



Facts about the inequity of cancer in rural and regional Areas

Rural cancer patients are 35% more likely to die within five years of diagnosis than patients in cities.¹ Advances in cancer treatment have not been shared with rural and regional patients.

For some cancers, remote patients were up to three times more likely to die within five years of diagnosis.²

There is a 6% increase in mortality risk for each 100 km increment in distance from the nearest radiotherapy facility.³

Rural Australians miss out on vital radiation services that increase survival and recovery rates for cancer patients. The benchmark for the percentage of those undergoing cancer treatments who should receive radiotherapy is 52%. In NSW just 35% of cancer patients receive radiotherapy.⁴

Radiotherapy often requires daily outpatient treatment for over six weeks. Rural patients need to travel and live away from home for this treatment. In some cases, people choose the type of treatment they have based not on what is needed but on the proximity to home, or worse, they refuse treatment altogether.⁵

There will be 30% more cases of cancer over the next ten years than in the last ten years due to population growth and an ageing population.⁶

38, 872 people in NSW were told they have cancer in 2011. This is expected to rise to 50,967 by 2021.⁷

Waiting times for radiation treatment in the Coffs Harbour region can be up to 50 days, well above the internationally accepted benchmark of 14 days.⁸

Cancer survivors living in rural areas have greater anxiety and distress levels and more emotional wellbeing concerns than cancer survivors living in larger cities.⁹

Bridging the gap

To help bridge the gap in health outcomes between rural and urban patients in NSW, the State Government has amended and increased allowances for travel and accommodation:

Changes to the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS) from 1 January 2012 will see:

Accommodation subsidies of \$43 for single (up from \$33) and \$60 per double (up from \$46) per night.

Reimbursement for car travel up from 15c to 19c per kilometre.

Patients travelling at least 200 kilometres in one week eligible to claim IPTAAS.

The \$40 administration fee waived once a patient's IPTAAS subsidies reach \$1,000.

Patients staying with family and friends when receiving specialist medical treatment will receive a subsidy of \$140 per week, up from \$30 a week.

How we assist

In 2011 we helped 2,009 country people receive the cancer treatment they needed. We accommodated 873 country patients and their carers in Sydney and Wagga Wagga. We helped 1,547 country families pay their petrol, pharmaceutical, grocery or telephone bills.

For more information log on to: www.canassist.com.au

¹ Cancer in Rural Australia, National Rural Health Alliance Fact Sheet 8, May 2009

² Cancer in Australia, NRHA Fact Sheet 8, May 2009

³ *Distance to the closest radiotherapy facility and survival after a diagnosis of rectal cancer in Queensland*, Medical Journal of Australia, 19 Sept 2011

⁴ Professor Chris Milross, Royal Australian College of Radiologists.

⁵ Hospital and Allied Accommodation Australia Committee, November 2009

⁶ *Lessening the Impact of Cancer*, Cancer Institute NSW

⁷ *Lessening the Impact of Cancer*, Cancer Institute NSW

⁸ The Sydney Morning Herald, 12 October 2010

⁹ Psycho-Oncology, Vol 19, Issue 6, June 2010