NAoPri
National Audit of Primary Breast Cancer

National Audit of Primary Breast Cancer
– COSD Roadshows 2024 –

The National Audit of Primary Breast Cancer (NAoPri) aims to report on patients diagnosed with primary breast cancer in NHS hospitals in England & Wales.

The NAoPri builds on the work of the National Audit of Breast Cancer in Older Patients (NABCOP) and for the first time will include women and men of all ages with primary breast cancer.

This leaflet summarises key NAoPri information:
- ✓ Patient inclusion criteria, including ICD-10 codes
- ✓ Key COSD data items for primary breast cancer patients
- ✓ Priority areas for quality improvement across the primary breast cancer pathway
- ✓ Data that will be required to address these priority areas

What data will the audit use?
- Existing national cancer datasets linked to other relevant health care datasets to ↓ burden of data collection.
- Data will be provided by:
  - National Disease Registration Service (NDRS) – England
  - Wales Cancer Network (WCN) – Wales

How will the audit share findings with NHS organisations?
- Annual State of the Nation reports.
- Quarterly online dashboards, to support ongoing local QI.

See the NAoPri resources for "NAoPri Key Data Items" [a list of COSD items of key importance for NAoPri]:

Defining the cohort of patients with primary breast cancer

Definition
Breast cancer which, at diagnosis, has not demonstrated spread beyond the breast or nearby lymph nodes to other parts of the body.

Clinical practice
Non-invasive or invasive breast cancer
Stages 0 to IIIC
No metastatic disease at diagnosis

Identifying pts in routine data
ICD-10 codes (C50; D05)
Stage 0 to stage IIIC
M0/MX stage

Patient cohort
ALL patients including:
- Women + men
- Aged ≥18 years
- Diagnosed in English or Welsh NHS hospital

Important Primary Breast Cancer COSD data items:
- Triple diagnostic assessment
- ALL pathology data items including:
  - Laterality (right vs. left)
  - Staging (pre-treatment & pathological)
  - Tumour grade
  - Tumour size
  - Molecular markers (ER/PR/HER2 status)
- Fitness assessment
- Clinical nurse specialist
- Recurrence

Priority areas for quality improvement identified along the patient pathway

Supportive care services should be available throughout patient care and beyond

Diagnosis:

MDT meeting to discuss treatment options
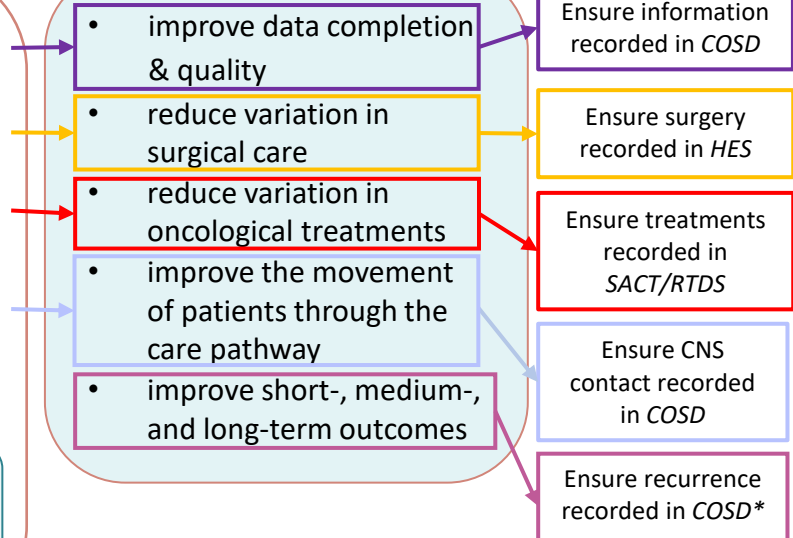
Neoadjuvant therapy *(if needed)*

Surgery

Adjuvant therapy

Follow-up

Patient subgroups highlighted
- Triple negative breast cancer
- Age (young and older)
- Male

- improve data completion & quality → Ensure information recorded in *COSD*
- reduce variation in surgical care → Ensure surgery recorded in *HES*
- reduce variation in oncological treatments → Ensure treatments recorded in *SACT/RTDS*
- improve the movement of patients through the care pathway → Ensure CNS contact recorded in *COSD*
- improve short-, medium-, and long-term outcomes → Ensure recurrence recorded in *COSD**

*Also see NHS Digital guidance on recording recurrence in COSD: https://digital.nhs.uk/ndrs/data/data-sets/cosd/cosd-user-guide/introduction---how-to-record-recurrence-progression-and-transformations