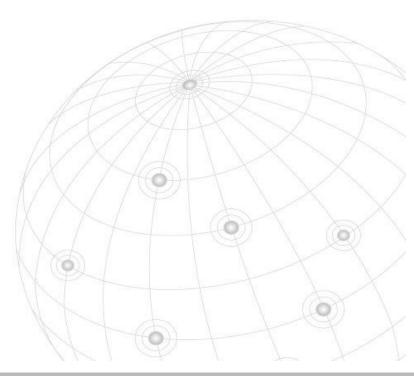




### **National Services Division**

# **Aberdeen Somatic Cancer Testing**

22 October 2021





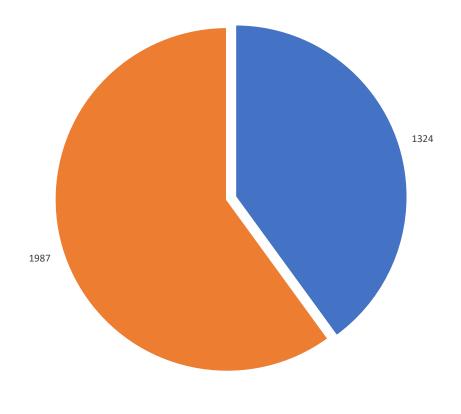
### Discussion

- Analysis based on Aberdeen data provided for Somatic Testing for Solid Tumours and Haematological Malignancies 2019 -2020,
  - Germline testing has been analysed and provided separately,
- Data Analysis to consider how current workload could be illustrated and support future capacity planning for the SGLC service and potential what-if scenarios based on future and changing demand requirements.



## Aberdeen Lab Somatic Testing 2019 – 2020 Samples In

Aberdeen 2019-2020 Somatic Data







## Aberdeen Lab Somatic Testing 2019 – 2020 Samples In



Solid Tumour Haematological Malignancies



#### Aberdeen Samples Received Solid Tumour 2019 - 2020

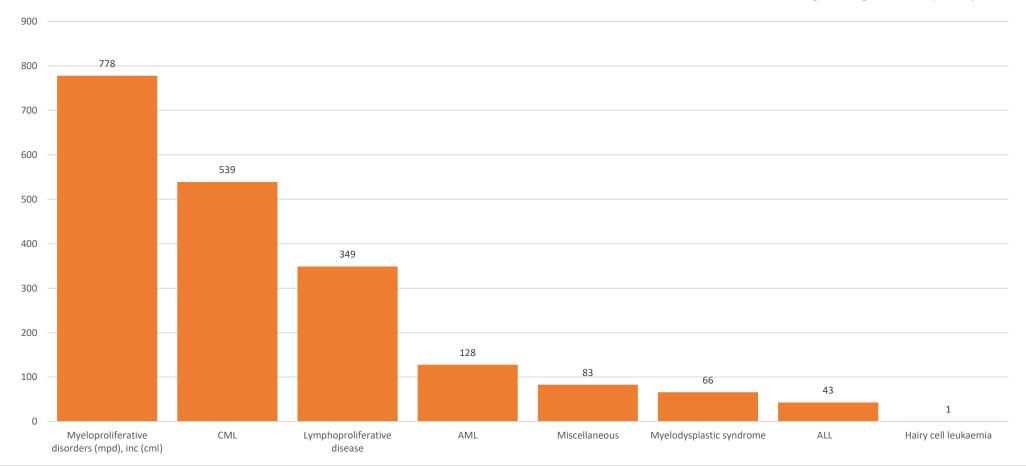
Colorectal cancer Lung cancer Urgent solid tumours Routine solid tumours Melanoma (malignant, Ovarian cancer Lung cancer, cell free Endometrial cancer Thyroid cancer metastatic) dna



Aberdeen Solid Tumour Samples In by Disease

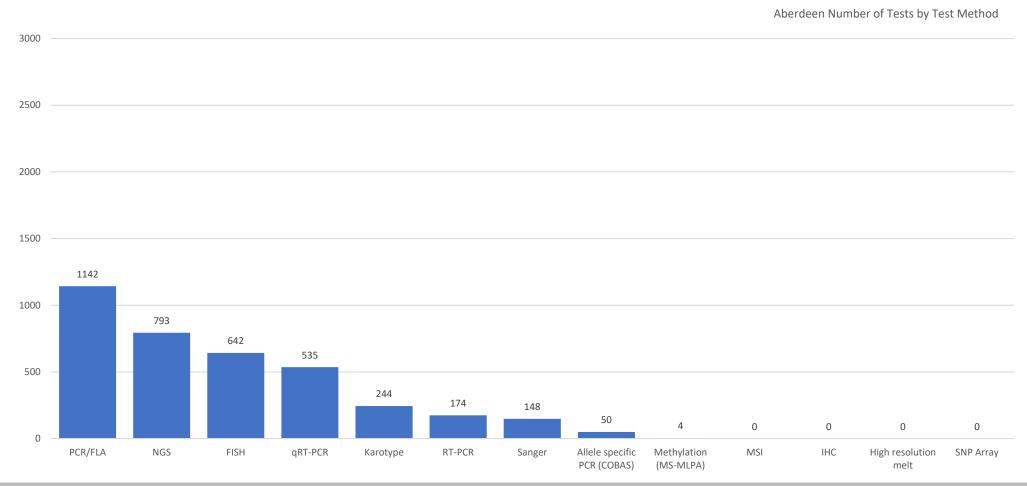
#### Aberdeen Samples Received – Haematological Malignancies 2019 - 2020

NHS Lothian Haematological Malignancies Sample In by Disease





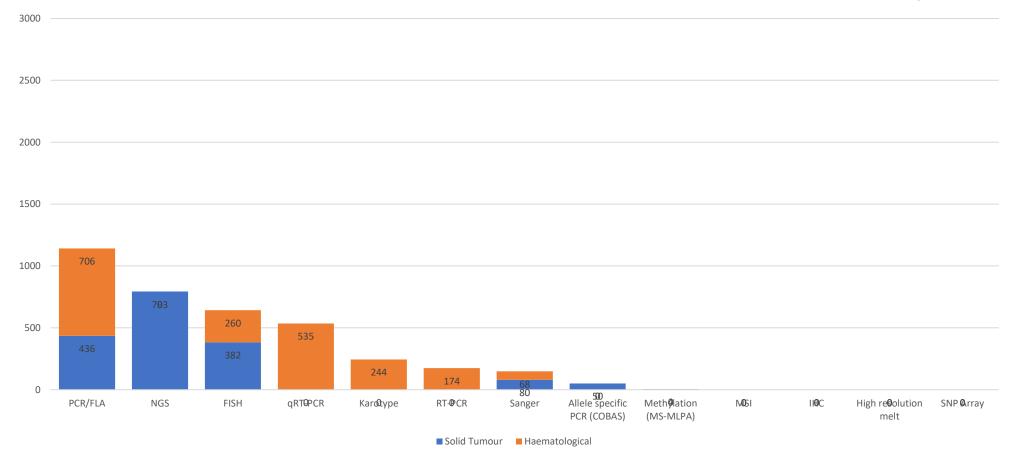
### Aberdeen Number of Tests by Method





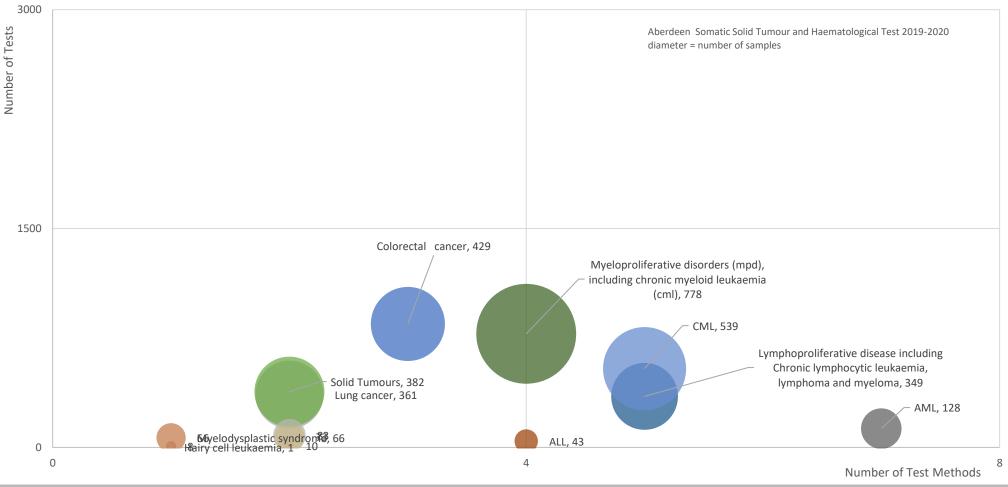
## Aberdeen Number of Tests by Method – Solid Tumours and Haematological Malignancies

Aberdeen Number of Somatic Tests by Test Method





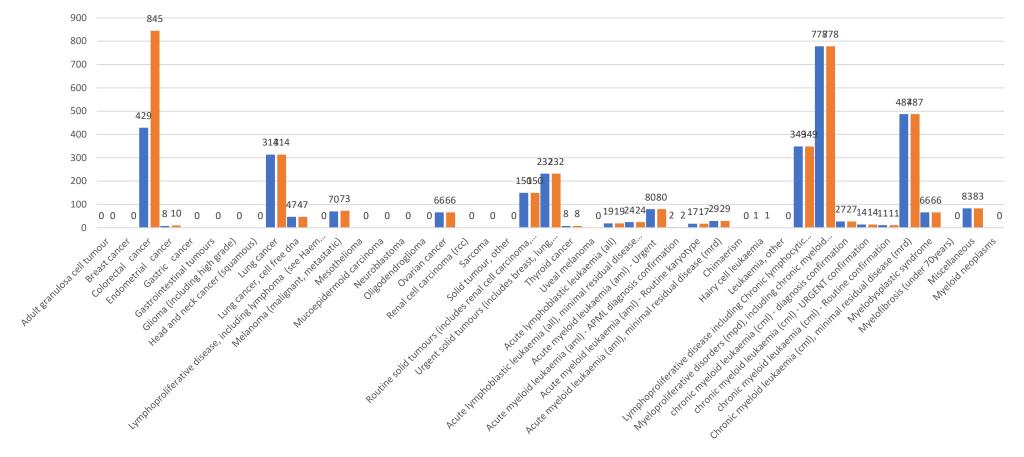
## Aberdeen Somatic Testing – Activity for Solid Tumours and Haematological Malignancies





#### Aberdeen 2019-2020 Somatic Samples In and Tests by Cancer Type

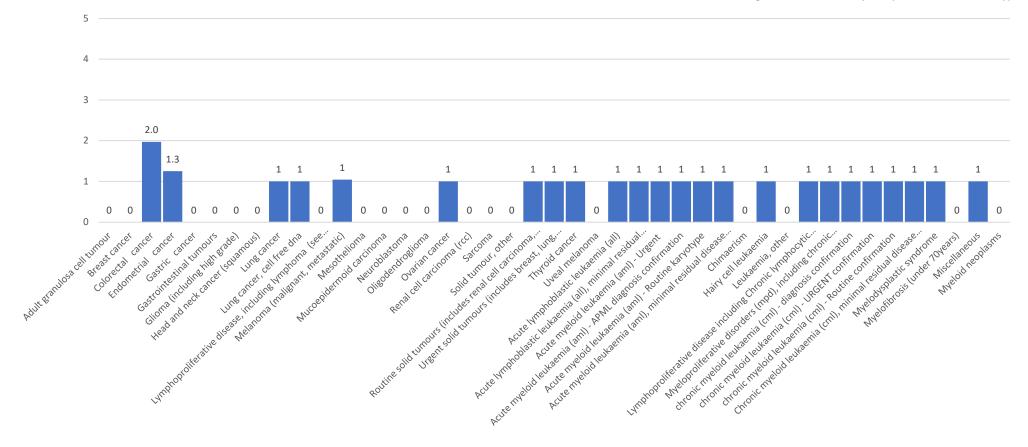
Aberdeen 2019-2020 Somatic Cancer Samples In and Test by Cancer Type





#### Aberdeen Average Number of Tests by Sample for each Cancer Type

Aberdeen 2019-2020 Somatic Average Number of Test by Sample for each Cancer Type





#### Discussion

- Complexity and duration of tests is not considered at this point in the analysis,
- Analysis does not consider resources or equipment required to meet demand,
- There are clear and distinct patterns in the data related to the "volume" of activity,
- Not to confuse high volume of samples with relatively few tests and low volumes of samples with higher numbers of test and complexity,
- Workload should be considered as a function of the number of samples, tests and reports which can all be quantified,
- TATs not analysed at this point,
- Explore explicit link to Outcomes for Patients for different Categories and Types.

