

# The use of social care services by patients aged 50 and over diagnosed with colorectal cancer in Scotland

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## Background and aim

Increasingly, due to welcome improvements in diagnosis, treatment and survival, cancer is recognised as a disease that extends long after treatment has ended. Despite this, we know very little about how much support people living with and surviving cancer receive, especially in the case of social care support (also known as long-term care). We use a unique linked dataset containing routine social care, hospital and cancer registry data to explore the utilisation of social care services for people aged 50 and over, living with and surviving cancer in Scotland. To our knowledge, this is the first time the social care use of patients affected by cancer has been documented in Scotland. In particular, we focus on colorectal cancer (CRC).

## Methods

We use a linked dataset containing routine social care, hospital and cancer registry data for the Scottish population aged 50 and over in the financial year 2015/16. Our approach involves several methods to estimate the effect of a CRC diagnosis on social care use. Firstly, we conduct difference in means tests. Secondly, we estimate two-part models of the utilisation of social care for the CRC, other cancer and non-cancer groups. Lastly, we use propensity score matching.

## Results

Preliminary results reveal that the likelihood of receipt of social care services is higher for those diagnosed with CRC compared to those without a cancer diagnosis. Further, individuals with a non-CRC cancer diagnosis are more likely to receive social care services compared to those without a cancer diagnosis, but they are less likely to receive social care compared to those with a CRC diagnosis. Further, in terms of the number of services received, CRC patients and those with other types of cancer receive fewer services when compared to those without a cancer diagnosis.

## Conclusion

Our paper has demonstrated that a CRC diagnosis has a significant impact on an individual's use of social care services. However, conditional on receiving social care, the number of services received is lower for individuals with CRC. Further research is required to understand whether the needs of those individuals are being met.