

A Population-Based Analysis of Asymptomatic Barrett's Oesophagus: Linking NI Prescription Records with the NI Barrett's Register

News from the past year – I've passed my PhD viva and am now Dr Erin McGrattan! (PhD Research Title - Identifying characteristics of asymptomatic oesophageal cancer and Barrett's oesophagus patients to inform novel prevention and early detection opportunities).

Current Project ongoing within NICR

This is a prospective cohort study, conducted on all Barrett' s oesophagus patients from the NIBR between 2009 and 2021 and matched to prescribing data from the NI Enhanced Prescription Database (n=16,283). Results have been reported within my PhD Viva, and we aim to publish early 2026. We found a proportion were coded as asymptomatic and we investigated the risk of progression to oesophageal adenocarcinoma and high-grade dysplasia in both symptom groups. This study highlighted that screening or surveillance techniques for Barrett' s oesophagus should not rely on reflux symptom profile alone for stratifying risk.

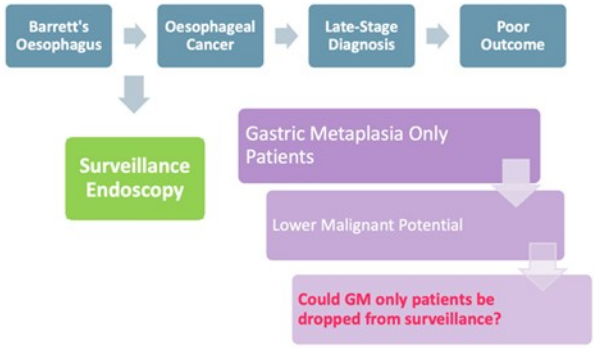


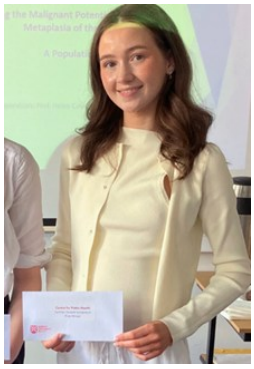
Anna Blair

After graduating in June, I began a summer studentship sponsored by Breakthrough Cancer Research, where I worked on a project titled "Understanding the malignant potential of indefinite for dysplasia and low-grade dysplasia in Barrett's oesophagus: a population-based study." My role focused on analysing the progression of individuals diagnosed with indefinite for dysplasia and low-grade dysplasia to determine how many went on to develop high-grade dysplasia or oesophageal adenocarcinoma. To do this, I used data from the Northern Ireland Barrett's Oesophagus Registry, allowing me to assess progression patterns within a large, well-established population cohort. This experience gave me hands-on insight into epidemiological research, data interpretation, and the clinical significance of early dysplasia detection in improving cancer outcomes.

Marianne Toal

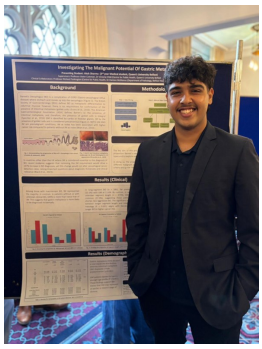
Understanding the Malignant Potential of Gastric Metaplasia of the Oesophagus: A Population-based Study.





Marianne Toal (Year 3 Medicine) completed a Summer Studentship under the supervision of Professor Helen Coleman and Dr Victoria Child, investigating the risk of progression to oesophageal adenocarcinoma in gastric metaplasia only (GM only) Barrett's Oesophagus (BO) patients. Marianne performed a retrospective text-mining analysis of oesophageal biopsy pathology reports for BO patients diagnosed between 2011-2020. Statistical analysis of this data demonstrated that GM-only BO has a malignant potential similar to the general population, suggesting consideration be given to less frequent screening of these patients.

Aksh Sharma



This summer, I undertook a studentship at NICR under the invaluable guidance of Professor Coleman, Dr Child, and the entire team. My project looked at Barrett's oesophagus subtypes within the Northern Ireland Barrett's Register, aiming to identify key differences between gastric and intestinal metaplasia in relation to demographics and dysplasia risk. The goal was to understand the malignant potential of gastric metaplasia and ultimately drive policy change in Barrett's surveillance and prognosis in the UK!

Dr Una McMenamin

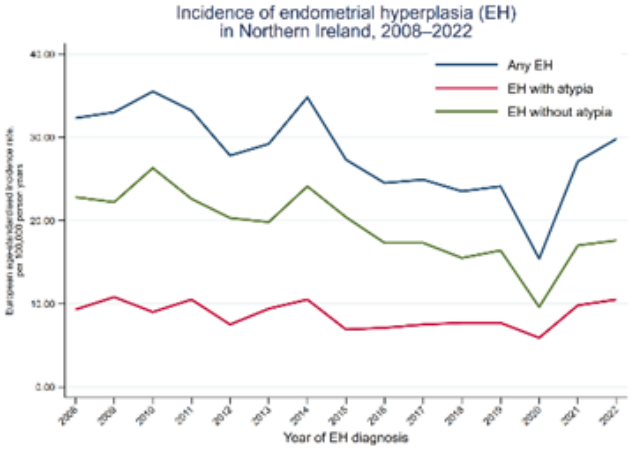
Northern Ireland Endometrial Hyperplasia Register

Health is continuing to lead the development of the Northern Ireland Endometrial Hyperplasia Register. Endometrial hyperplasia is a premalignant lesion of endometrial (or womb) cancer and offers a unique opportunity for cancer prevention and early detection. However, little is known about its natural history and associated outcomes. This project aims to investigate trends in the incidence of endometrial hyperplasia, as well as risk of progression to endometrial cancer which will help to inform diagnostic, treatment and surveillance strategies. This project benefits from patient engagement from patients with lived experience of endometrial hyperplasia as well as clinical input from gynaecology and pathology clinicians.

In January 2025, Dr McMenamin presented research based on the NI Endometrial Hyperplasia Register at the annual Professor Liam Murray Cancer Epidemiology Symposium which took place at Riddel Hall, Belfast and the theme of which was "Empowering Women's Health in Cancer Prevention and Early Detection". In addition, one of the endometrial hyperplasia PPI representatives participated in an insightful panel discussion that included clinicians, researchers, patients, and charity representatives. Early career researchers Dr Lauren McVicker and Dr Chloe McCoy also showcased their research on gynaecological cancers through poster presentations.

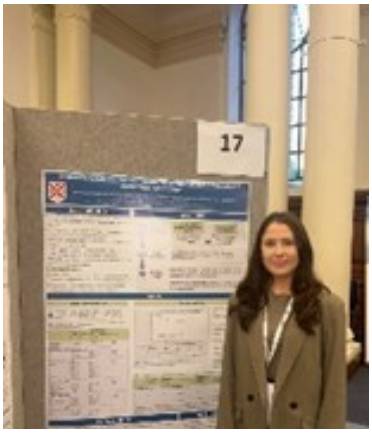
Lauren McKenna

Using the NI Endometrial Hyperplasia (EH) Register, Dr Lauren McKenna investigated EH incidence from 2008-2022. She calculated European age-standardised incidence rates using hysterectomy adjusted NI population estimates. After excluding prior and concurrent endometrial cancers, 2,997 EH cases were identified (890 atypical; 2,085 without atypia). Overall EH incidence declined by 7.7%, falling from 32.3 in 2008 to 29.8 per 100,000 person-years in 2022, but trends differed by EH type: atypical EH increased by 12.9% while EH without atypia decreased by 22.8%. Changes in incidence over time also varied by socioeconomic status, with a 7% reduction for those living in the least deprived areas compared with a 50% increase in the most deprived. Age-specific incidence peaked at 50-54 years for any EH and EH without atypia, and at 55-59 years for atypical EH. These findings suggest evolving trends in EH diagnosis, in part due to greater pathological subspecialisation.



Chloe McCoy

As part of my PhD, I investigated patterns in endometrial hyperplasia and endometrial cancer diagnoses using data from the NICR linked to data from the Northern Ireland Endometrial Hyperplasia Register.



One study examined the proportion of concurrent endometrial cancer among patients initially diagnosed with endometrial hyperplasia and identified factors linked to concurrent cancer. In patients with both an endometrial hyperplasia and endometrial cancer diagnosis, 66.5% of endometrial cancers were deemed concurrent (within three months of an endometrial hyperplasia diagnosis) and atypical hyperplasia was associated with a three-fold increased risk of a concurrent endometrial cancer diagnosis.

A second study assessed whether endometrial cancer patients with a prior hyperplasia diagnosis experienced improved survival outcomes. Endometrial cancer patients with prior hyperplasia were more likely to be younger at diagnosis and have earlier stage and low-grade tumours. A survival benefit was observed which was likely due to the earlier stage at cancer diagnosis.

Importantly, the research was informed by discussions with endometrial hyperplasia PPI representatives and clinicians. Together, these analyses provide clearer insights into diagnostic pathways and prognosis of endometrial cancer.

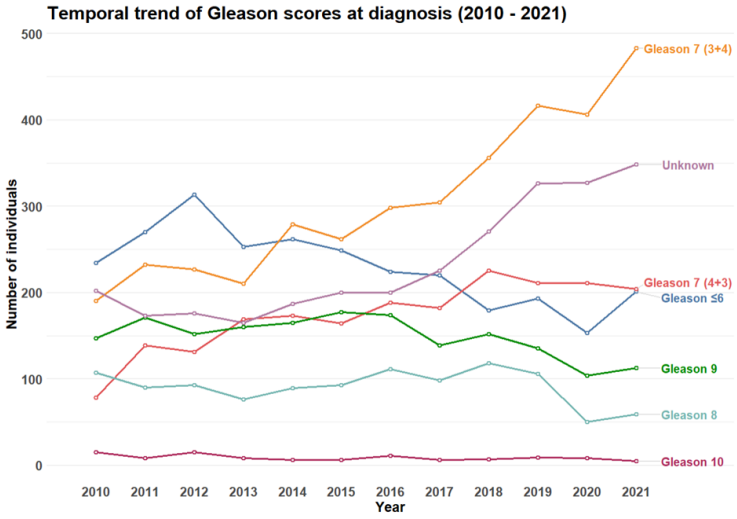
In December 2025, I successfully passed my PhD viva and will graduate in Summer 2026.

This project was supervised by Dr Úna McMenamin, Dr Charlene McShane and Dr Finian Bannon from the Centre for Public Health and was funded by the Department for the Economy (DfE).

Jack Murphy (Supervisor Dr Emma Allott)

Temporal trends in prostate cancer stage and grade

Trends in prostate cancer stage and grade may vary over time. Using data from 14,273 men diagnosed with prostate cancer in Northern Ireland 2010-2021, my findings show fewer Gleason 6 tumours over time, supporting a trend towards reduced over diagnosis. Simultaneously, there is a slight increase in metastatic disease at diagnosis, particularly in more deprived areas. These findings may help direct awareness and early diagnosis efforts to areas of the population experiencing a higher burden of lethal prostate cancer.



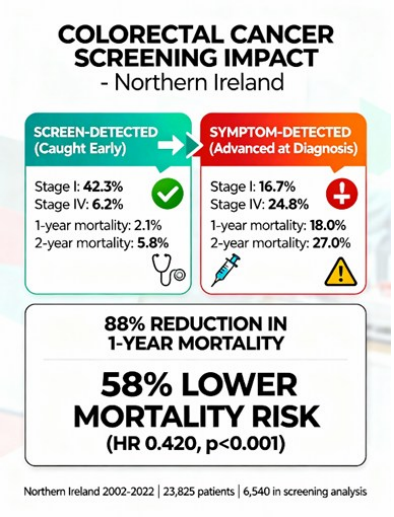
Ella Shields (Supervisor Dr Emma Allott)

Examining how comorbidities influence prostate cancer outcomes in Northern Ireland

This population-based study uses data from men diagnosed with prostate cancer between 2010 and 2021. By focusing on the Charlson Comorbidity Index (CCI), my aim is to better understand how the burden of additional health conditions relates to the tumour characteristics and treatment of newly diagnosed men and how it associates with prostate cancer outcomes.

Didar Dyussetayev (Supervisor Dr Finian Bannon)

Investigating the impact of a colorectal cancer screening programme on colorectal cancer staging and survival in Northern Ireland, UK



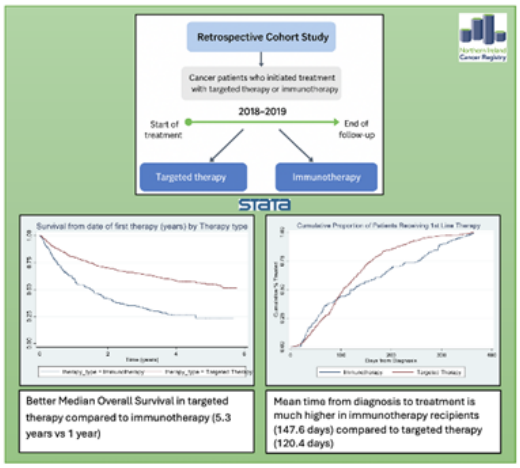
My research uses linked data from the NICR and the NI Bowel Cancer Screening Programme to assess the impact of organised colorectal cancer screening between 2002 and 2022. We show a clear shift to earlier-stage disease, with screen-detected cancers far more often stage I and much less often stage IV than symptom-detected cancers, and substantially lower one- and two-year mortality. At population level, lifetime excess risk of colorectal cancer death has almost halved.

Mayuri Raje (Supervisor Dr Blanaid Hicks)

Taxane-Induced Toxicities in Northern Ireland: A Real-World Descriptive Analysis of Incidence, Timing, and Patient Characteristics

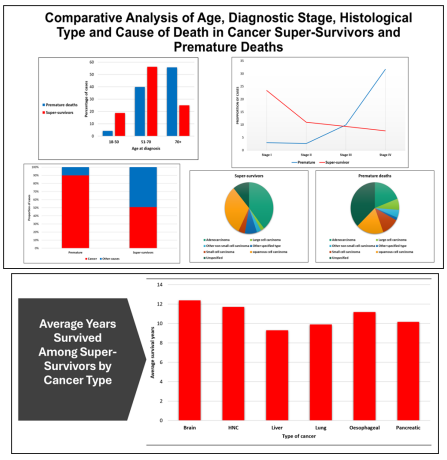
During my 8-week CPH summer studentship at the NICR, I carried out a retrospective analysis exploring toxicities linked to taxane-chemotherapy. I examined patient demographics, cancer types, treatment characteristics, and the timing and pattern of hospital-recorded toxicities. The project highlighted notable differences across taxane agents and patient and provided valuable experience in handling real-world oncology data. These insights are now helping shape a systematic review I am undertaking on taxane-induced neurotoxicity in breast cancer patients I have also attached a picture of myself as well as the poster I created using the NICR data that I presented at the INSPIRE Conference.

Anhukrisha Karthikeyan (Supervisor Dr Blanaid Hicks)



This summer, under Dr Blánaid Hicks' supervision, I conducted a retrospective population-based study using NICR data to evaluate real-world use of targeted therapies and immunotherapies across NI (2018–2019). Analysing 788 patients, time from diagnosis to treatment was significantly longer in immunotherapy recipients. Targeted therapies were far more common and had improved overall survival versus immunotherapy. Uptake was higher in younger, less comorbid patients and varied across hospital Trusts, highlighting the need for timely, equitable access to treatments.

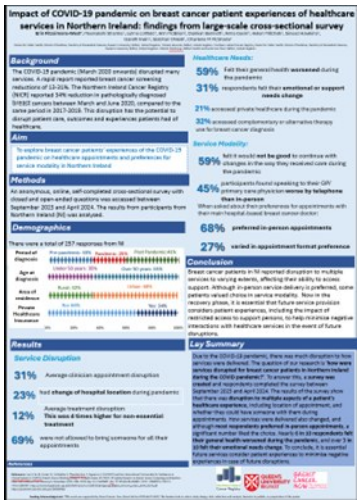
Josias Grace Nyele (Supervisor Dr Damien Bennett)



My research at the NICR focused on examining the characteristics of cancer super-survivors in Northern Ireland. Among highly aggressive cancers with poor prognosis, such as small-cell lung cancer and pancreatic cancer, it has been noted that certain individuals significantly higher than expected survival. Using data from the NICR database, I analysed key demographic, clinical, and socio-economic factors associated with these outcomes. Assessing determinants of exceptional survivorship may help guide targeted interventions, ultimately improving prognosis and quality of life for cancer patients.

Erin Fitzsimmons-West (Supervisor Dr Charlene McShane)

As part of the foundation training programme, I completed a 4-month placement with CPH and NICR. In this, I looked at data from the Breast Cancer experience during COVID survey, and compared groups of NI and ROI participants, focusing on disruption to appointments, change in participant's needs and support available. From this, a poster has been submitted at the International Breast Cancer Symposium this January. I've really enjoyed my time at CPH and NICR and have learnt a lot.



Jessica Santizo Galicia

(Supervisor Prof Adelle Marshall)

Using data from the NICR, my research examined more than 23,000 patients and over 112,000 outpatient appointments in the two years before cancer diagnosis. I analysed patterns in appointment frequency, timing, and cancellations across cancer types, identifying significant inequalities and key factors associated with diagnostic delay. Clustering and predictive modelling were used to characterise patient pathways and highlight opportunities to support earlier diagnosis.

Andrea Serrano Santos (Supervisor Prof Adelle Marshall)

This project scoped the development of a dashboard for the NICR to analyse radiotherapy patient data. Built with R, RStudio, and Shiny, it would support dynamic visualisation of demographic, geographic, temporal, and survival data to aid clinical decision-making. Further work will allow development to assess incidence, age, and deprivation levels.

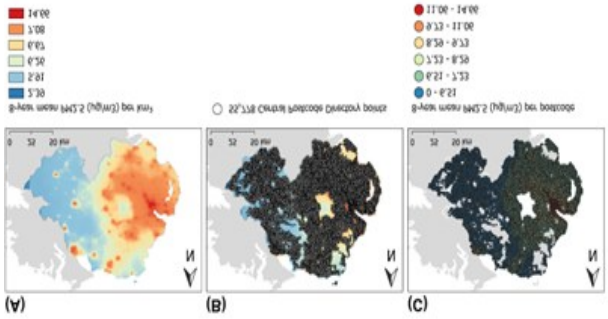
Sasha Palmer (Supervisor Prof Dan Middleton)

Investigating Routes to Bladder Cancer Diagnosis in Northern Ireland

A study investigating bladder cancer diagnosis routes in Northern Ireland in 2019, using NICR data, found that 75% of cases were male. Most diagnoses occurred at an early stage (Stage I-II). Emergency hospital admission was linked to more advanced disease. There was no significant correlation between deprivation status or age and the stage at diagnosis. Survival rates visually varied by Health and Social Care Trust.

Rawan Ahmad Najeeb Alhattab (Supervisor Dr Dan Middleton)

My research uses data from the NICR to investigate how long-term exposure to ambient air pollution, particularly PM2.5, relates to cancer risk. I have conducted population-based case-control studies of lung, bladder, and pancreatic cancers by linking NICR records with high-resolution pollution and demographic data. This work aims to quantify the environmental cancer burden in NI and provide evidence to guide prevention strategies and public health policy.



Claire Delargy (Supervisor Dr Dan Middleton)

My PhD aims to estimate the fraction of lung cancer attributable to radon in Northern Ireland. Using geospatial methods I integrated radon exposure maps with NICR data and applied statistical models to calculate adjusted odds ratios for a case-control study which used NICR and NICOLA datasets.

Currently, I am conducting a biospecimen study of lung cancer tissue samples from the NI Biobank, linked to NICR records, to assess whether residual evidence of radon exposure can be detected in these samples.

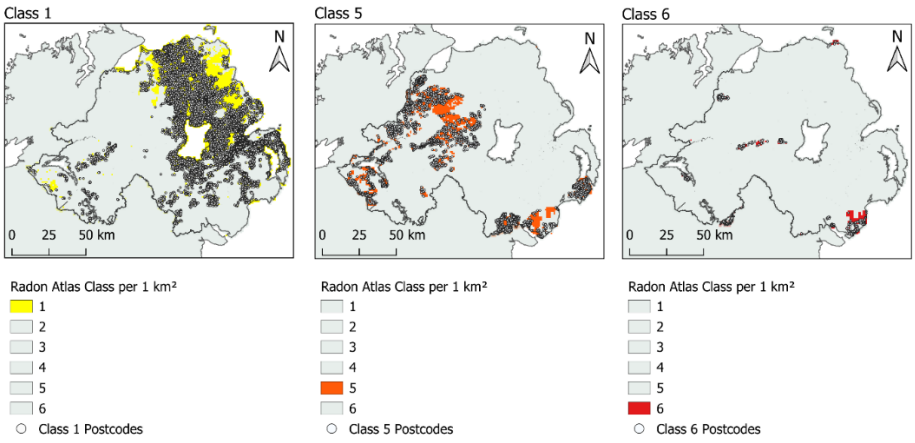


Figure 1 – Maps showing postcodes classified as Class 1, Class 5 and Class 6.

Publications

Estimated incidence and prevalence of metastatic breast cancer in Northern Ireland, 2009 to 2020
Hawkins, S. T., Ashok, A., Kelly, J. M., Savage, G., Fitzpatrick, D., Mitchell, H., McBrien, A. & **Bennett, D**., 06 Jan 2025, In: JAMA Network Open. https://doi.org/doi:10.1001/jamanetworkopen.2024.53311

Impact of COVID-19 on breast cancer patients and services in a UK region: Protocol for a mixed methods study
Mitchell H, McShane C, Hawkins S, Lohfeld L, Darragh P, Irwin G, Lowans N, McBrien A, Moss E, O'Neill S, Roebuck J, Sengupta S, Sharma M, Gavin AT, Bennett D. PLOS One. September 29 2025 https://doi.org/10.1371/journal.pone.0333288

Stage at diagnosis and breast cancer-specific mortality in breast cancer patients treated with antidepressants, anxiolytics, and antipsychotics: a population-based cohort study from Northern Ireland
Baxter, S. M., McShane, C. M., McIntosh, S. A., **Bennett, D.**, Lohfeld, L., Middleton, D. R. S., Savage, G., **Fitzpatrick, D.,** Kane, J., McBrien, A., McCallion, D., Gavin, A. & Cardwell, C. R., Aug 2025, Breast Cancer Research and Treatment. https://doi.org/10.1007/s10549-025-07766-8

Lung cancer burden attributable to ambient particulate matter: a nationally representative population-based case-control study
Alhattab, R. A. N., McKinley, J. M., Hunter, R. F., Delargy, C. M., Wallace, S. M., Bennett, D., Fitzpatrick, D., Mitchell, H., McGuinness, B., Scott, A., McKay, G., Bouaoun, L., McCormack, V. & Middleton, D. R. S., 06 Oct 2025. In: British Journal of Cancer. https://doi.org/10.1038/s41416-025-03207-x

Skin melanoma survival is improving in Europe but regional differences persist: Results of the EUROCARE-6 study
Crocetti, E., **Bennett, D.**, Jooste, V., Rossi, S., Maso, L. D., Marcos-Gragera, R., Smits, S., Tina, Z., Xavier, T., Mayer-da-Silva, A., Daubisse-Marliac, L., Lourenço, A., Katalinic, A., Sanchez, M.-J., Vener, C., Mousavi, M., Ziliani, V. & Gatta, G., 19 Oct 2025. In: European Journal of Cancer (Oxford, England). DOI: 10.1016/j.ejca.2025.116061

Global variation in patterns of care and time to initial treatment for breast, cervical, and ovarian cancer from 2015 to 2018 (VENUSCANCER): a secondary analysis of individual records for 275 792 women from 103 population-based cancer registries in 39 countries and territories
VENUSCANCER Working Group, 22 Oct 2025. In: Lancet (London, England). DOI: 10.1016/S0140-6736(25)01383-2

Survival of European adolescents and young adults diagnosed with central nervous system tumours and comparison with younger and older age groups: EUROCARE-6 results
McCabe, M., Rossi, S., Cerza, F., Massimino, M., Gianno, F., Spycher, B. D., Marcos-Gragera, R., **Bennett, D**., Lasalvia, P., Didonè, F., El Karoui, N. J., Ragusa, R., Mayer-da-Silva, A., Mousavi, S. M. & Trama, A., 09 Sept 2025, In: European Journal of Cancer. https://doi.org/10.1016/j.ejca.2025.115661

Prognosis of Breast Cancer in European female adolescents and young adults (AYAs): EUROCARE-6 retrospective cohort results. EUROCARE-6 Working Group3, Aug 2025, In: Breast. 82, 104472. DOI 10.1016/j.breast.2025.104472

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Chemotherapy and radiotherapy use in patients with lung cancer in Australia, Canada, the UK and Norway 2012-2017: an ICBP population-based study
ICBP Module 9 Lung Study Group, Jul 2025, In: BMJ Oncology. https://doi.org/10.1136/bmjonc-2025-000800

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EUROCARE-6 Working Group, 06 May 2025, In: European Journal of Cancer. https://doi.org/10.1016/j.ejca.2025.115336

Prognosis of Breast Cancer in European female adolescents and young adults (AYAs): EUROCARE-6 retrospective cohort results.
EUROCARE-6 Working Group, 02 May 2025, In: The Breast. https://doi.org/10.1016/j.breast.2025.104472

Long-term survival for myeloid neoplasms and national health expenditure: a EUROCARE-6 retrospective, population-based study
EUROCARE-6 Working Group, 02 May 2025, In: European Journal of Cancer. https://doi.org/10.1016/j.ejca.2025.115231

Estimating cure and risk of death from other causes of adolescent and young adult cancer patients in Europe
EUROCARE-6 Working Group, 19 April 2025. In: European Journal of Cancer. https://doi.org/10.1016/j.ejca.2025.115443

Incidence and survival of rare female genital tract cancers in Europe: The EUROCARE-6 study
Gatta, G., Calleja-Agius, J., Sandrucci, S., **Bennett, D**., Azzopardi, M. J., Capocaccia, R. & EUROCARE WG, 25 Mar 2025, (Early online date) In: European Journal of Surgical Oncology. https://doi.org/10.1016/j.ejso.2025.109996

Corrigendum to "Incidence and prognosis of cutaneous melanoma in European adolescents and young adults (AYAs): EUROCARE-6 retrospective cohort results"
EUROCARE-6 Working Group, 11 Mar 2025, In: European Journal of Cancer. https://doi.org/10.1016/j.ejca.2025.115295

International benchmarking of stage at diagnosis for six childhood solid tumours (the BENCHISTA project): a population-based, retrospective cohort study
Botta L., Didonè F., Lopez-Cortes A., …. **BENCHISTA Project Working Group**. 9 March 2025 In: Lancet Child Adolesc Health. https://doi.org/10.1016/S2352-4642(24)00302-X

Sex differences in survival from melanoma of the skin: The role of age, anatomic location and stage at diagnosis: A CONCORD-3 study in 59 countries
Di Carlo, V., Eberle, A., Stiller, C., **Bennett, D**., Katalinic, A., Marcos-Gragera, R., Girardi, F., Larønningen, S., Schultz, A., Lima, C. A., Coleman, M. P. & Allemani, C., 25 Feb 2025, In: European Journal of Cancer. https://doi.org/10.1016/j.ejca.2024.115213

Media

Headline	Date	Outlet	Link
Cancer Focus 2025 Review	December 2025	Cancer Focus Social Media	Click here
"I'm here to walk alongside people and their families at one of the most frightening times of their lives": NI's first pancreatic support nurse	November 2025	The Irish News – ***print & online***	Click here
New Melanoma Study Findings Recently Were Reported by Researchers at Queens University Belfast (Skin melanoma survival is improving in Europe but regional differences persist: Results of the EUROCARE-6 study)	November 2025	Health & Medicine Daily	N/A
Global variation in patterns of care and time to initial treatment for breast, cervical, and ovarian cancer from 2015 to 2018	November 2025	The Lancet	N/A
New Findings on Lung Cancer from Queen's University Belfast Summarized (Lung Cancer Burden Attributable To Ambient Particulate Matter: a Nationally Representative Population-based Case-control Study: Epidemiology)	November 2025	Disease Prevention Daily	N/A
A Grounded Theory of the Lived Experiences of People with Pancreatic Cancer in Northern Ireland: Study Protocol	November 2025	MDPI	Click here
New Findings from Queen's University Belfast in the Area of COVID-19 Reported (Impact of COVID-19 on breast cancer patients and services in a UK region: Protocol for a mixed methods study)	October 2025	NewsRx COVID-19 Daily	N/A
Impact of COVID-19 on breast cancer patients and services in a UK region: Protocol for a mixed methods study	September 2025	PLoS ONE	Click here
Widower warns of 'sneaky' symptoms of ovarian cancer	June 2026	BBC Radio Ulster *(broadcast)*	N/A
		BBC Radio Foyle *(broadcast)*	N/A
		Aol.	N/A
		BritishBulletin.com	N/A
		Yahoo! News	N/A
		Finnoexpert	N/A

Posters & Presentations

Free Electronic Staging Tool for population-based cancer registries: CanStaging+
Gavin, A. IACR Conference, Izmir, Turkey. November 2025 **POSTER**

The Rise of Early-Onset Cancers - Biology, Causes, and Detection
Russell, A. European Association for Cancer Research-Mark Foundation Joint Conference. Bergamo, Italy 11-13 November 2025. **POSTER**

Estimated Trihalomethanes in public drinking water and bladder cancer risk in Northern Ireland
M. Wallace, Northern Ireland Cancer Registry, NICOLA Study Team, D. Middleton. SEGH Conference Belfast, July 2025.
CONFERENCE PRESENTATION

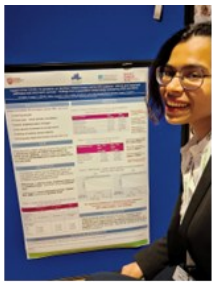
Trends of prostate cancer stage and grade over a 12-year period in Northern Ireland; a population-based analysis
Murphy, JT. European Association for Cancer Research (EACR), June 2025. Lisbon, Portugal. **POSTER**

Impact of COVID-19 pandemic on healthcare appointments for breast cancer patients in the UK and Republic of Ireland: Preliminary findings of a mixed-methods study
Sharma M, Mos, B, McBrien A, Bennett D, Gavin A, Mitchell H, Hawkins S, Irwin G, O'Neill S, Sengupta S, McShane CM. European Journal of Surgical Oncology. 14 May 2025. https://doi.org/10.1016/j.ejso.2025.109963 **POSTER**

Impact of the COVID-19 pandemic on Northern Ireland breast cancer (BC) patients' referral and treatment pathways and short-term survival – findings from a population-based study comparing 2020 and 2018
Sengupta, S. IACR Conference, Belfast. March 2025. **POSTER**

Exploring how time-to-treatment is reported among children and young adults with cancer globally: a scoping review
Jeyaraj, A., Bennett, D. & McShane, C., 25 Feb 2025 **POSTER**

Events & Conferences



Northern Ireland

- Irish Association for Cancer Research Conference 2025, Belfast
- All-Ireland Network for Cancer Research 2025 Symposium, Belfast
- Professor Liam Murray Symposium 2025, Belfast
- Landmark Study on Metastatic Breast Cancer Launch, Belfast
- Health & Social Care Northern Ireland Conference, Belfast

Germany

- ESMO Breast Cancer Annual Congress 2025, Munich

Portugal

- European Network of Cancer Registries and Group for Cancer Epidemiology and Registration in Latin Language Countries Conference 2025, Porto

Turkey

- International Association for Research on Cancer, Izmir

Staff News

Congratulations

In November, Mrs Deirdre Fitzpatrick Cancer Systems Registration Manager (pictured with Prof Ian Greer) marked 25 years service in Queen's University Belfast. Congratulations Deirdre on this amazing achievement!

Congratulations to Sinead Hawkins, Research and Audit Analyst, and her husband Kevin on the birth of Baby Aoife!

Charity Donation

Once again, in lieu of a Staff Secret Santa, Registry staff have made a donation to a local charity. This year's chosen charity was The Air Ambulance, with a donation of £170 made.

AIR AMBULANCE NORTHERN IRELAND CHARITY

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