



SarcomaUK
The bone & soft tissue
cancer charity

sarcoma.org.uk

Impact of Sarcoma: National Sarcoma Survey 2020

Technical Report



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1. Executive summary

1.1. About sarcoma and the survey

Sarcomas are uncommon cancers that can affect any part of the body, on the inside or outside, including the muscle, bone, tendons, blood vessels and fatty tissues. Sarcoma diagnoses make up about 1.4% of all cancer diagnoses in the UK, and 15 people are diagnosed with sarcoma every day in the UK (about 5,300 people a year).

There are around 100 different sub-types of sarcoma, which can be largely split into three groups:

- soft tissue sarcomas (e.g. leiomyosarcoma, liposarcoma)
- bone sarcomas (e.g. chondrosarcoma, osteosarcoma)
- gastro-intestinal stromal tumours (also known as GISTs).

Every day, Sarcoma UK hears about the issues faced by patients and their families. However, data collection by the NHS is incredibly poor for sarcoma. In turn, this makes it difficult to persuade the NHS and Government to make the changes that are desperately needed and long overdue if the care given to sarcoma patients is to improve. Accurate and high-quality data is essential to monitor and improve outcomes for patients, and drive research progress.

To try and address this, in 2015, Sarcoma UK worked with Quality Health to create one of the most comprehensive surveys undertaken into the experiences of people diagnosed with sarcoma in the UK. Data about patient experience, from their first concerns that something was wrong, through their diagnosis, treatment, and follow-up, were collected. It revealed that sarcoma patients encounter some of the poorest experiences of any cancer, significantly lower than those diagnosed with the most common cancers.

Following the success of this survey and the invaluable data it collected, Sarcoma UK decided to re-run the survey in 2020 with a broadened purpose: to collect data on sarcoma patient experience in order to build an evidence-base for influencing. This was also expanded beyond adult sarcoma patients to include children with sarcoma and family and carers of those with sarcoma.

Sarcoma UK shared the survey through its supporter network and on social media. There were 1,117 responses to the survey:

- 661 patients over 16
- 56 parents of patients under 16
- 400 family and carers of sarcoma patients

Adult patient demographics:

- 71% of respondents had soft tissue sarcoma, 16% had a bone sarcoma, and 14% had a GIST.
- 71% were female, 29% were male.
- Over a third of the respondents (38%) were aged between 41 and 55; 28% were aged between 56 and 70; and 3% were aged 16 to 24; 20% were aged 25 to 40; 9% were aged 71-80, and 1% were older than 80.
- A vast majority (85%) were treated in England, 10% in Scotland, and 2% for each of Wales and Northern Ireland.

Once again, the results from the survey have created a robust dataset. The data has allowed us to build a clearer picture of patients' experience of the diagnosis, treatment and emotional impact of sarcoma. It has both drawn attention to and given evidence for areas where further policy and campaigning work can be undertaken.

1.2. Awareness of sarcoma and early diagnosis

This survey found sarcoma patients were no more likely to know about sarcoma than the general public, with 79% not having heard about sarcoma before their diagnosis. This is in line with a YouGov poll commissioned by Sarcoma UK in 2019, in which 75% of the public said they did not know what sarcoma was. Even among people who had heard of sarcoma, 30% didn't know what the symptoms are.

The difficulty faced is that while there are numerous signs and symptoms associated with sarcomas, they are often vague (such as a lump), can be attributed to other health problems, and sometimes signs are only noticed once the tumour is causing issues internally (such as for GISTs and other retro-peritoneal sarcomas). A quarter (25%) of 16-24 year olds waited more than a year after their symptoms began before going to see a primary care professional.

Further to this, primary care professionals are not used to seeing sarcomas; during a working lifetime a general practitioner (GP) may see many hundreds of benign tumours, but can only expect to see one or two patients with bone or soft tissue sarcomas. Consequently, GPs do not recognise the symptoms described to be a sarcoma, and either send the patient away, or put them on the wrong treatment. 22% of respondents were told at their first appointment with a primary care professional that their symptom(s) wasn't serious. One in 6 (17%) were given treatment for another condition after this appointment.

It is widely acknowledged that an early and accurate diagnosis can have a significant impact on the outcome for cancer patients, and this is certainly true for sarcoma. However, delays in diagnosis, or indeed incorrect diagnosis, are not uncommon. 35% of respondents (including half of all bone sarcoma patients) saw a healthcare professional more than 3 times before they were referred for further tests. Furthermore, analysis of free text comments around diagnosis showed that the time before being referred was the most talked-about theme for the 16+ group.

Issues with diagnosis are commonplace in sarcoma and can be devastating for patients. Around a third of respondents (30%) took more than 6 months to receive an accurate diagnosis, with 17% waiting more than a year. In order that sarcoma diagnostic tests are seen by specialist pathologists, and that patients are cared for by experts in the cancer field,

the NHS England Service Specification for Sarcoma makes clear that all patients suspected of having sarcoma should be referred into a sarcoma specialist centre. Shockingly, 13% of adult respondents were not treated by a specialist sarcoma team.

1.3. Impact of sarcoma

Although sarcomas are a heterogeneous group of bone and soft tissue cancers, one clear linking factor is the emotional impact they have. Indeed, psychosocial wellbeing is poorer than the general population, regardless of whether patients have amputation, limb-sparing surgery, or rotationplasty.

90% of respondents said that the diagnosis and treatment of sarcoma negatively affected their overall mental health/emotional wellbeing (20% answered “slightly”; 45% to “some extent” and 25% “severely”). Despite this, 40% said they were not given enough emotional support by hospital staff (formal support, such as counselling).

Anxiety was shown to be one of the most common late effects impacting day-to-day life by over half of patients, with the number one largest worry being whether the cancer would come back.

Carers and family also said that caring for someone with sarcoma had a huge impact on their lives – almost a quarter (24%) said they spent more than 50 hours a week providing care and support. 81% of respondents said that sarcoma treatment of their family or friend had a temporary or permanent impact on their ability to work or complete education, with 18% having to permanently stop work or education.

Mental health worries were clear for families and carers of sarcoma patients. Almost all (94%) said that they felt either depressed or anxious more often since the diagnosis or constantly felt depressed or anxious. When family and carers were asked what the biggest improvements to sarcoma services would be, support was the most popular choice.

1.4. Information and support

For cancer patients, getting the right information at the right time can make a big difference. It can help people make decisions about treatment, prepare better for treatment, and also cope with the adverse effects better. This includes reducing depression, increasing satisfaction with treatment, improving communication with family and even improving quality of life. However, in our survey, 45% of respondents said they were not given enough information at diagnosis.

Patient education and meeting patients’ information needs is a fundamental aspect of patient-centred care – it is only when patients are fully informed that they can become an active partner in the process of their care. Despite this, over half (54%) were not given a written care plan telling them all the information they needed about their sarcoma treatment from start to finish. However, the NHS England Five Year Forward View and the Cancer Taskforce Strategy outlines a commitment to ensuring that ‘every person with cancer has access to the elements of the Recovery Package [including this care plan] by 2020’.

Despite local support groups existing, most patients were not aware of them. Over half (52%) were not told by their medical teams about local cancer groups/charities, and of the remaining half, only 54% were told about a sarcoma-specific group.

2. Background and methodology

2.1. Background

In 2015, Sarcoma UK ran its first National Sarcoma Survey. This looked to provide information on the state of sarcoma patient experience in the UK. Much has changed across the UK's health services in the last 5 years, and as such it is logical that the experience of patients is unlikely to have remained the same.

Last year, Sarcoma UK created a new policy and public affairs function within the charity, which looks to influence health policy in order to improve the sarcoma landscape in the UK. This includes areas such as early diagnosis, referral into sarcoma specialist centres, and access to the best treatments. Such influencing requires the creation of robust data to demonstrate that issues exist and to provide potential solutions. Therefore, this survey was designed and run to collect such data.

2.2. Questionnaire design and development

The survey consisted of three questionnaires, to capture the experiences of a range of people affected by sarcoma: a 16+ questionnaire, a parents of under 16s' questionnaire, and a family and carers' questionnaire. These were designed and developed in October and November 2019. This involved a detailed process of drafting, reviewing, testing and revising the questions. Quality Health worked closely with Sarcoma UK on designing and agreeing the final question set, which goes deeper than last time in an attempt to get richer data.

As a part of the process, cognitive testing was carried out with nine volunteers with a range of types of sarcoma, who were willing to fill in the questionnaire and discuss various aspects of its design. This included comments on whether the answer options accurately represented their experiences, if there was anything missing, and the length of the survey. After these interviews, the feedback was provided to Sarcoma UK, who agreed amendments. In addition, the draft questionnaires were reviewed by a Sarcoma Clinical Nurse Specialist who provided further comments, with a particular focus on the suitability of the questions about under 16s. These exercises contributed to the refinement of the questionnaires into finished versions.

2.3. Sample

The survey was accessible via an anonymous, online link, and was promoted via Sarcoma UK's networks and on social media. In order to maximise participation and ensure a high number of responses, people affected by any type of sarcoma were eligible to respond, and the combination of the 16+ and parents' questionnaires welcomed the experiences of people of all ages with sarcoma.

As the survey used a non-probability sample (as respondents were self-selecting), it is not possible to perform statistical tests on the data. However, the high overall response rate achieved means that a robust data set has been gathered and meaningful conclusions can be drawn.

2.4. Timescales and fieldwork

The fieldwork was undertaken between 2 December 2019 (initial send out date) and 3 February 2020 (close date). The respondents were able to complete the questionnaire online, or over the phone if they preferred, and there were helpline and language line facilities available throughout the fieldwork.

3. Responses

3.1. Response rate

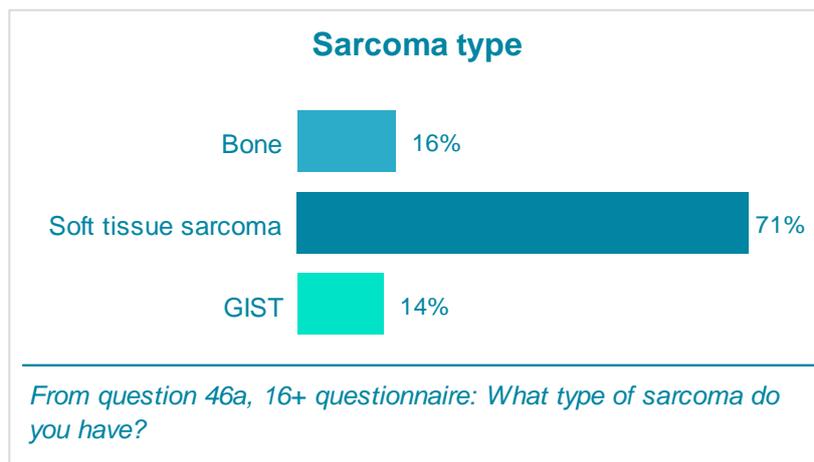
The number of responses for each of the questionnaires was as follows:

Adult	661
Parents of Under 16s	56
Family and Carers	400
Total	1,117

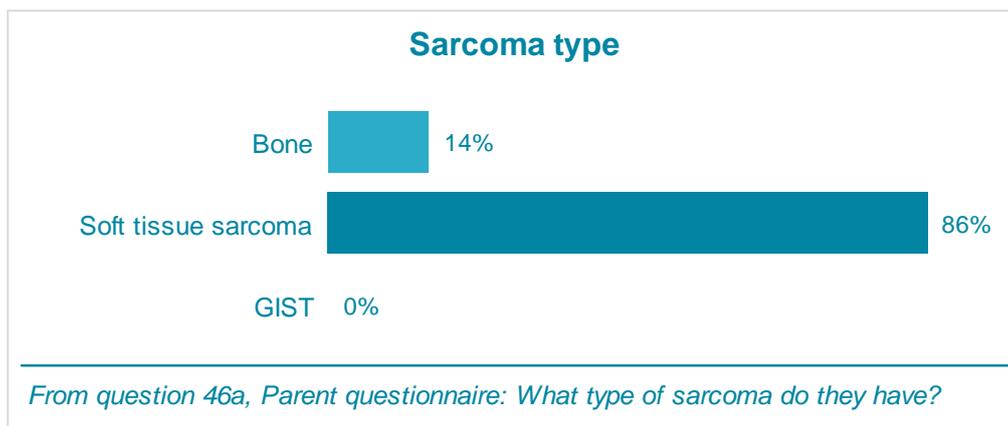
3.2. Respondent characteristics

Sarcoma type

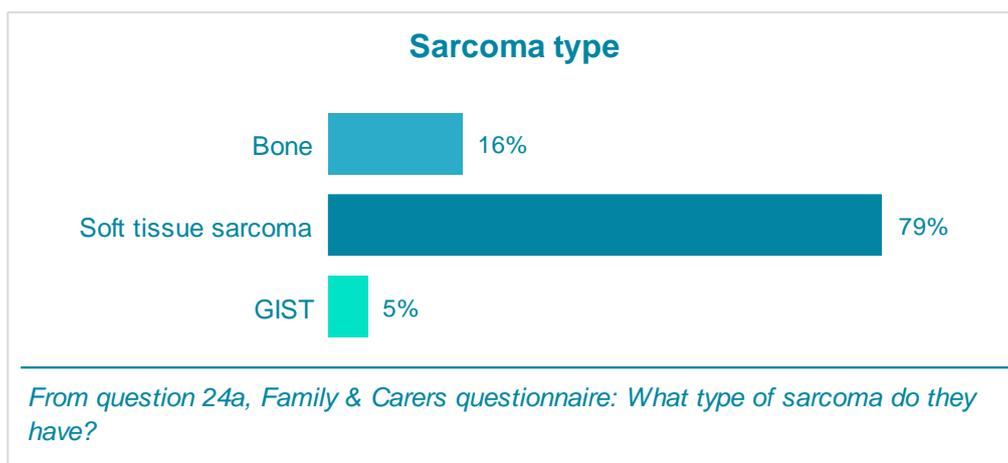
For the 16+ questionnaire, 71% of respondents said they have soft tissue sarcoma, 16% said they have bone sarcoma and 14% said they have GIST. (24 people did not answer this question.)



For the parents of under 16s questionnaire, 86% of respondents said their child has soft tissue sarcoma, and 14% said their child has bone sarcoma.



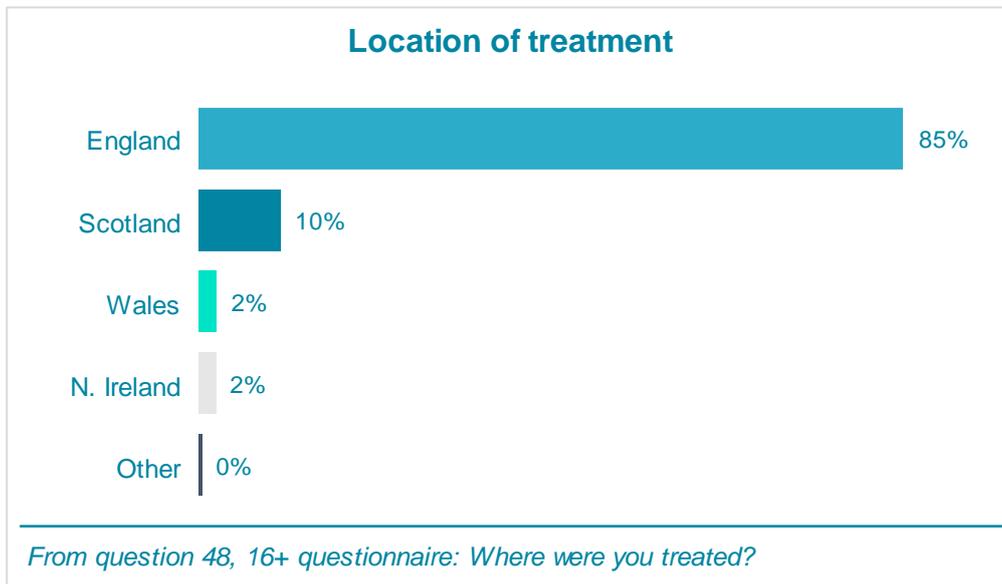
For the family and carers questionnaire, 79% of respondents said their family member or friend has soft tissue sarcoma, 16% said their family member or friend has bone sarcoma, and 5% said their family member or friend has GIST. (20 people did not answer this question.)



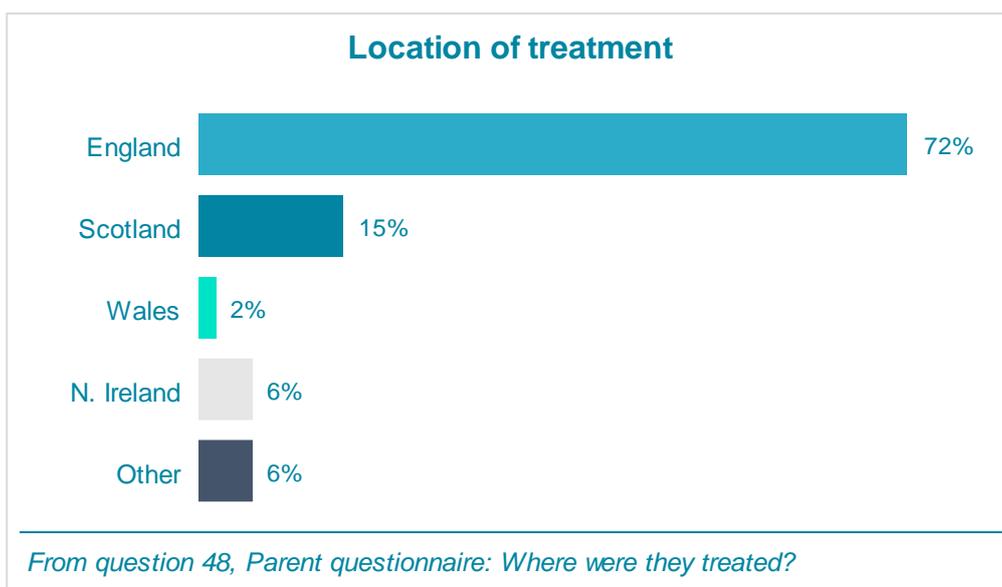
The full set of subtypes is included with this report as Appendix B5 and the list of sarcoma locations are included as Appendix B4.

Location

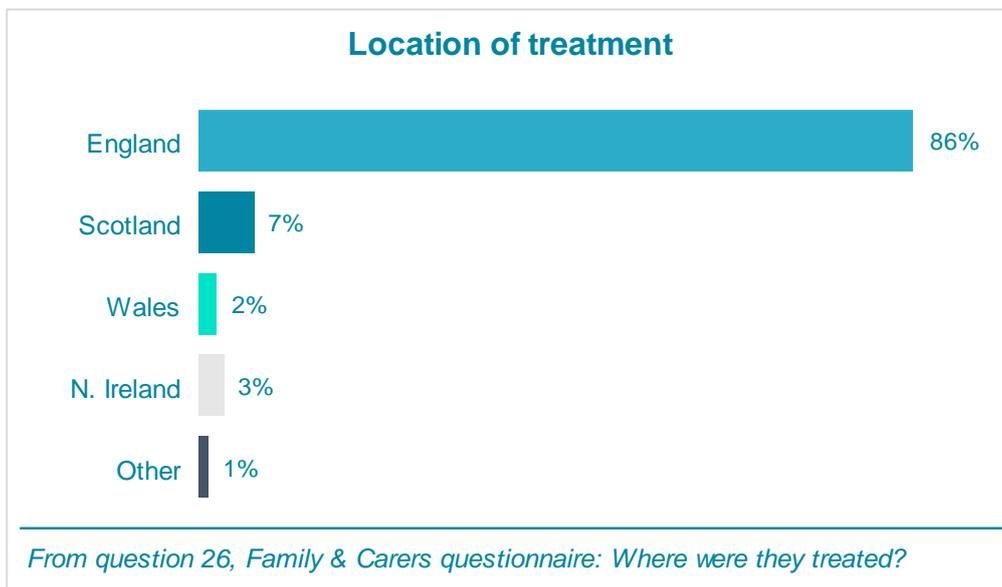
For the 16+ questionnaire, 85% of respondents said they were treated in England, 10% said they were treated in Scotland, 2% said they were treated in Wales, 2% said they were treated in Northern Ireland, and 0% (3 respondents) chose 'other'. (16 people did not answer this question.)



For the parents of under 16s questionnaire, 72% of respondents said their child was treated in England, 15% said their child was treated in Scotland, 6% said their child was treated in Northern Ireland, 2% said their child was treated in Wales, and 6% chose 'other'. (2 people did not answer this question.)

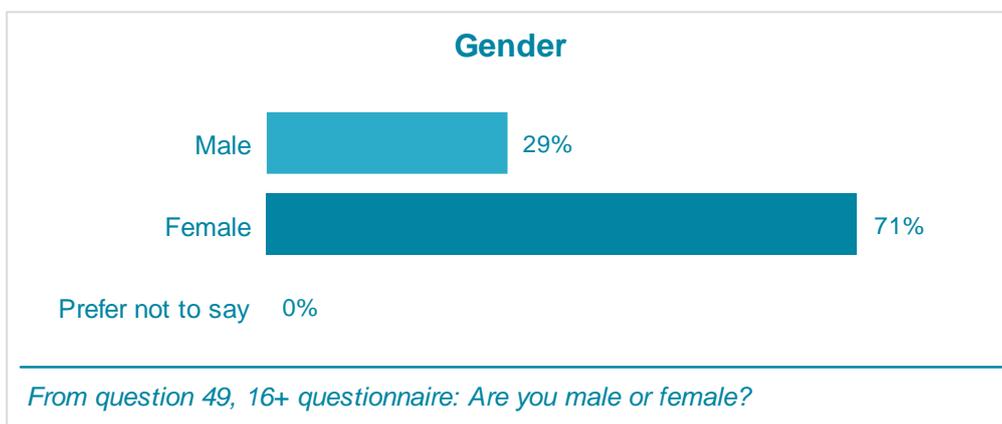


For the family and carers questionnaire, 86% of respondents said their family member or friend was treated in England, 7% said their family member or friend was treated in Scotland, 3% said their family member or friend was treated in Northern Ireland, 2% said their family member or friend was treated in Wales, and 1% chose 'other'. (16 people did not answer this question.)

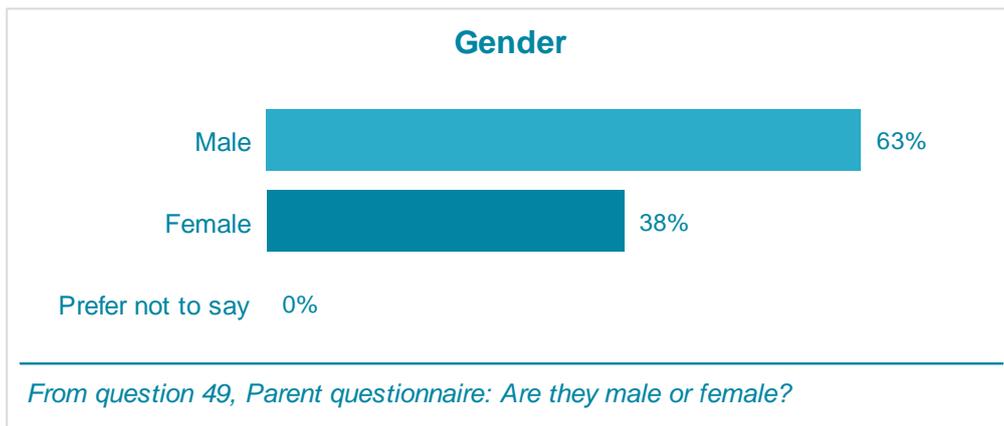


Gender

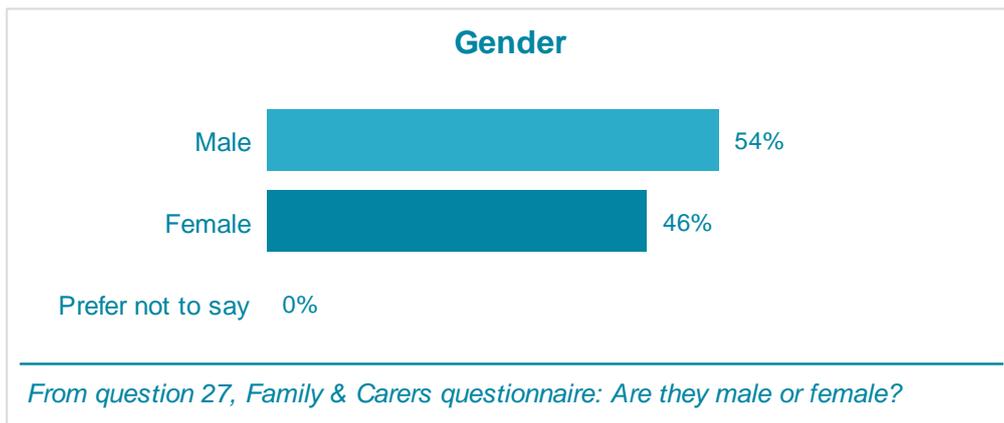
For the 16+ questionnaire, 71% said they are female and 29% said they are male. (6 people did not answer this question.)



For the parents of under 16s questionnaire, 63% of respondents said their child is male and 38% said their child is female.

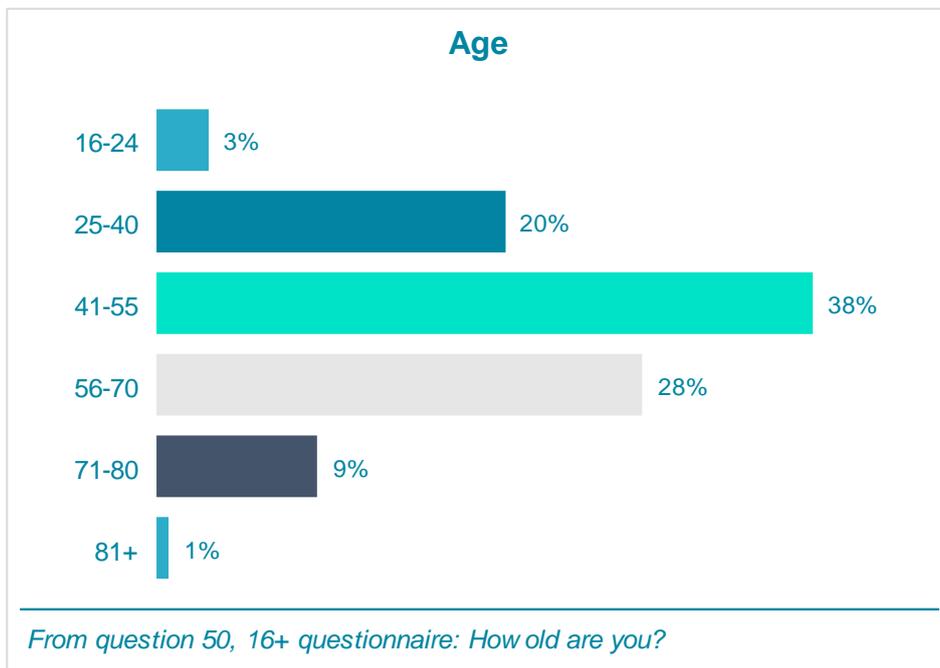


For the family and carers questionnaire, 54% of respondents said their family member or friend is male, and 46% said their family member or friend is female. (6 people did not answer this question).

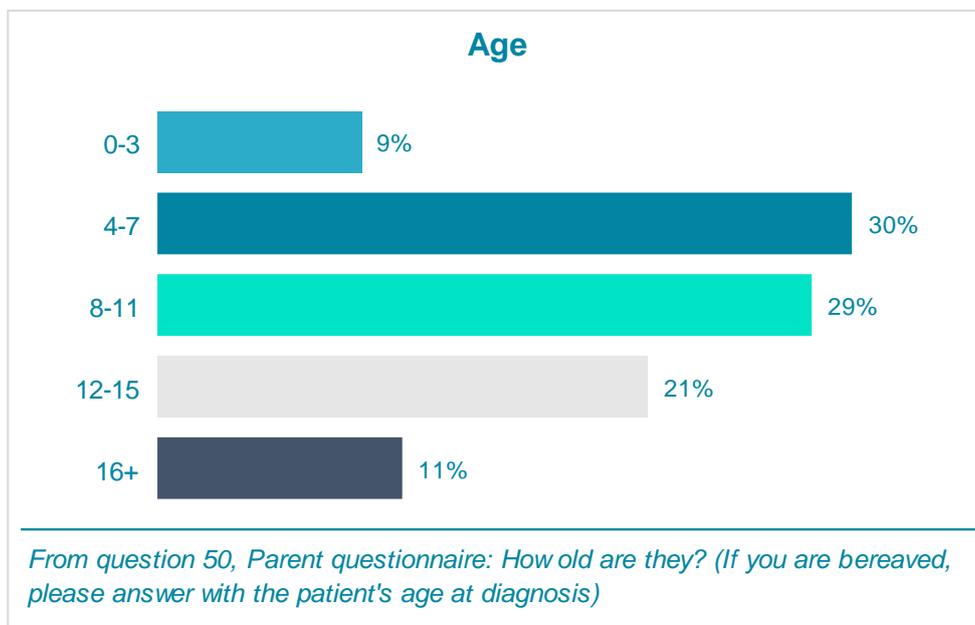


Age

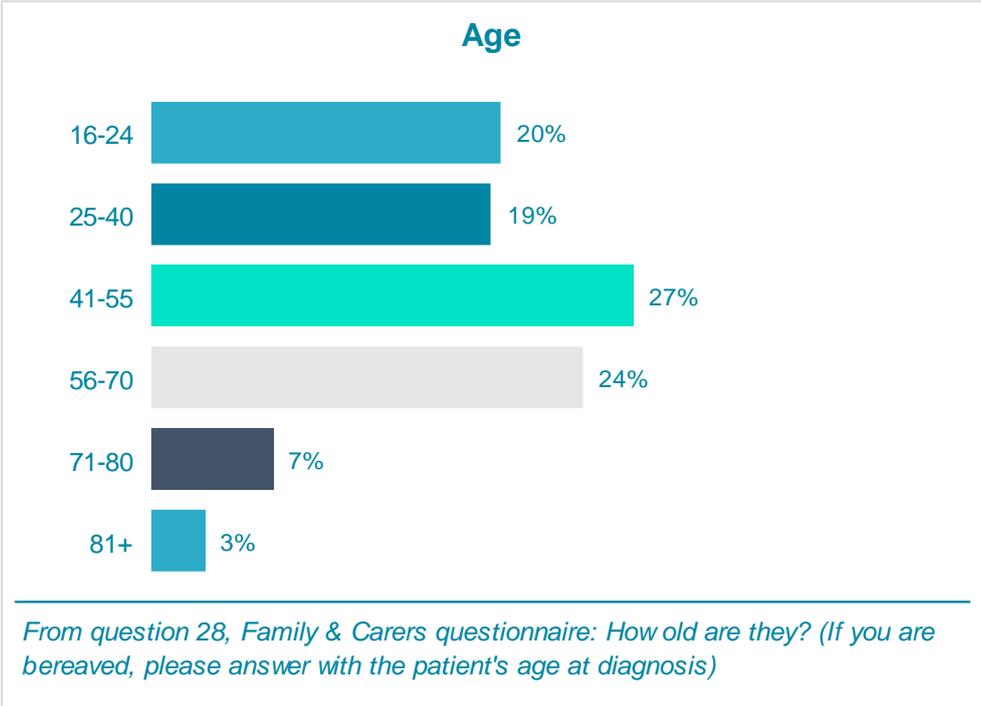
For the 16+ questionnaire, 3% of respondents said they were 16-24, 20% were 25-40, 38% were 41-55, 28% were 56-70, 9% were 71-80 and 1% were 81+. (1 person did not answer this question.)



For the parents of under 16s questionnaire, 9% of respondents said their child is 0-3, 30% were 4-7, 29% were 8-11, 21% were 12-15 and 11% were 16+.



For the family and carers questionnaire, 20% of respondents said their family member or friend is 16-24, 19% were 25-40, 27% were 41-55, 24% were 56-70, 7% were 71-80 and 3% were 81+. (8 people did not answer this question.)



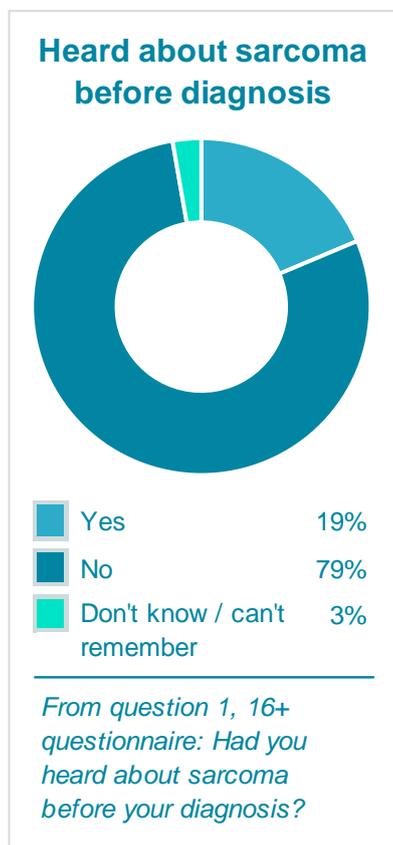
4. Results – 16+ Questionnaire

4.1. Diagnosis

Sarcoma awareness

19% of respondents had heard of sarcoma before their diagnosis.

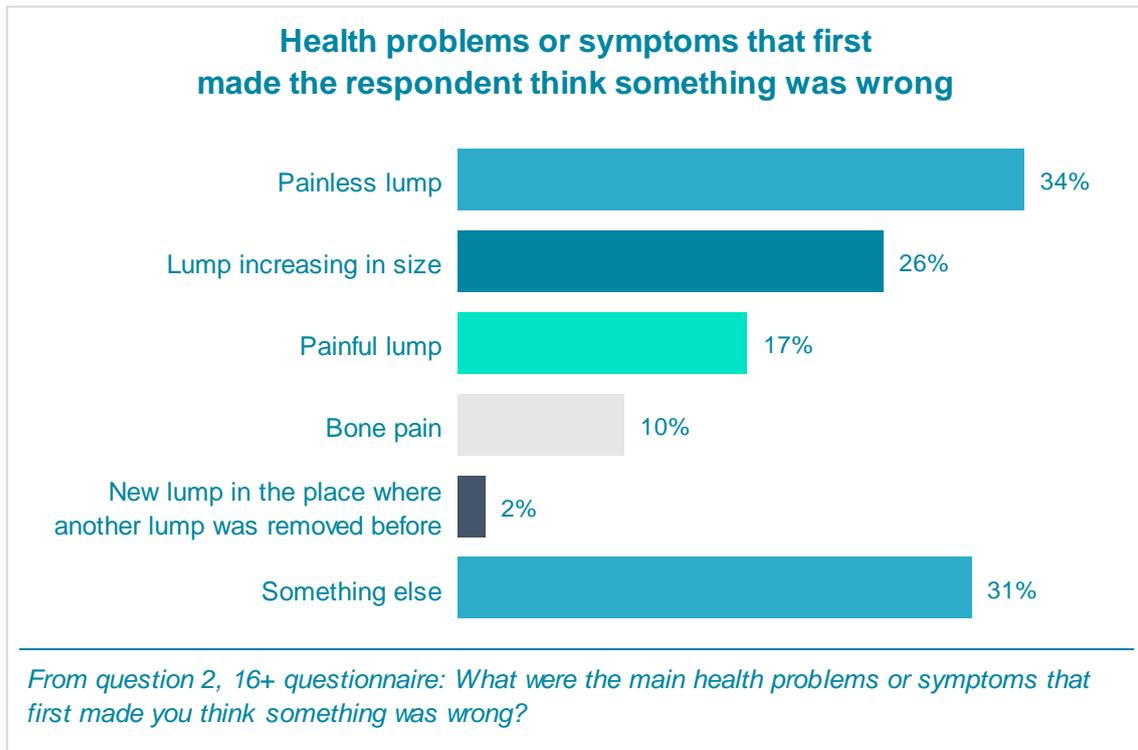
(Q1, 16+ Questionnaire)



Also, around a fifth (**21%**) of the family and carers had heard of sarcoma before their family member / friend was diagnosed. (Q1 Family & Carers Questionnaire)

Main symptoms experienced

When asked what were the main health problems or symptoms that first made people think something was wrong – of the symptoms listed, a painless lump was the most common (**34%**), followed by a lump increasing in size (**26%**), a painful lump (**17%**), bone pain (**10%**) and a new lump in the place where another lump was removed before (**2%**). (Q2, 16+ Questionnaire)



31% of respondents chose 'something else'. The counts of 'something else' responses are included with this report as Appendix B1.

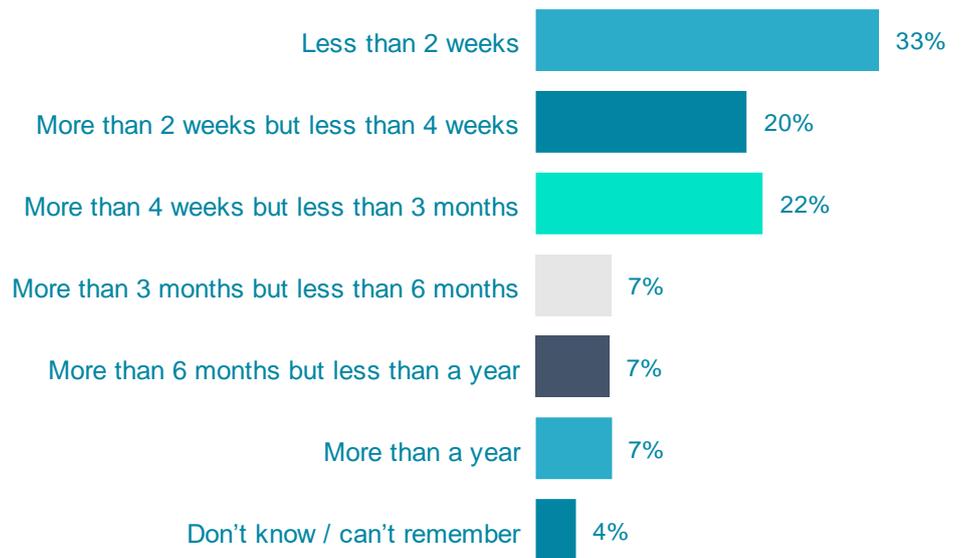
In addition, when the family and carers were asked if their family member / friend had mentioned they had problems or symptoms, the most common choices, again, were a lump increasing in size (**30%**) and a painless lump (**27%**). (Q3 Family & Carers Questionnaire)

28% chose 'something else'. The counts of 'something else' responses are included with this report as Appendix B1.

Time before seeing a healthcare professional

Nearly a third of respondents (**33%**) said it was less than two weeks between thinking something might be wrong with them and first visiting a GP, nurse or going to A&E. **20%** said it was between 2 and 4 weeks, and a further **22%** said between 4 weeks and 3 months. **7%** said between 3 months and 6 months, **7%** said between 6 months and a year, **7%** said more than a year, and **4%** said they didn't know or couldn't remember. (Q3, 16+ Questionnaire)

Time between patient first thinking something might be wrong and first appointment with a GP/Nurse or visit to A&E

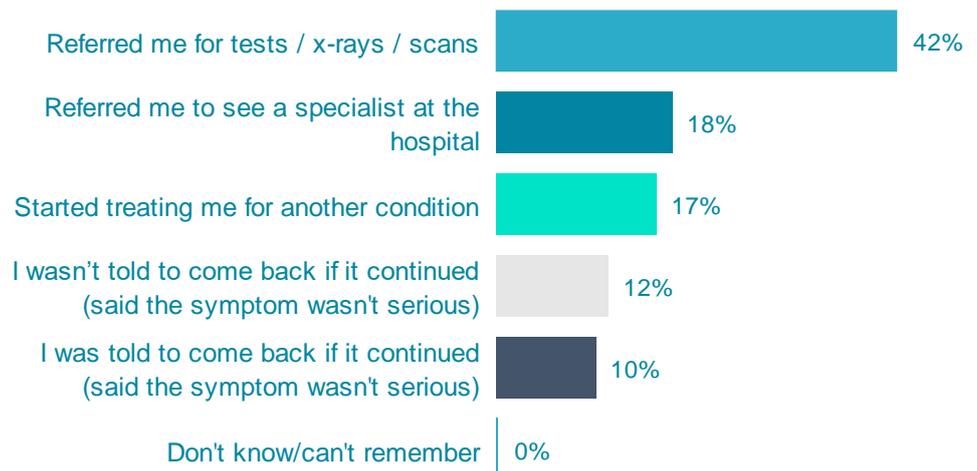


From question 3, 16+ questionnaire: How long was it from the time you first thought something might be wrong with you until you first saw a GP, Nurse or went to A&E?

Outcome of initial visit to a healthcare professional

Nearly half (**42%**) said this healthcare professional referred them for tests / x-rays / scans. A further **18%** were referred to see a specialist at the hospital. **17%** started treatment for another condition, **12%** were told to come back if it continued and **10%** were told not to come back if it continued. (Q5, 16+ Questionnaire)

What the healthcare professional first seen about main health problems or symptoms said/did

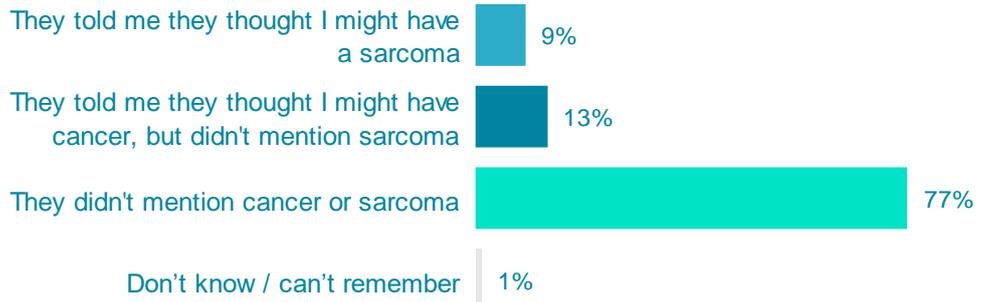


From question 5, 16+ questionnaire: What did this healthcare professional say / do?

Mention of sarcoma at initial appointment

Of the respondents who were referred for further tests or to see a specialist, most (77%) said that sarcoma or cancer wasn't mentioned at this stage. 9% reported that the healthcare professional said they might have sarcoma and 13% said the healthcare professional told them they might have cancer but did not mention sarcoma. (Q6, 16+ Questionnaire)

Specific reference to sarcoma during healthcare professional's diagnosis

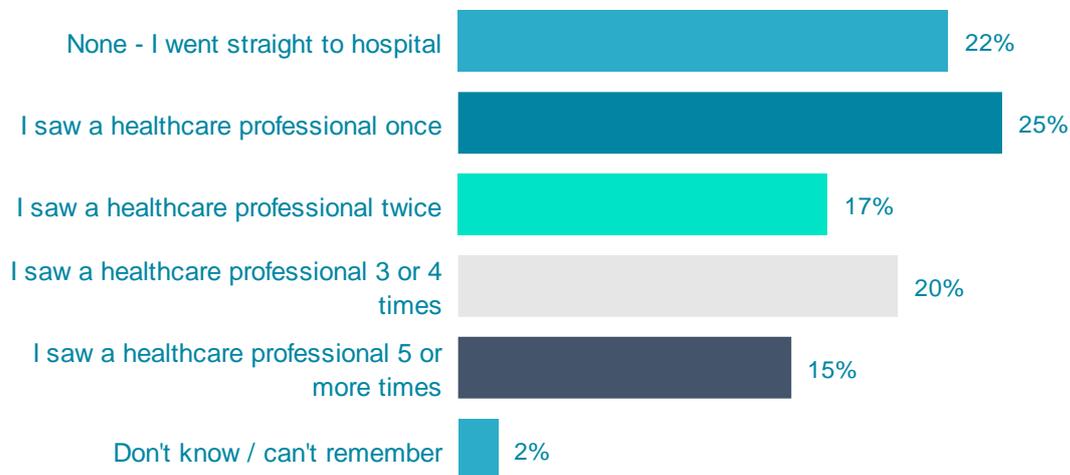


From question 6, 16+ questionnaire: Did the healthcare professional tell you that they thought you might have a sarcoma?

Number of visits before referral

Respondents were fairly evenly distributed in the amount of times they saw a healthcare professional before being referred for further tests. 25% saw a healthcare professional once, while 15% saw a healthcare professional five or more times. (Q7, 16+ Questionnaire)

How many times the patient saw a healthcare professional about their symptoms prior to referral for further tests



From question 7, 16+ questionnaire: Before you were referred for further tests, how many times did you see a healthcare professional about the symptoms you had?

Analysis confirmed that those who saw a healthcare professional more times before being referred were more likely to say that their overall mental health / emotional wellbeing had been negatively affected (C4). Please see 5.4 for all additional cross tabulation analysis.

Starting treatment for another disease

Nearly a quarter (23%) of respondents that they had started treatment for another disease. (Q10, 16+ Questionnaire)

Respondents were invited to specify what disease. This included comments such as:

'I was on the list to have ovarian surgery but, days before, I was told it was sarcoma.'

'Kidney infection.'

'They were treating a lump as potentially breast cancer.'

'Fibroadenoma.'

'I was repeatedly given antibiotics for an infected cyst. I then had day surgery to remove the cyst. They removed the part of the tumour that was visible.'

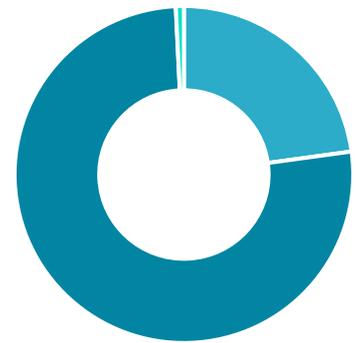
'Not disease but GP attempted to aspirate my "ganglion" to then find out it was a solid mass.'

'Told to take paracetamol for a sprained foot.'

'Lump was diagnosed as cyst benign.'

'Iron tablets for anaemia.'

Patient started treatment for another disease

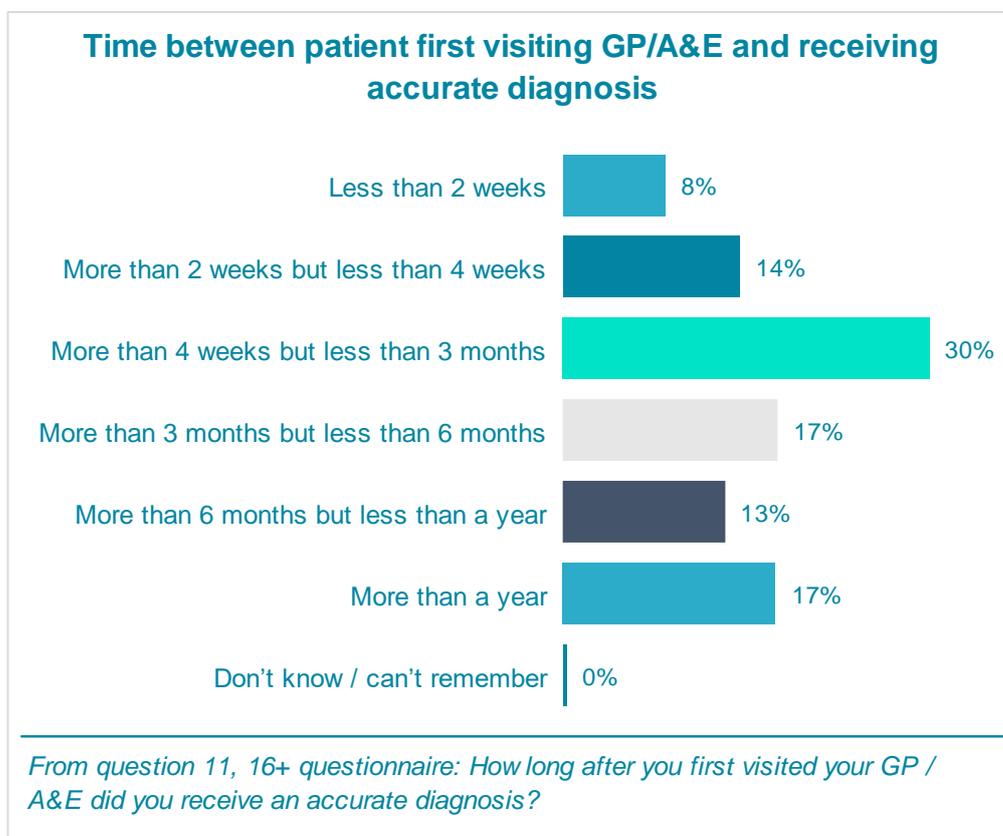


Yes	23%
No	76%
Don't know / can't remember	1%

From question 10, 16+ questionnaire: Did you start treatment for another disease?

Timeframe for diagnosis

When asked how long after first visiting a healthcare professional people received an accurate diagnosis, the most popular choice was more than four weeks but less than three months (**30%**). (Q11, 16+ Questionnaire)



Analysis confirmed that more than half of those who waited for more than a year for an accurate diagnosis, had to see a healthcare professional five or more times (D1). It also showed that the length of time to receive an accurate diagnosis did not affect the extent to which people's overall mental health and emotional wellbeing is negatively affected. Please see 5.4 for all additional cross tabulation analysis.

How diagnosis was delivered

The majority of respondents (**79%**) received their diagnosis from a consultant. **6%** were told by a GP, **5%** were told by a nurse and **2%** got a clinic letter. (Q12, 16+ Questionnaire)

9% chose 'other'. This included comments such as:

'Got clinic text message.'

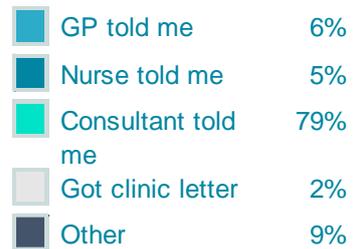
'Read it in patient portal. I was originally told it was benign.'

'Phone call from consultant secretary!'

'After an MRI.'

'Surgeon who removed the tumour told me.'

Source of first communication about sarcoma diagnosis

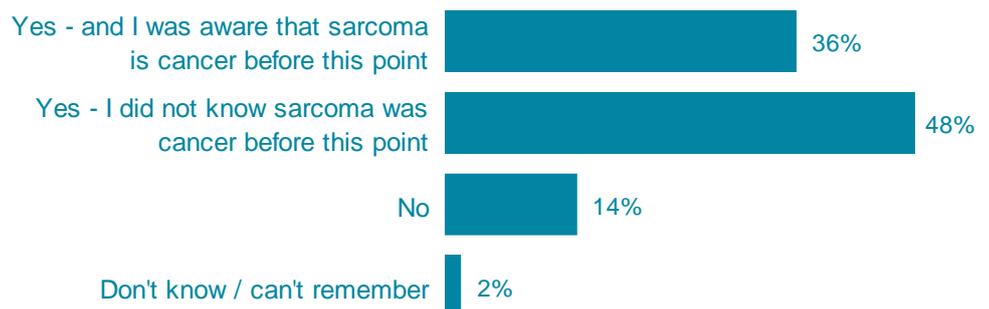


From question 12, 16+ questionnaire: How did you learn about your sarcoma diagnosis?

Explanation of diagnosis

At the point of receiving their diagnosis, **14%** said that it was **not** explained that sarcoma is a cancer. **36%** said it was explained but they **already knew** sarcoma was a cancer, and **48%** said it was explained and they **did not know before** this. (Q13, 16+ Questionnaire)

Whether it was explained that sarcoma was a cancer upon receiving diagnosis



From question 13, 16+ questionnaire: When you received your diagnosis, was it explained that sarcoma is a cancer?

Information at diagnosis

39% of people said they received no information at diagnosis. Around a third (**37%**) said they were given information from a charity, and **14%** said they were given an information sheet from hospital.
(Q14a, 16+ Questionnaire)

11% chose 'other'. This included comments such as:

'The diagnosis was given over the phone by the specialist. They asked me if I had any questions. They were very detailed and did their best to answer my questions. They were very honest and realistic.'

'Detailed explanation from an experienced and leading sarcoma surgeon.'

'Printed Google search.'

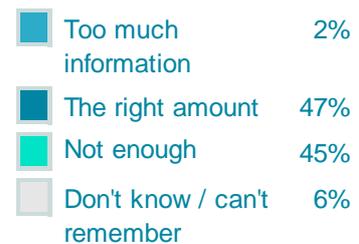
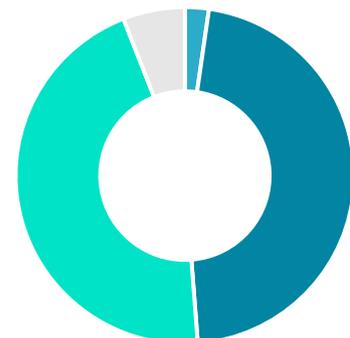
Information given at diagnosis



From question 14a, 16+ questionnaire: At diagnosis, what sort of information were you given?

Very few respondents (**2%**) said that they received too much information at diagnosis. Just under half (**47%**) said they got the right amount, and **45%** said they didn't get enough.
(Q14b, 16+ Questionnaire)

Amount of information given at diagnosis

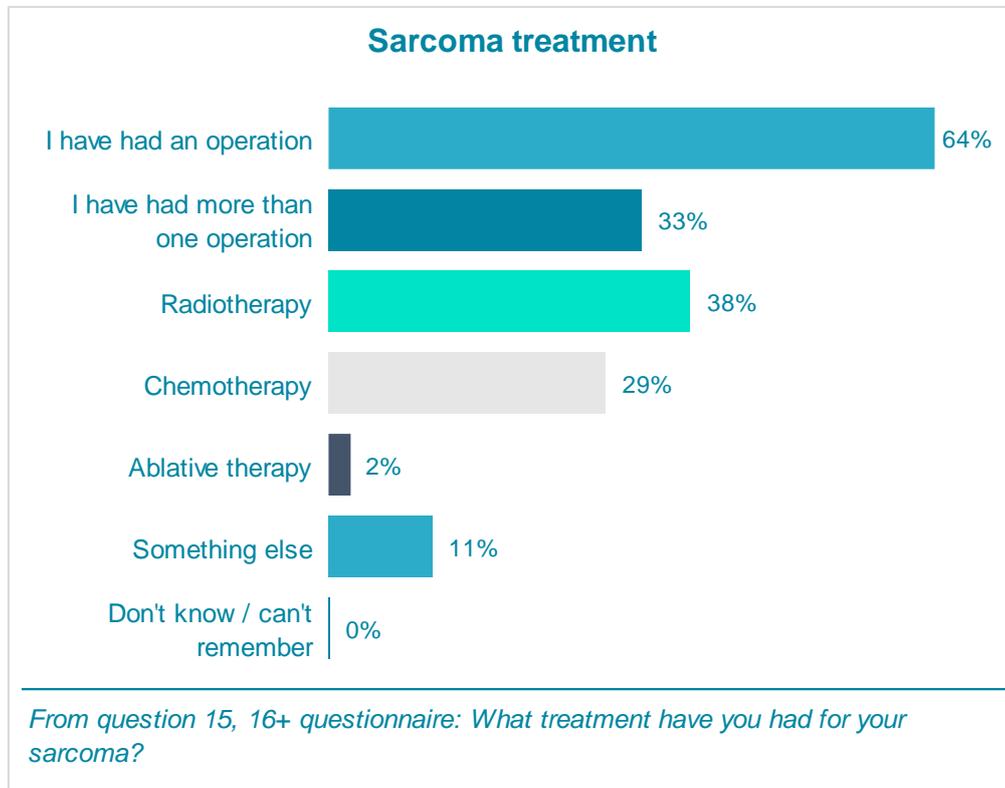


From question 14b, 16+ questionnaire: At diagnosis, how much information were you given?

4.2. Treatment

Type of treatment

Nearly two thirds of respondents (**64%**) have had one operation, a third have had more than one operation, **38%** have had radiotherapy, **29%** have had chemotherapy and **2%** have had ablative therapy. (Q15, 16+ Questionnaire)



11% of respondents chose 'something else'. This included comments such as:

'Immunotherapy.'

'Hormone therapy.'

'Proton beam therapy.'

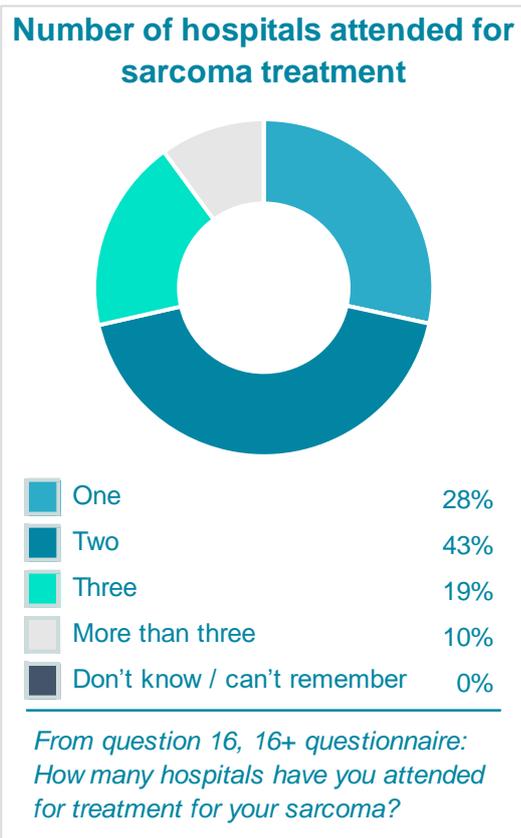
'Imatinib.'

'On clinical trial.'

Number of hospitals attended for treatment

When asked how many hospitals they had attended for treatment, nearly half of respondents (**43%**) said two. **28%** had attended one hospital, **19%** had attended three, and **10%** had attended more than three.

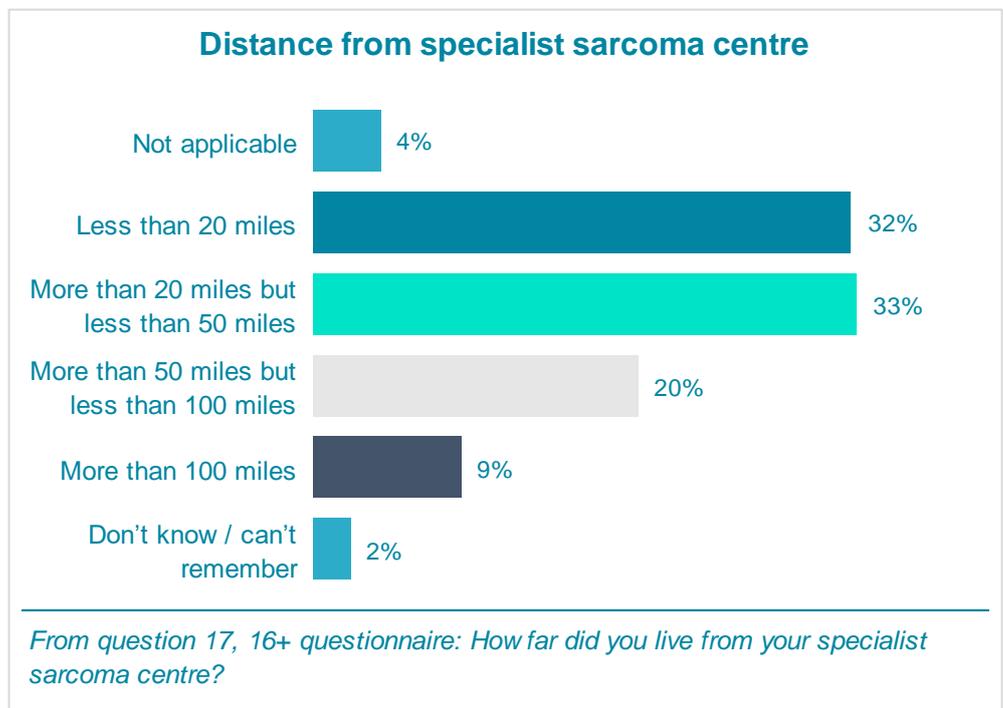
(Q16, 16+ Questionnaire)



Distance from specialist sarcoma centre

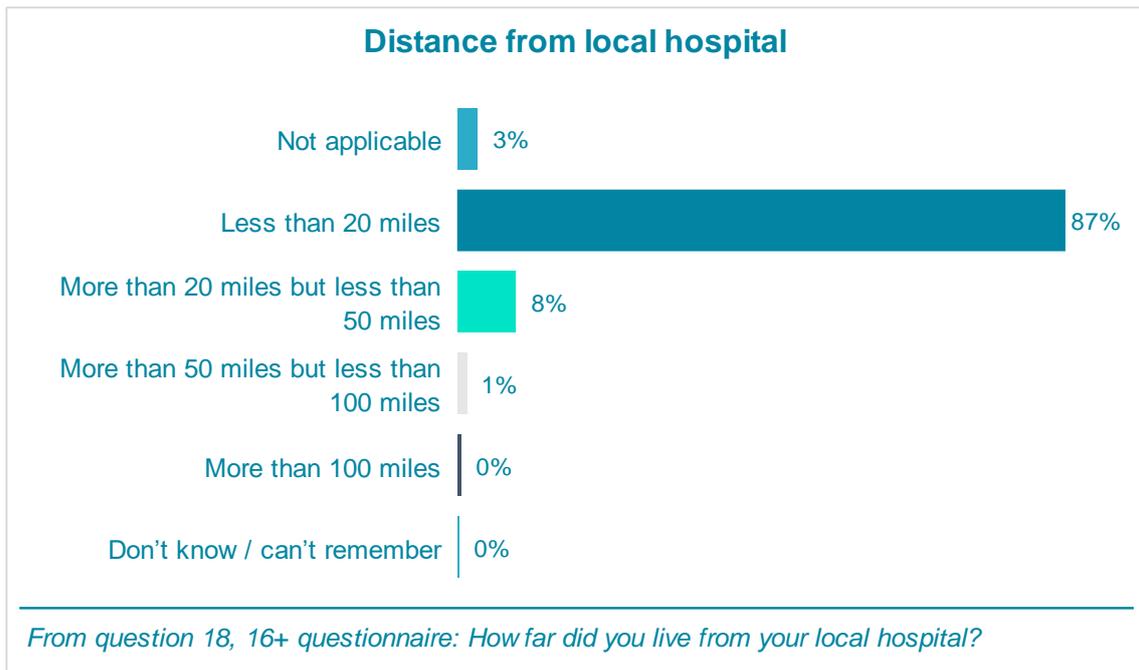
When asked how far they lived from their specialist sarcoma centre, the most common choices were less than 20 miles (**32%**) and between 20 and 50 miles (**33%**). A further **20%** said they lived between 50 and 100 miles away, and **9%** said they lived more than 100 miles away.

(Q17, 16+ Questionnaire)



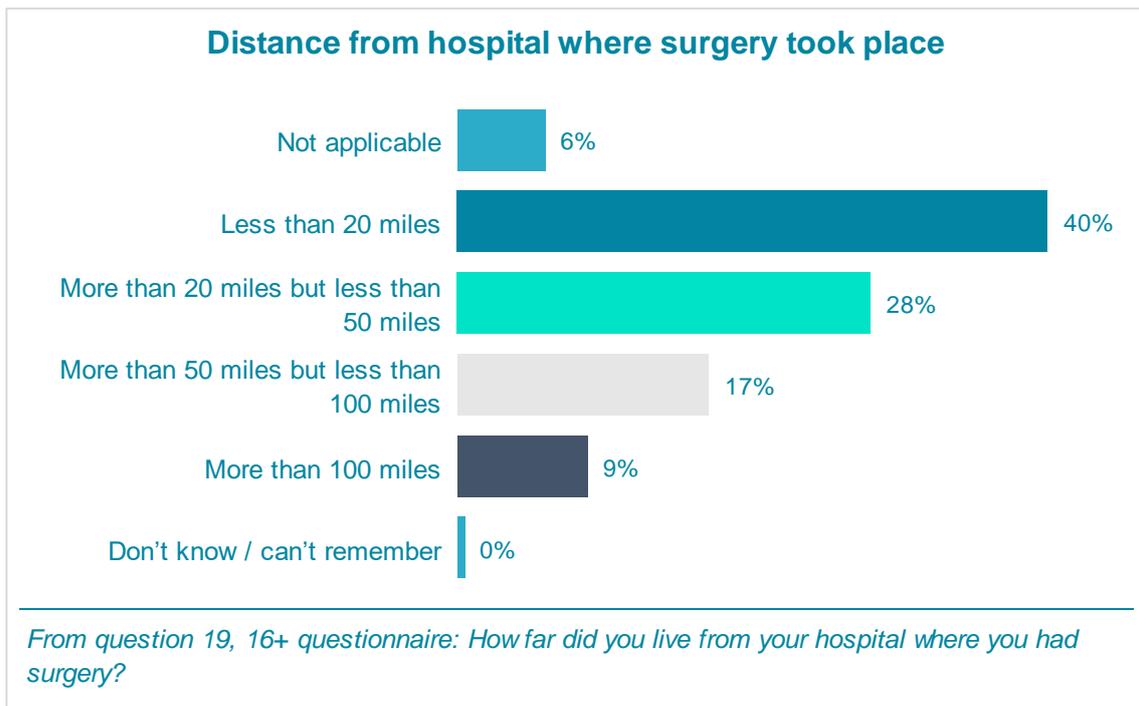
Distance from local hospital

The majority of respondents (**87%**) live less than 20 miles from their local hospital. **8%** live between 20 and 50 miles, and **1%** live between 50 and 100 miles. (Q18, 16+ Questionnaire)



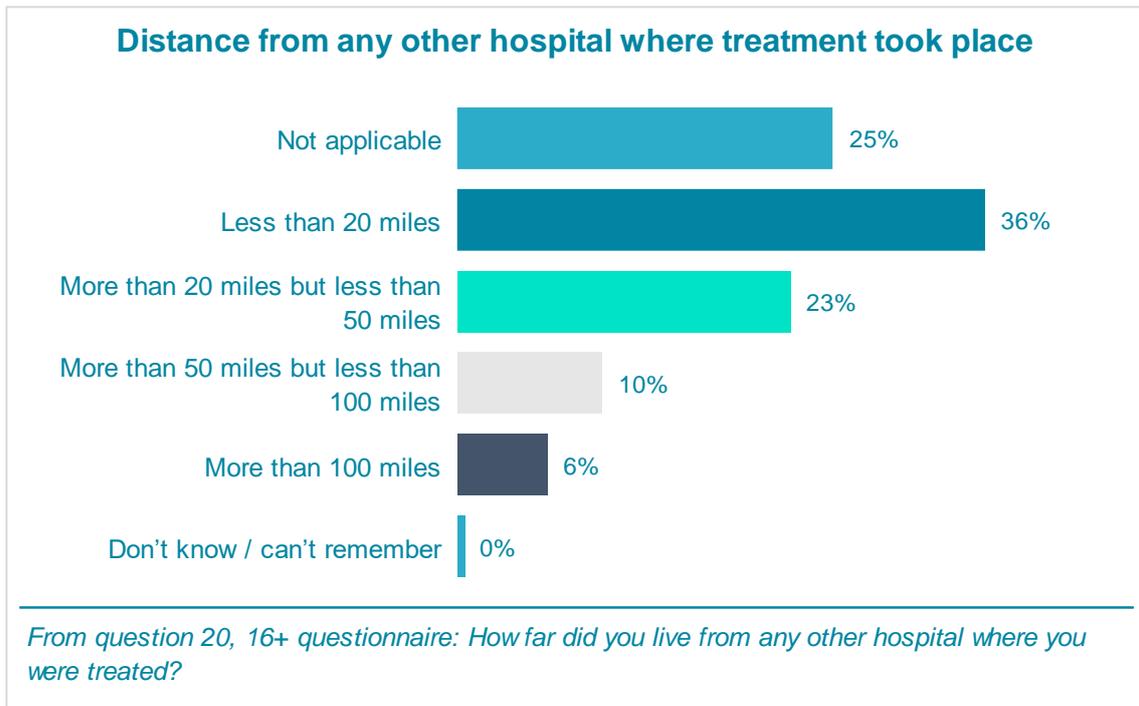
Distance from where they had surgery

When asked how far they lived from the hospital where they had surgery, **40%** of respondents chose less than 20 miles. **28%** said they lived between 20 and 50 miles away, **17%** said they lived between 50 and 100 miles away, and **9%** said they lived more than 100 miles away. (Q19, 16+ Questionnaire)



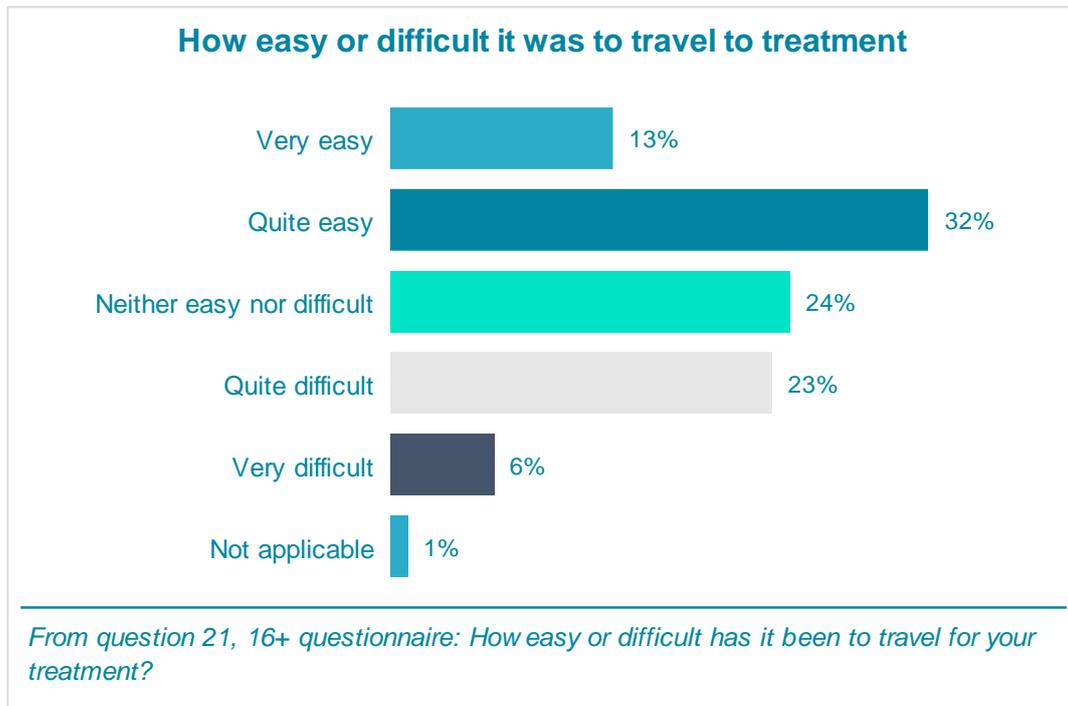
Distance from treatment

36% of respondents said they live less than 20 miles from any other hospital where they were treated. **23%** said they lived between 20 and 50 miles away, **10%** said they lived between 50 and 100 miles away, and **6%** said they lived more than 100 miles away. (Q20, 16+ Questionnaire)



Ease of travelling to treatment

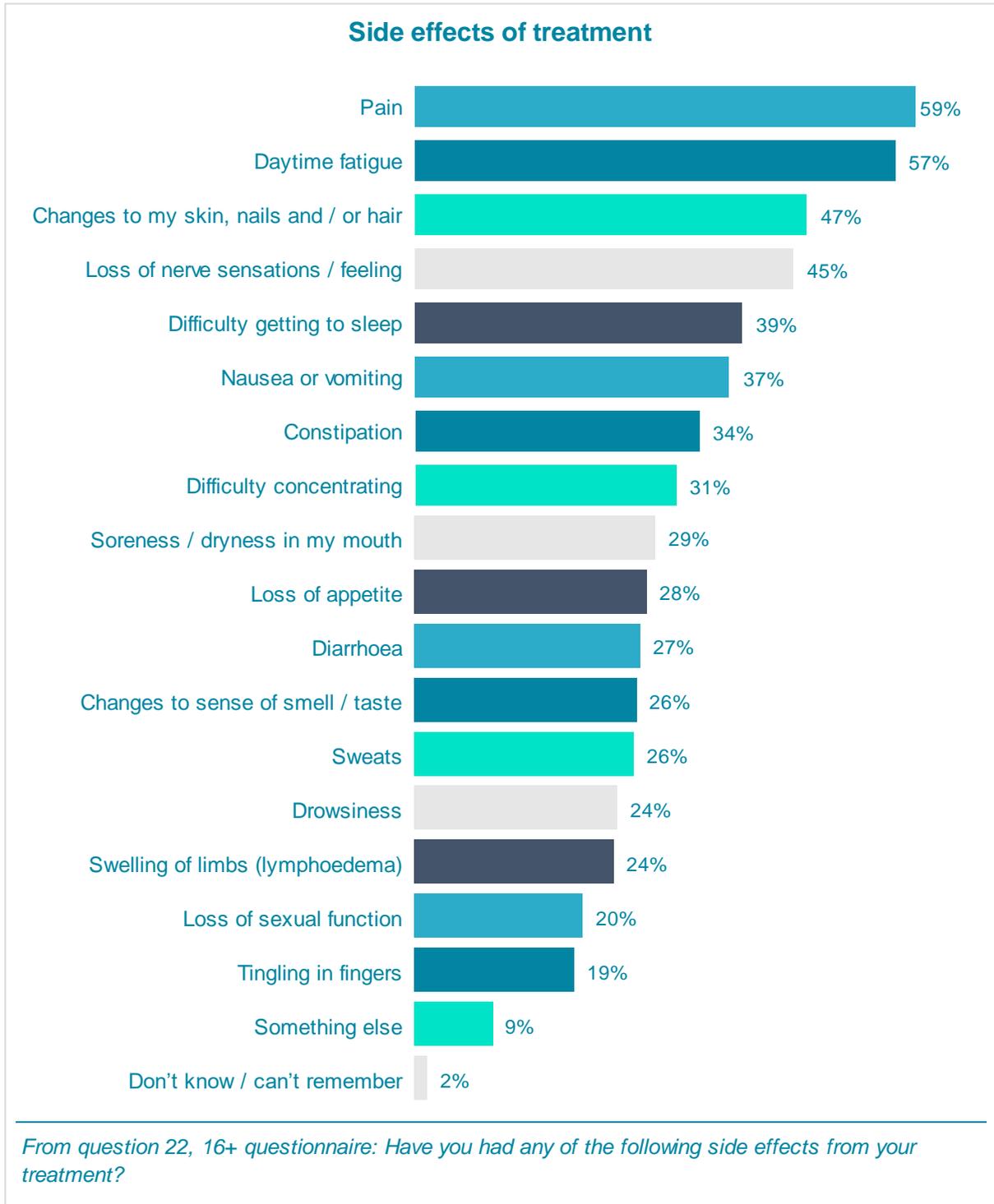
When asked how easy or difficult it has been to travel for treatment, the most common choice was quite easy (32%). 24% said it was neither easy nor difficult, while a further 23% said it was quite difficult. 13% said it was very easy and 6% said it was very difficult. (Q21, 16+ Questionnaire)



When the family and carers were asked how easy it was to travel for their family member / friend's treatment, they answered more negatively. The most common choice was quite difficult (36%). (Q8 Family & Carers Questionnaire).

Side effects of treatment

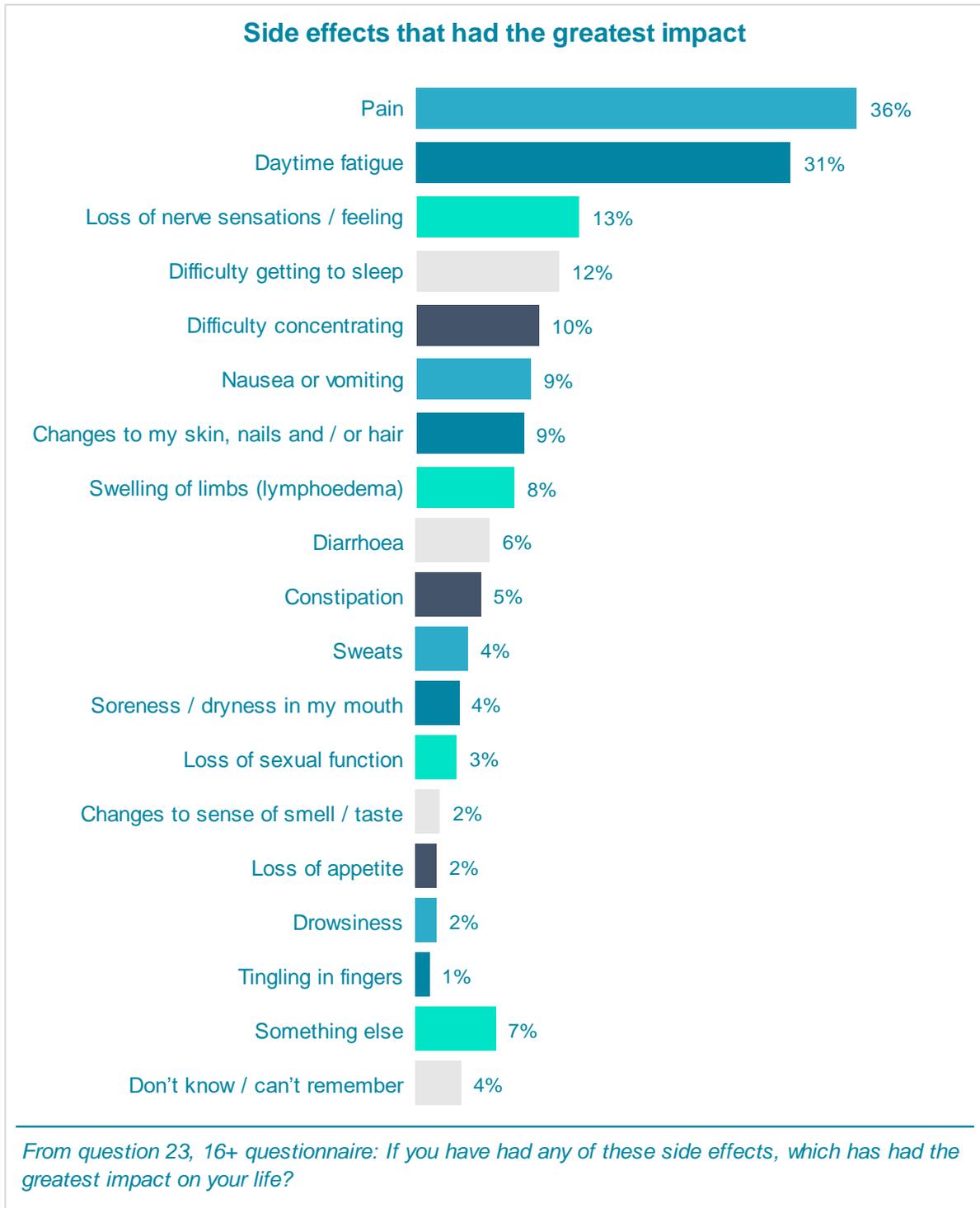
The most commonly reported side effects of treatment were pain (59%); daytime fatigue (57%); changes to skin, nails and/or hair (47%); and loss of nerve sensations/feeling (45%). The chart below shows all the symptoms listed. (Q22, 16+ Questionnaire)



9% chose 'something else.' The counts of 'something else' responses are included with this report as Appendix B2.

Side effects with the greatest impact

When asked which side effects have had the greatest impact on their life, the most common answers were pain (36%) and daytime fatigue (31%). All other answer options had far fewer respondents, with the next most common choice being loss of nerve sensations/feeling, at 13%. (Q23, 16+ Questionnaire)

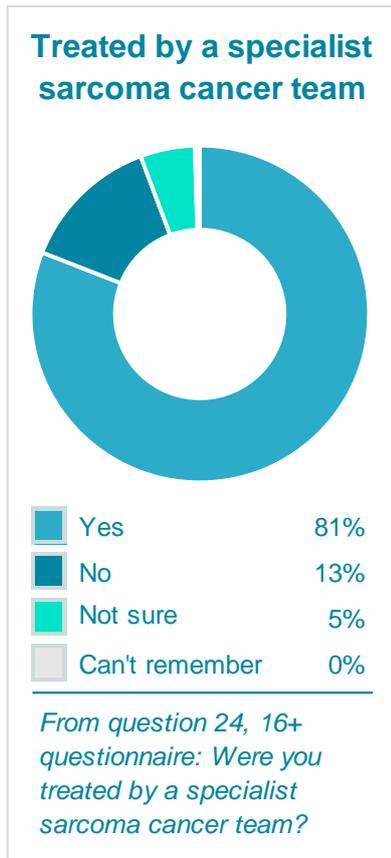


7% chose 'something else'. The counts of 'something else' responses are included with this report as Appendix B3.

In addition, when the family and carers were asked which side effects had the greatest impact on their family member / friend's life, the most common choices were, again, pain (**65%**) and daytime fatigue (**49%**). (*Q10 Family & Carers Questionnaire*)

14% chose 'something else'. The counts of 'something else' responses are included with this report as Appendix B3.

Sarcoma specialist team



81% of respondents were treated by a sarcoma specialist cancer team. **13%** were not and **5%** said they weren't sure. (Q24, 16+ Questionnaire)

Respondents who chose 'no' were invited to specify who treated them. This included comments such as:

'Gynaecologist.'

'Plastics consultant.'

'Breast surgeon.'

'Head and neck cancer specialist.'

In addition, when the family and carers were asked if their family member / friend was treated by a sarcoma specialist cancer team **75%** said they were, **15%** said they were not, and **10%** said they were not sure. (Q9 Family & Carers Questionnaire)

Respondents who chose 'no' were invited to specify who treated their family member / friend. This included comments such as:

'Teenage cancer team.'

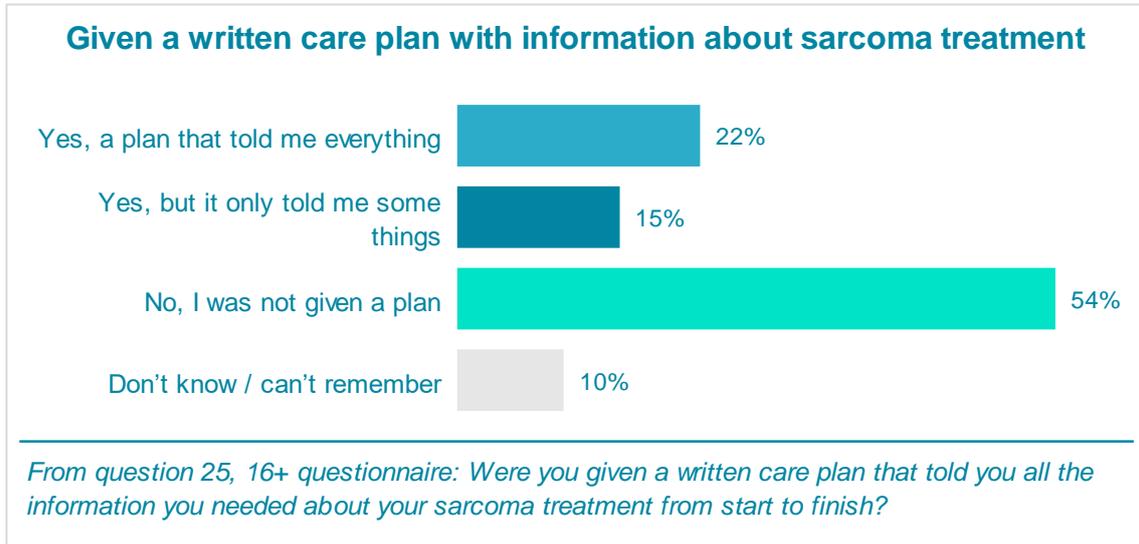
'General hospital on cancer ward.'

'A specialist liver surgeon and then the cancer centre for radiotherapy and chemotherapy.'

Analysis showed that a patient's overall mental health and wellbeing was no more or less likely to be negatively affected depending on if they are treated by a sarcoma specialist team (S1). Respondents were equally affected whichever setting they were treated in. Please see 5.4 for all additional cross tabulation analysis.

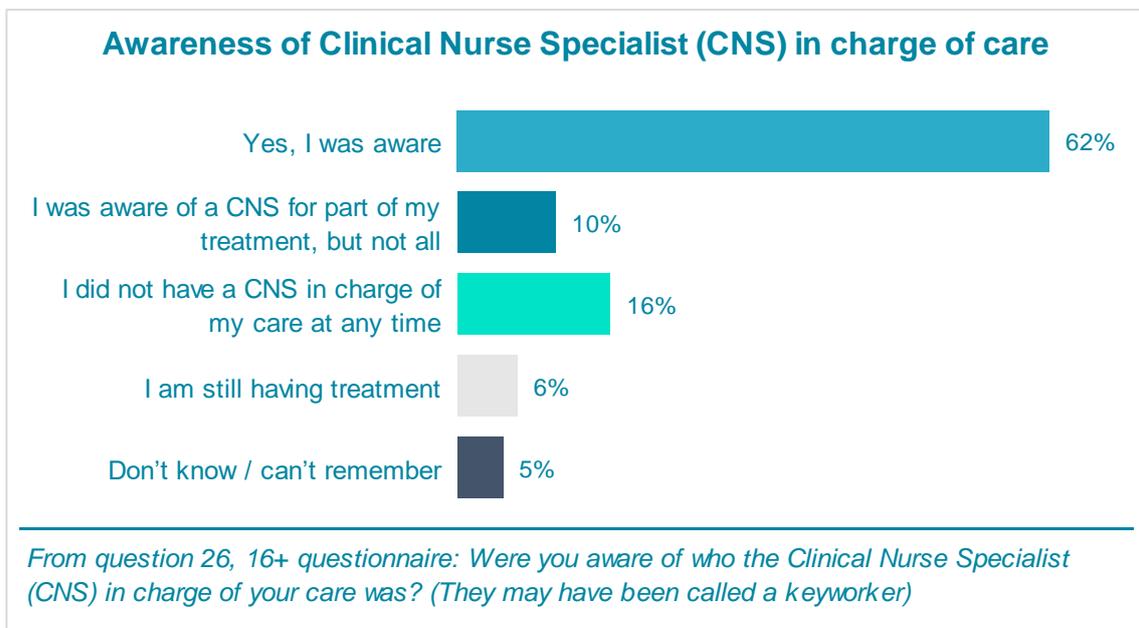
Care plan

Over half of respondents (**54%**) said they were not given a care plan. **22%** said they were and it told them everything, while **15%** said they were but it only told them some things. (Q25, 16+ Questionnaire)

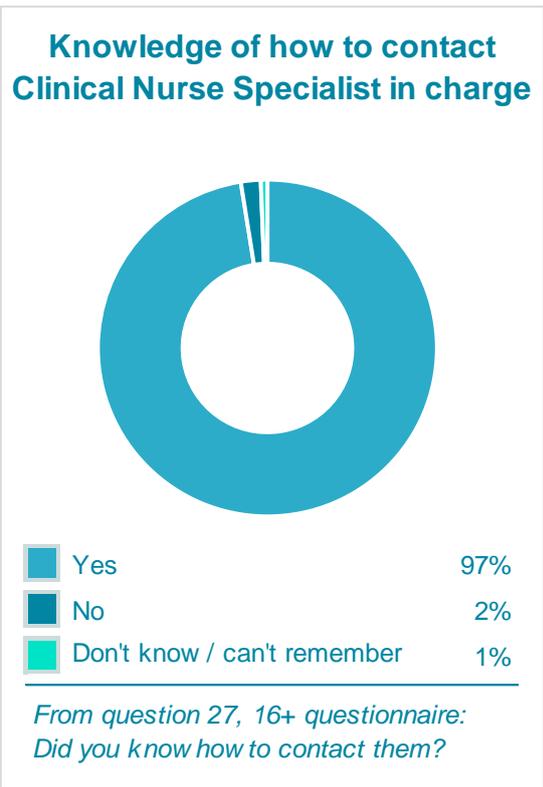


Clinical nurse specialists

Nearly two-thirds of respondents (**62%**) said they were aware of who the CNS in charge of their care was. A further **10%** said they were aware of a CNS for part of their treatment but not all, and **16%** said they did not have a CNS in charge of their treatment at any time. (Q26, 16+ Questionnaire)

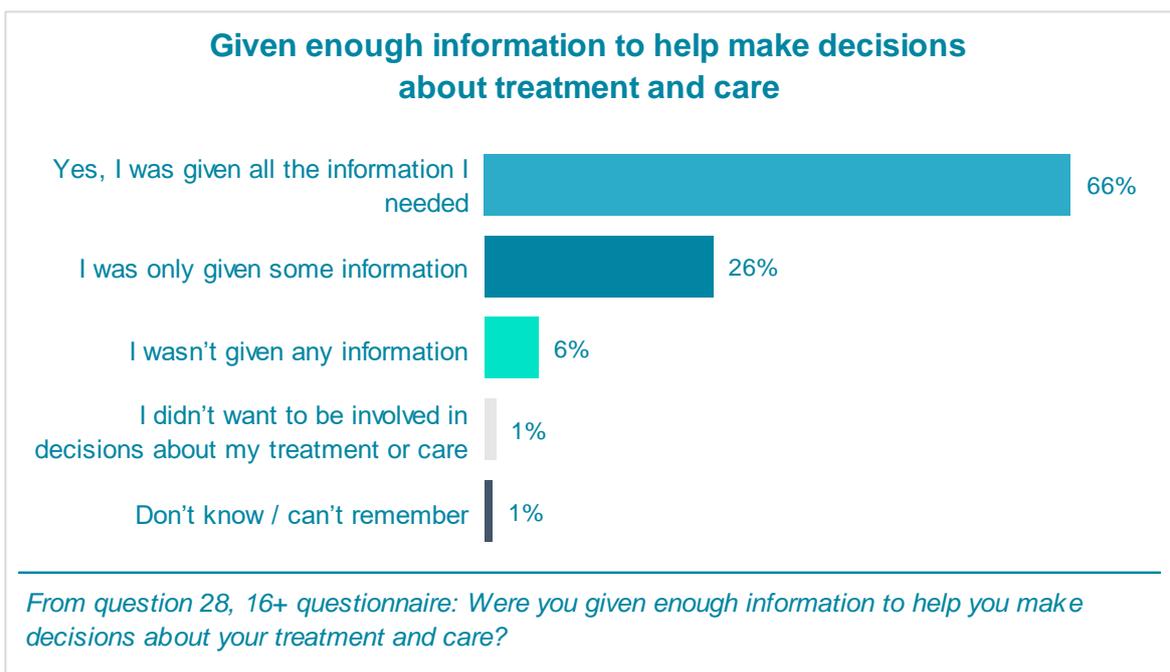


Of those who said they have had a CNS, almost all knew how to contact them (**97%**). (Q27, 16+ Questionnaire)



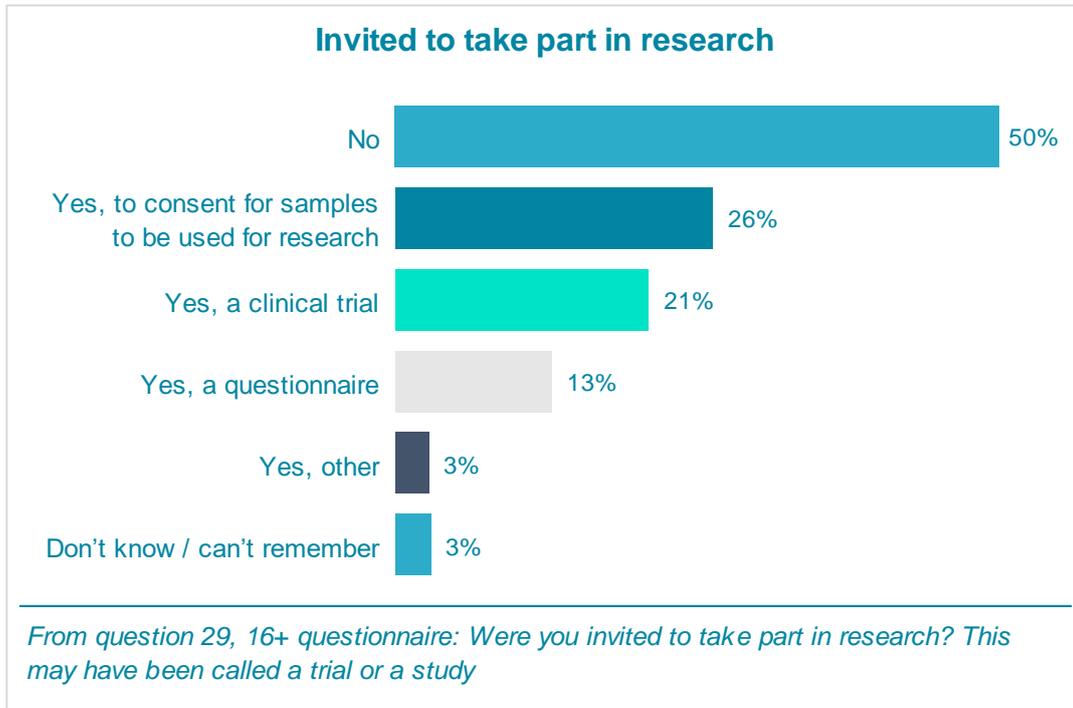
Information to help make decisions

When asked if they were given enough information to help make decisions about their treatment and care, **66%** of respondents said they were given all the information they needed. **26%** said they were given some information and a further **6%** said they weren't given any information. (Q28, 16+ Questionnaire)



Research

Half of respondents said they were not invited to take part in any research. **26%** said they were invited to consent for their samples to be used for research, **21%** were invited to a clinical trial, and **13%** were invited to complete a questionnaire. (Q29, 16+ Questionnaire)



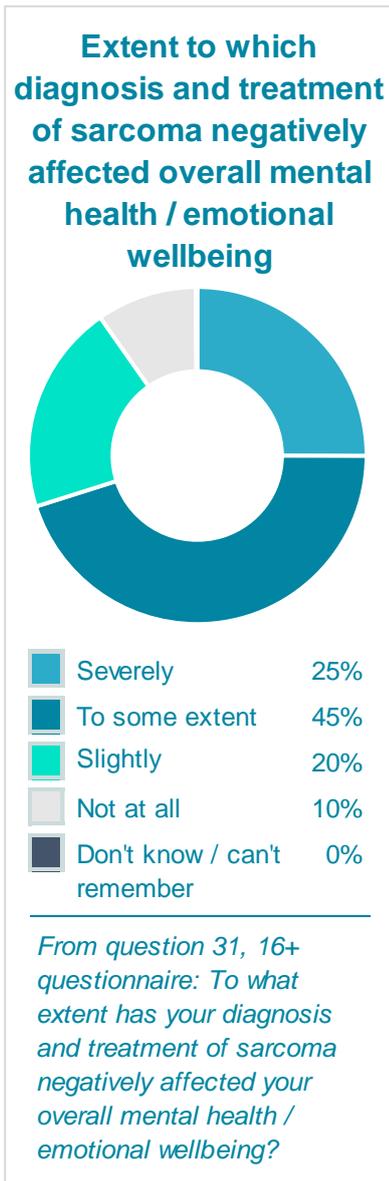
3% chose 'yes, other'. This included comments such as:

- 'I was asked and consented, but it wasn't followed up.'*
- 'Was told trials may be applicable but determined by results of tests not yet received.'*
- 'Photos of the tumour before it was removed being used in research and teaching university students.'*
- '100,000 Genomes Project.'*

Impact on overall mental health / emotional wellbeing

25% of respondents said that their diagnosis and treatment of sarcoma has severely negatively affected their overall mental health / emotional wellbeing. **45%** said to some extent, **20%** said slightly and only **10%** said it had not at all.

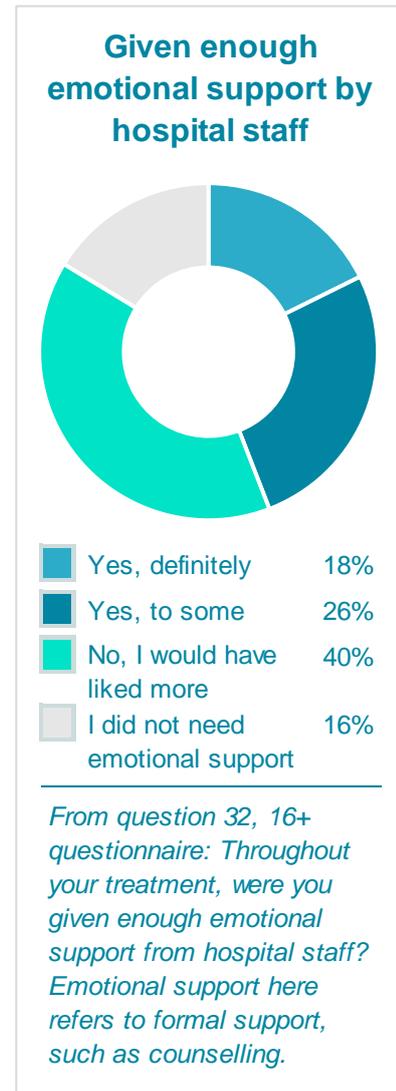
(Q31, 16+ Questionnaire)



Emotional support from hospital staff

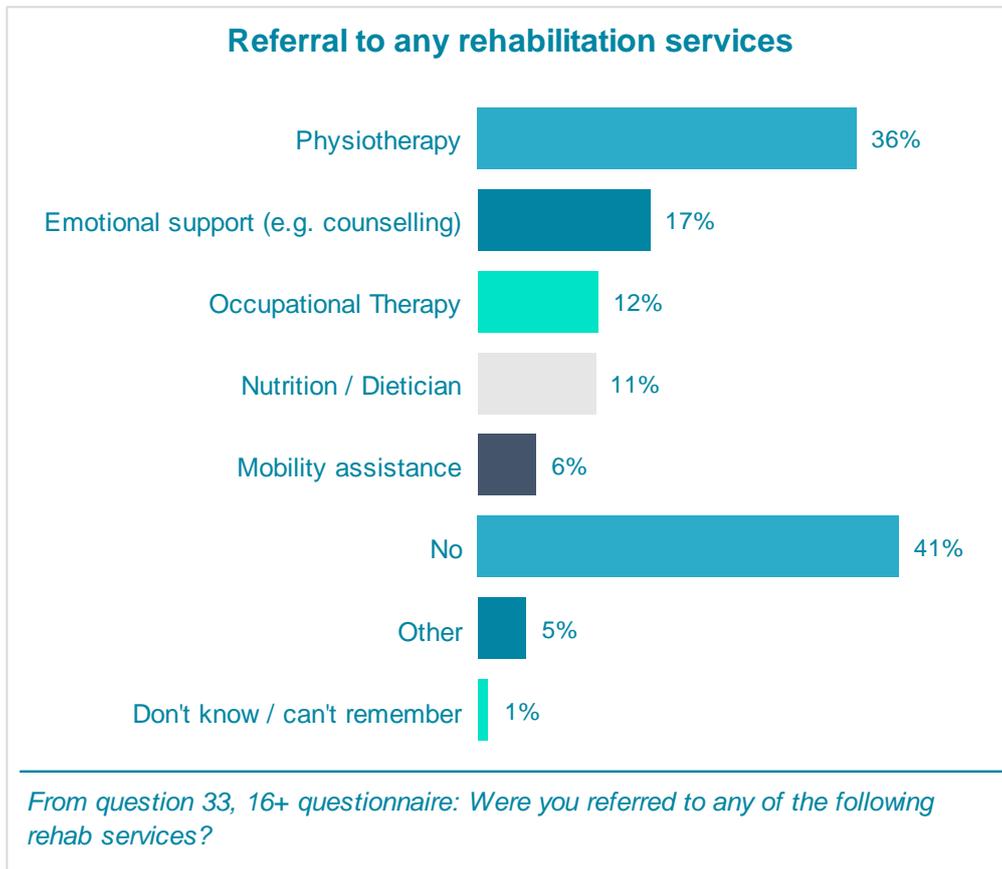
When asked if they were given enough emotional support from hospital staff throughout their treatment, **40%** of respondents said they would have liked more support. **18%** said they were definitely given enough emotional support and **26%** answered to some extent.

(Q32, 16+ Questionnaire)



Referral to rehab services

The most common rehab service that respondents were referred to was physiotherapy (**36%**). **17%** were referred to emotional support, **12%** to occupational therapy, **11%** for nutrition / dietician and **6%** for mobility assistance. **41%** of respondents were not referred to any of the listed rehab services. (Q33, 16+ Questionnaire)



5% chose 'other'. This included comments such as:

'Only where I pursued through my own private healthcare. Nothing NHS-wise was offered.'

'Acupuncture.'

'Hearing specialists. Chemo affected my hearing.'

'Lymphoedema clinic.'

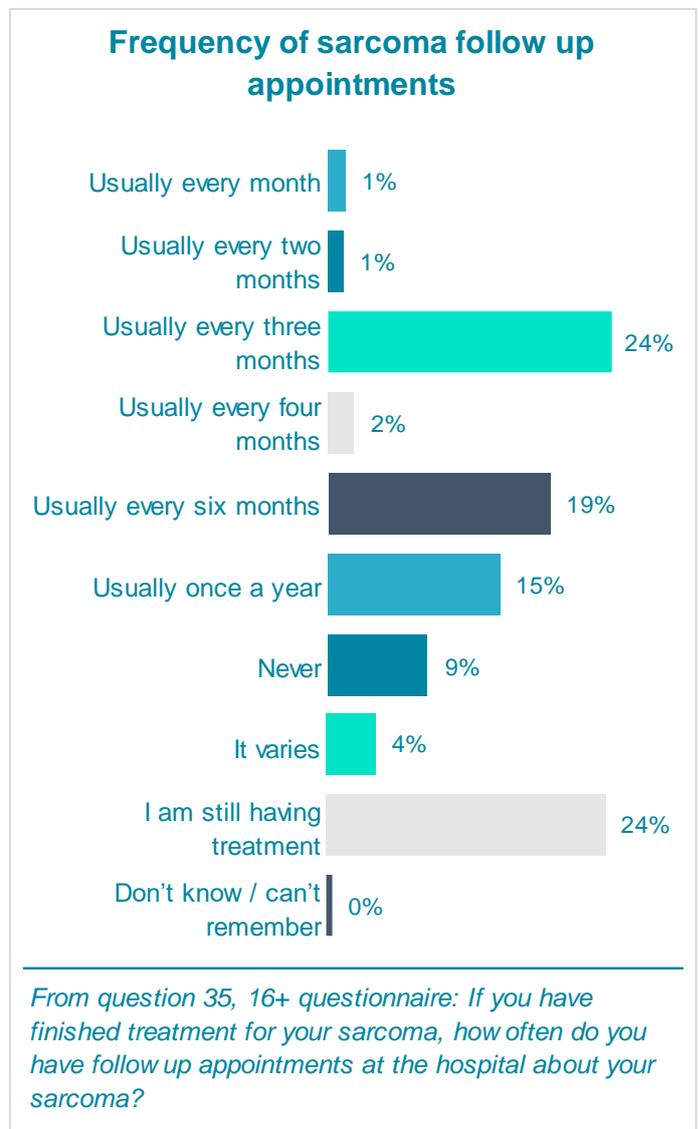
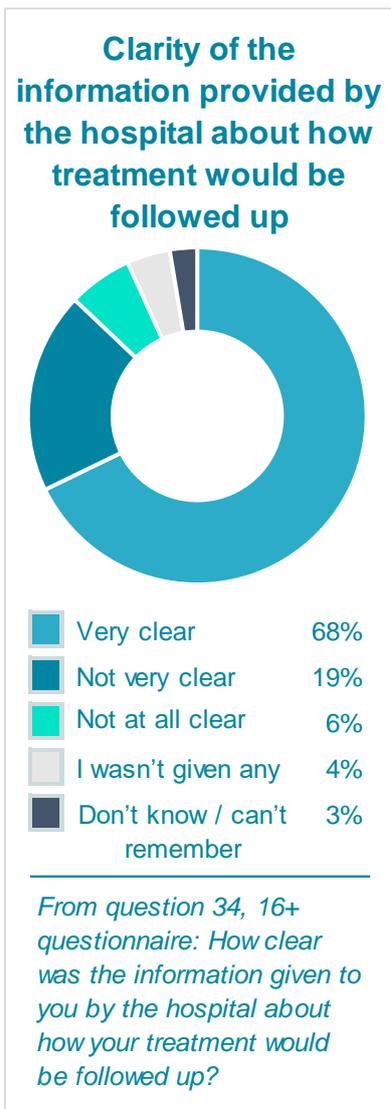
'Local hospice complimentary therapy.'

4.3. After treatment

Treatment follow up

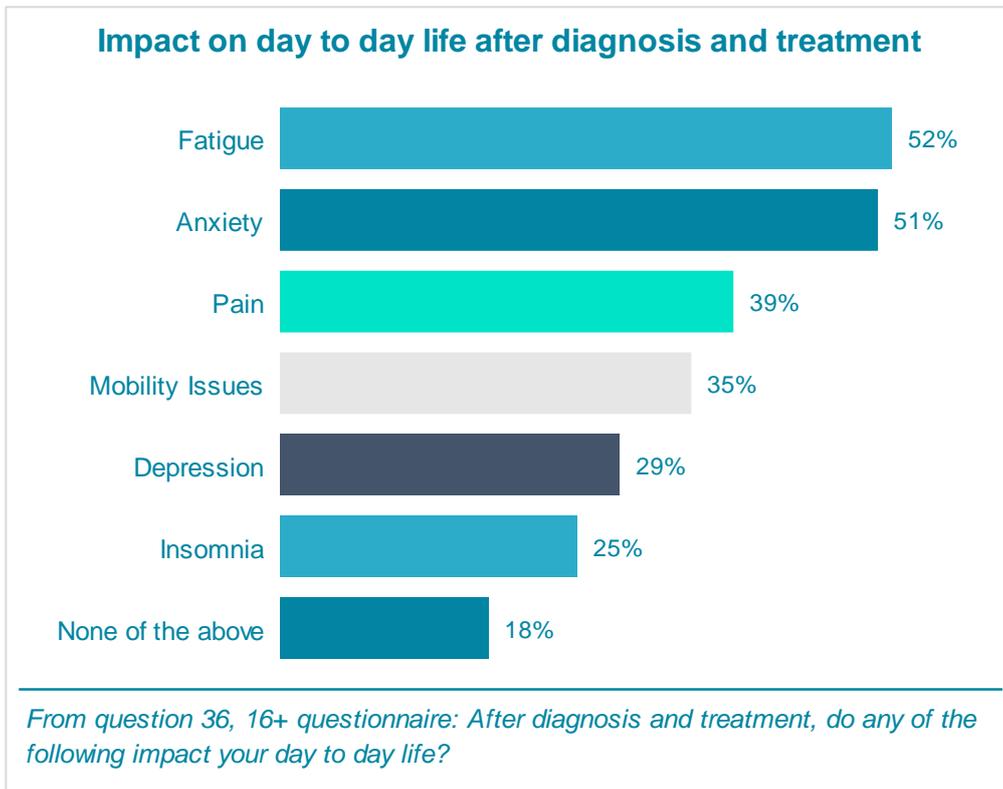
The majority of respondents (**68%**) said the information given to them by the hospital about how their treatment would be followed up was very clear. **19%** said it was not very clear and **6%** said it was not at all clear. (**19%** said it was not very clear and **6%** said it was not at all clear. (Q34, 16+ Questionnaire)

When asked, after finishing treatment, how often they have follow-up appointments, **24%** said usually every three months. A further **19%** said usually every six months and **15%** said usually once a year. (Q35, 16+ Questionnaire)

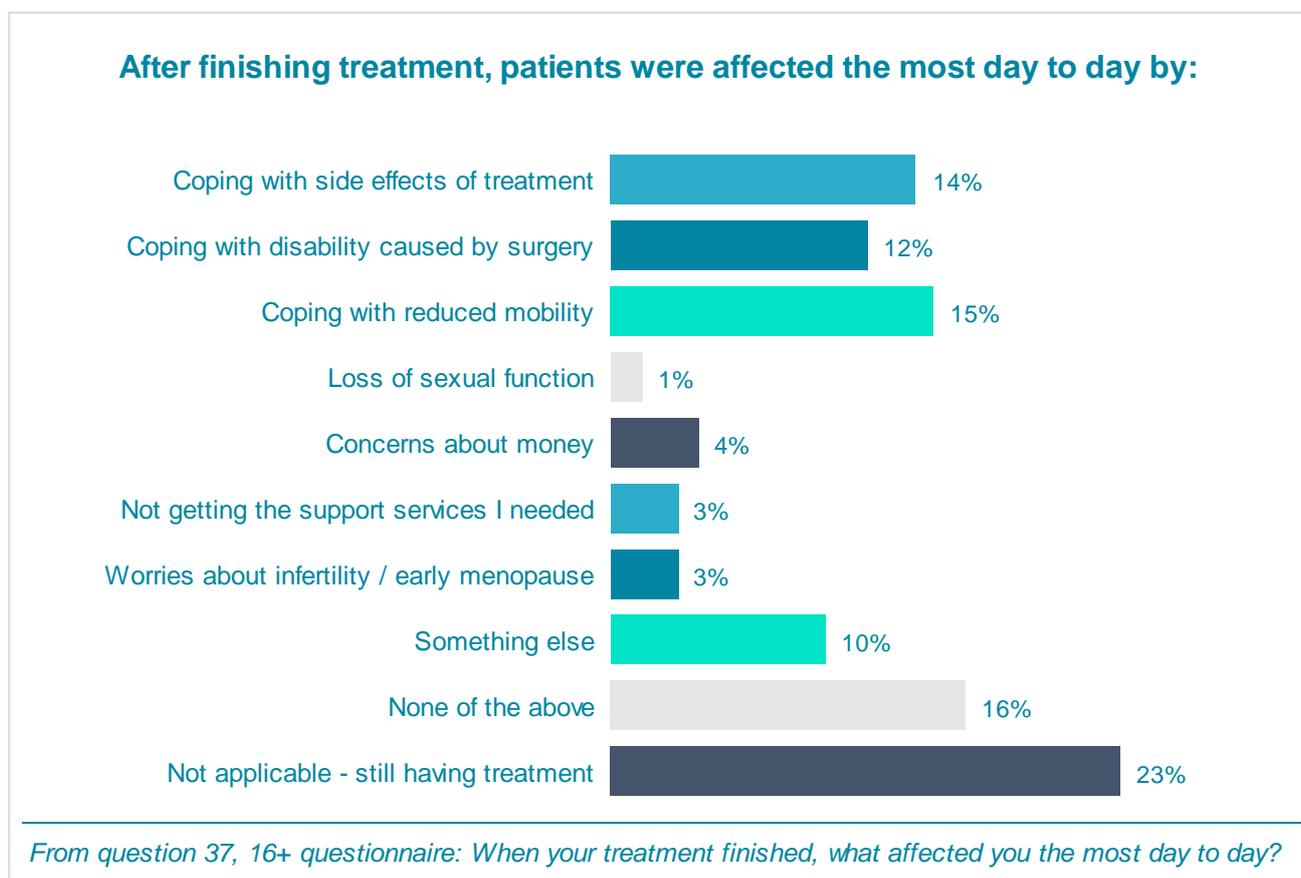


Impact on day-to-day life

Around half of respondents said, after diagnosis and treatment, fatigue (52%) or anxiety (51%) impacts their day-to-day life. 39% said pain impacts their life, 35% said mobility issues, 29% said depression and 25% said insomnia. 18% said their day-to-day life was not impacted by any of these factors. (Q36, 16+ Questionnaire)



When respondents were asked, after finishing treatment, what affected them **most** day to day, the most common choices were: coping with reduced mobility (**15%**), coping with side effects of treatment (**14%**) and coping with disability caused by surgery (**12%**). (Q37, 16+ Questionnaire)



10% chose ‘something else’. This included comments such as:

‘I’m most affected by the ‘waiting/not knowing’ if or when this cancer will return. I was pretty shocked by the high recurrence rate (50-70%) and get annoyed that no-one really understands that, just because the primary tumour has gone, it doesn’t mean I’m out of the woods. I can’t plan anything more than a few months in advance, and I do worry about it coming back – I need to work to live. I don’t have any financial cushion and it really does concern me.’

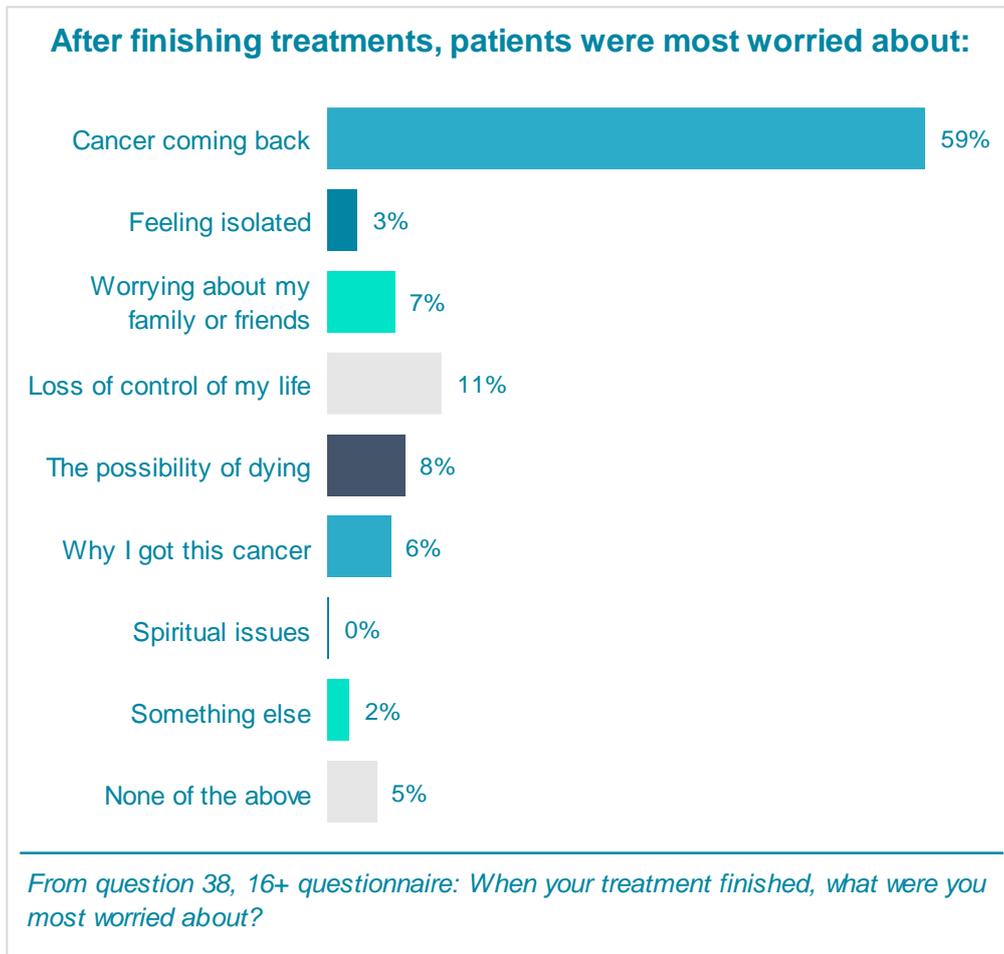
‘Frustration that the diagnosis hadn’t come sooner.’

‘Coping with pain and drowsiness caused by medication for pain causes me the most difficulty.’

A full analysis of these comments can be found in the thematic analysis section.

Biggest worry after finishing treatment

The majority of respondents (**59%**) said, after finishing treatment, they were **most** worried about their cancer coming back. **11%** said they were most worried about loss of control of their life, **8%** said the possibility of dying and **7%** said worrying about their family or friends. (Q38, 16+ Questionnaire)



2% chose ‘something else’. This included comments such as:

‘Work, and the fact it stopped me doing my dream job and held me back in my career.’

‘Why my lump was not diagnosed after many tests until the lump was removed which was many months.’

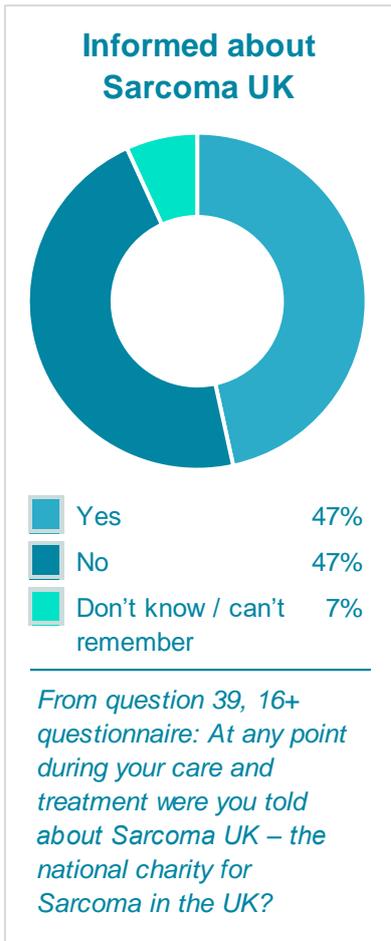
‘Future mobility as post-op results were positive.’

A full analysis of these comments can be found in the thematic analysis section.

4.4. Charities and support groups

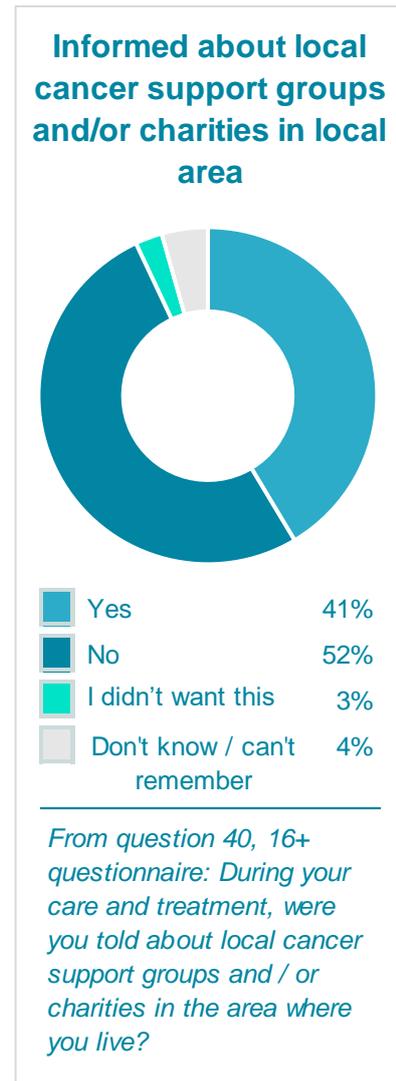
Signposting to Sarcoma UK

Half (**47%**) of respondents were told about Sarcoma UK at some point during their care and treatment and half (**47%**) were not. (Q39, 16+ Questionnaire)

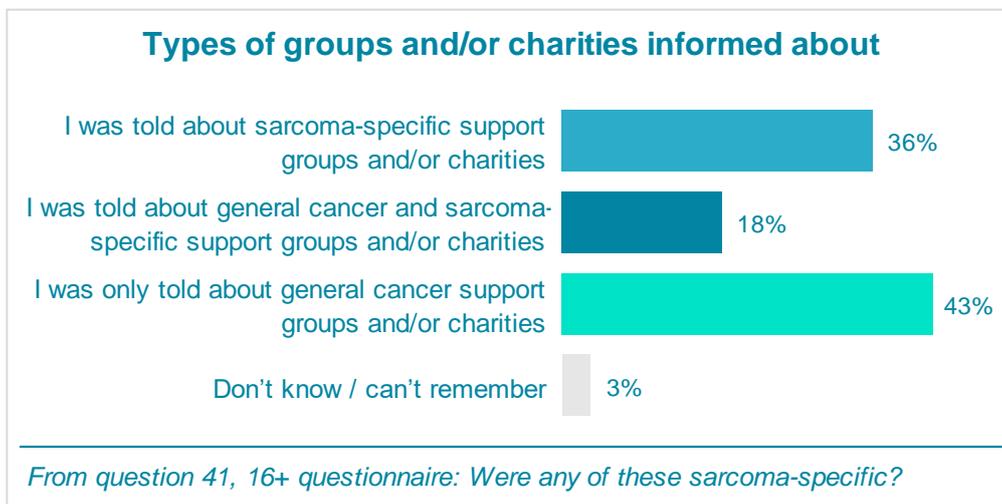


Signposting to support groups and charities

Less than half of respondents (**41%**) were told about local cancer support groups and/or charities in the area where they live during their care and treatment. (Q40, 16+ Questionnaire)

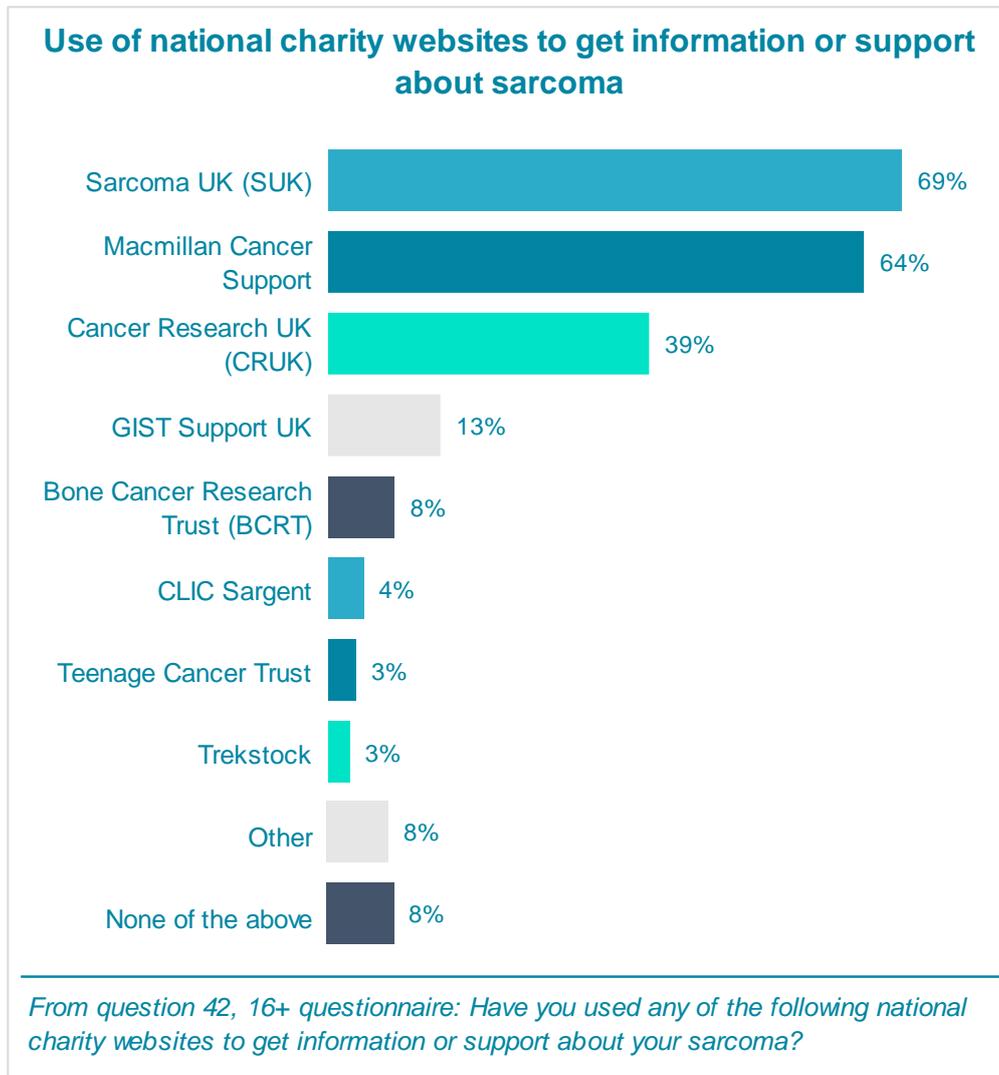


Of those who were told about local support groups and/or charities, nearly half (**43%**) were only told about **general cancer** support groups and/or charities. **36%** were told about **sarcoma-specific** groups and/or charities, and **18%** were told about **both**. (Q41, 16+ Questionnaire)



Charity websites

When participants were asked which national charity websites they had used to get information or support about their sarcoma, the most common choice was Sarcoma UK (**69%**). **64%** said Macmillan Cancer Support, **39%** said Cancer Research UK and **13%** said GIST Support UK. (Q42, 16+ Questionnaire)



In addition, when the family and carers were asked which of the websites **they** had used, the most common choices were again Sarcoma UK (**80%**) and Macmillan Cancer Support (**57%**). More in this group selected Teenage Cancer trust (**14%**) and CLIC Sargent (**13%**). (Q19 Family & Carers Questionnaire)

5. Further analysis

5.1. Results of Family and Carers Questionnaire

There were 412 responses to the family and carers survey. People who are caring for a friend or family member who has sarcoma – or friends or family of people who had passed away with sarcoma – were invited to complete the survey. The survey contained some different questions to the main survey, which asked about the impact on the carer as well as the patient. Carers or friends may look after partners or spouses, other relatives, friends or neighbours, and many who would not consider themselves as a carer may find themselves taking on this role.

There were some clear key points arising from the data:

- Q1 Only one-fifth (21%) had heard of sarcoma before their friend/family member was diagnosed.
- Q5 Only half (49%) knew that sarcoma was a type of cancer.
- Q6 Two-thirds (67%) found out about sarcoma online.
- Q7 Over half of respondents went to all appointments with their friend/relative.
- Q9 Three-quarters (75%) said their friend/relative was treated by a specialist sarcoma team.
- Q11 92% of respondents said they provide emotional support to their friend/relative – this was by far the highest percentage from a list which included a range of support/care. The next was on accompanying their friend/relative to appointments (74%).
- Q12 A quarter (24%) provided more than 50 hours of care/support a week.
- Q14 18% said supporting their friend/relative means they are no longer able to work or continue education, with a further 63% saying it had a temporary impact on their ability to work or complete education.
- Q20 Over half (55%) said they had been negatively impacted financially because of the patient's diagnosis.
- Q21 Nearly two-thirds (65%) said they felt anxious or depressed more often, and a further 28% said they felt anxious or depressed all the time as a result of the patient's diagnosis.

The infographic on the following page illustrates these findings.

National Sarcoma Survey 2020

Family and Carers Results Summary

Only **one-fifth** (21%) had heard of sarcoma before their friend/family member was diagnosed



Only **half** (49%) knew that sarcoma was a type of cancer

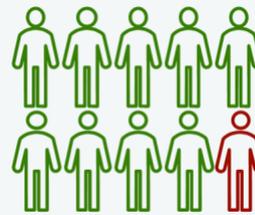
Two-thirds (67%) found out about sarcoma online



Almost **half** of respondents went to all appointments with their friend/relative



Three-quarters (75%) said their friend/relative was treated by a specialist sarcoma team



92% of respondents said they provide emotional support to their friend/relative



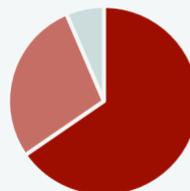
A **quarter** (24%) provided more than 50 hours of care/support a week



18% said supporting their friend/relative means they are no longer able to work or continue education, with a further **63%** saying it had a temporary impact on their ability to work or complete education



Over half (55%) said they had been negatively impacted financially because of the patient's diagnosis



Nearly **two-thirds** (**65%**) said they felt anxious or depressed more often, and a further **28%** said they felt anxious or depressed all of the time as a result of the patient's diagnosis

5.2. Results of Parents of Under 16s Questionnaire

There were 56 responses from parents of children under the age of 16. Parents were contacted through Sarcoma UK's networks and were encouraged to complete the survey on behalf of their children and, if appropriate, with their children (for the older age groups).

Because the number of responses is lower (when compared to the patient survey that makes up the main body of this report, and the family and carers survey above) they should be treated with caution. However, there are interesting findings from this group which correspond to the findings in the other categories:

- Q1 Three-quarters (75%) of parents had not heard of sarcoma before their child's diagnosis.
- Q7 Nearly a half (48%) of parents saw a health professional with their child more than 3 times before they were referred for more tests.
- Q13 59% of parents did not know that sarcoma was a cancer until it was explained at their child's diagnosis.
- Q14b Nearly one-third of parents (29%) said they were not given enough information when their child was diagnosed.
- Q23 The side-effects of treatment that were most commonly experienced were changes to skin/hair/nails (86%), loss of appetite (79%) and nausea/vomiting (75%).
- Q24 Nausea and vomiting (46%), followed by pain (39%), were the side effects which parents said had the greatest impact on their child's day-to-day life.
- Q25 61% said their child was cared for in a specialist sarcoma centre (14% were not sure).
- Q26 One-fifth (21%) said they were not given a written care plan for their child.
- Q34 At least a half of respondents said that their child always, often or sometimes felt afraid or scared, sad or angry.
- Q35 One-fifth (20%) of parents said their child would have liked more emotional support.

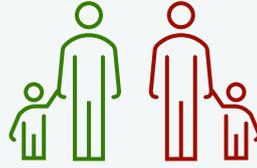
The infographic on the following page illustrates these findings.

National Sarcoma Survey 2020

Parents of Under 16s Results Summary

Three-quarters

(75%) of parents had not heard of sarcoma before their child's diagnosis



Nearly a half

(48%) of parents saw a health professional with their child more than 3 times before they were referred for more tests

59% of parents did not know that sarcoma was a cancer until it was explained at their child's diagnosis



Nearly one-third of parents (29%) said they were not given enough information when their child was diagnosed



61% said their child was cared for in a specialist sarcoma centre

Side-effects of treatment most commonly experienced:

- 86% Changes to skin/hair/nails
- 79% Loss of appetite
- 75% Nausea/vomiting

One-fifth (21%) said they were not given a written care plan for their child



Side effects which parents said had the most impact on their child's day-to-day life:

- 46% Nausea and vomiting
- 39% Pain

One-fifth (20%) of parents said their child would have liked more emotional support



At least a half of respondents said that their child always, often or sometimes felt afraid or scared, sad or angry



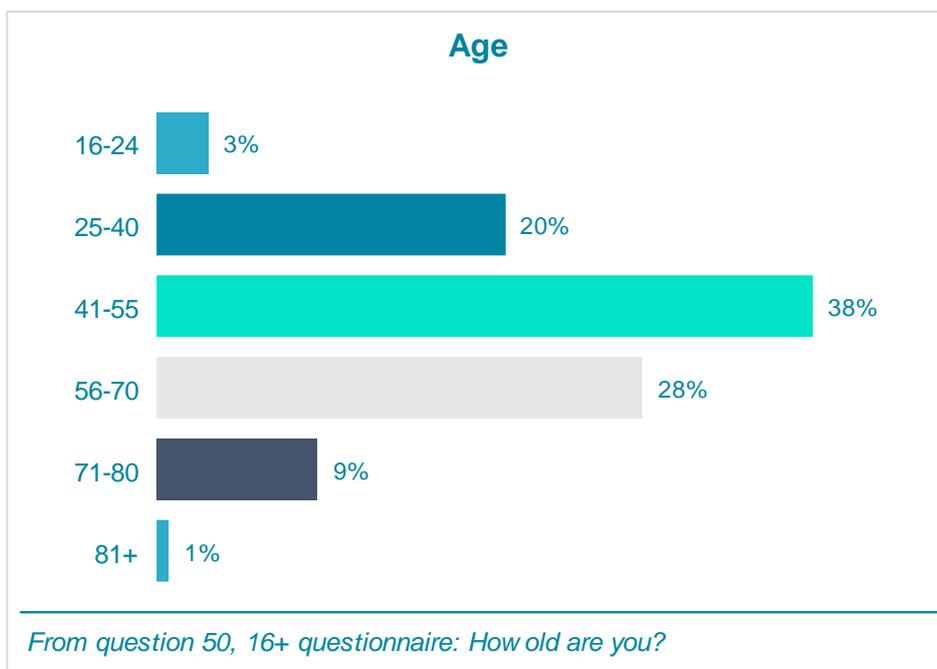
5.3. Additional breakdown analysis

As part of the analysis, Quality Health broke down the data according to key variables to identify differences in experience and opinion, as well as to identify areas where specific groups may be in particular need of support. The areas for which further analysis have been provided are:

- Age
- Gender
- Sarcoma type
- Location

In addition to these, a number of cross tabulations were carried out which looked at specific issues or hypotheses, and a summary of some of the key findings from this is also included in this section of the report.

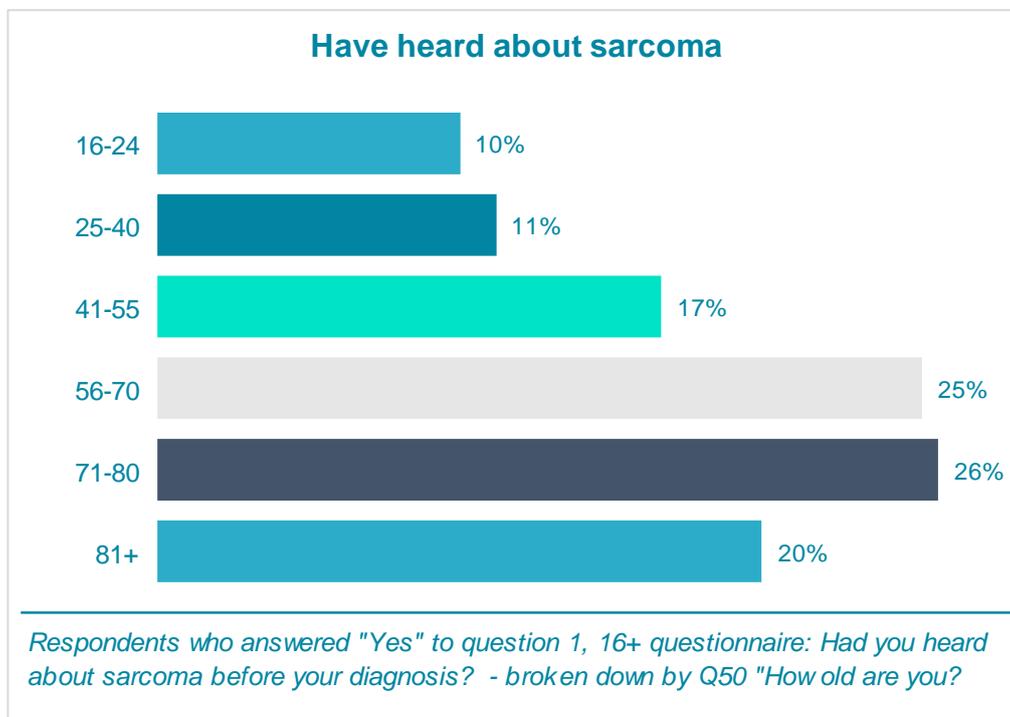
Age



The numbers are relatively small for some age groups (16-24s and 81+) so, when making comparisons, these must be treated with caution. There are some clear differences between the age groups, and these are in line with other surveys (carried out by Quality Health). In general, older people reported that they were more satisfied, particularly with the level of support and information they received. Older people were also less likely to report a negative emotional impact. There are a number of reasons for this which should be considered, including whether older people's expectations are lower than that of younger generations, and whether older people find it harder to be critical of professionals caring for them or the service they receive. It is also worth considering how technology and access to information has impacted on younger people's expectations and how this affects the feedback they give.

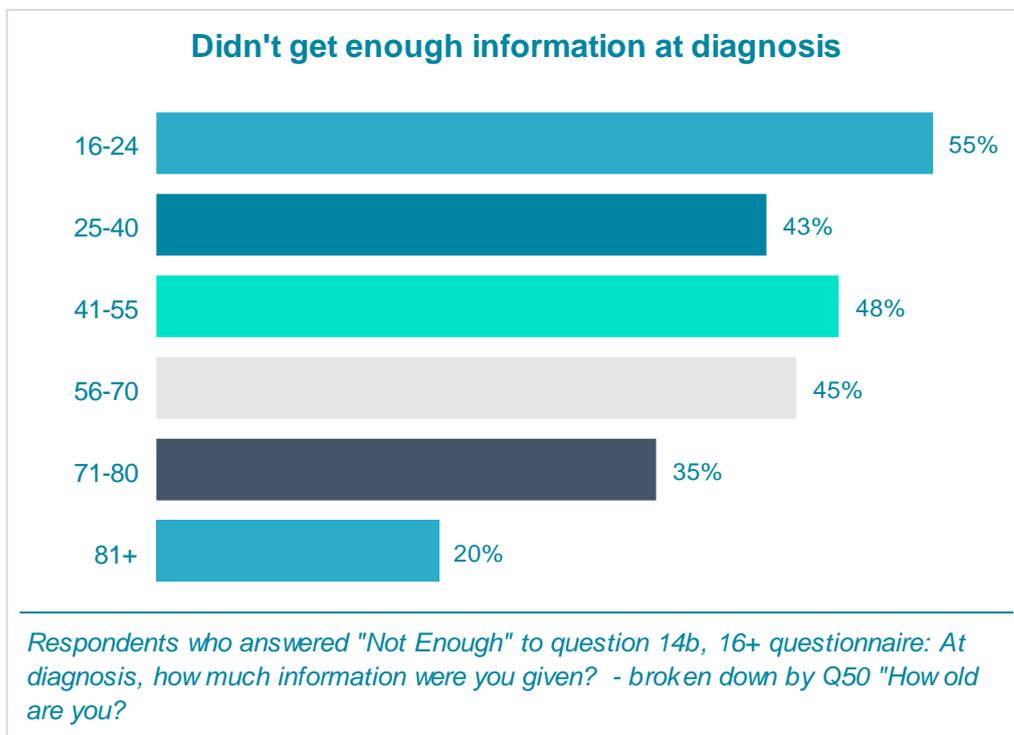
Some of the key findings include:

- **Q1 The older people are, the more likely they were to have heard of sarcoma (one-quarter of those aged over 56; compared to one-tenth of those aged between 16 and 40).**



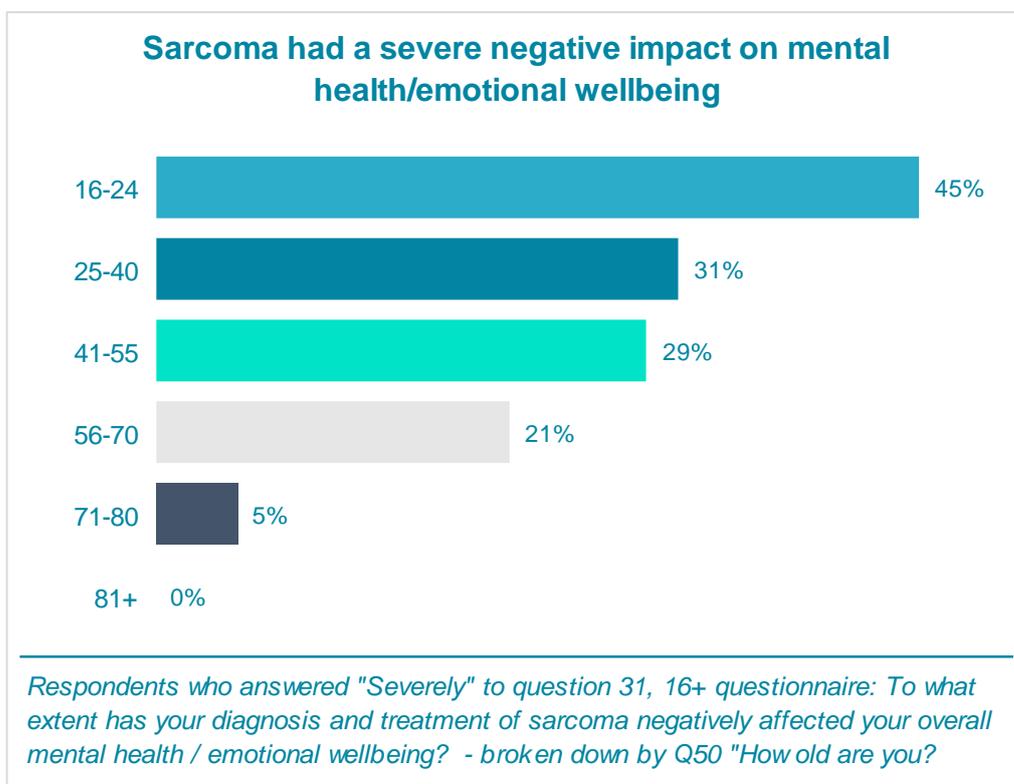
- Q2 Older people were less likely to cite bone pain as the main symptom that made them think something was wrong (6% of those aged 56+; compared to 16% of those aged between 16 and 40).
- Q7 Young people were more likely to see a healthcare professional 5 or more times before being referred for further tests. More than a third (35%) of 16-24 year olds had to see a healthcare professional 5 or more times, compared to 8% of 71-80 year olds.
- Q10 Older people were less likely to have started treatment for something else (35% of 16-24 year olds, compared to 17% of 71-80 year olds).

- **Q14b Younger people were more likely to say they didn't get enough information at diagnosis (55% of 16-24 year olds, compared to 35% of 71-80 year olds).**



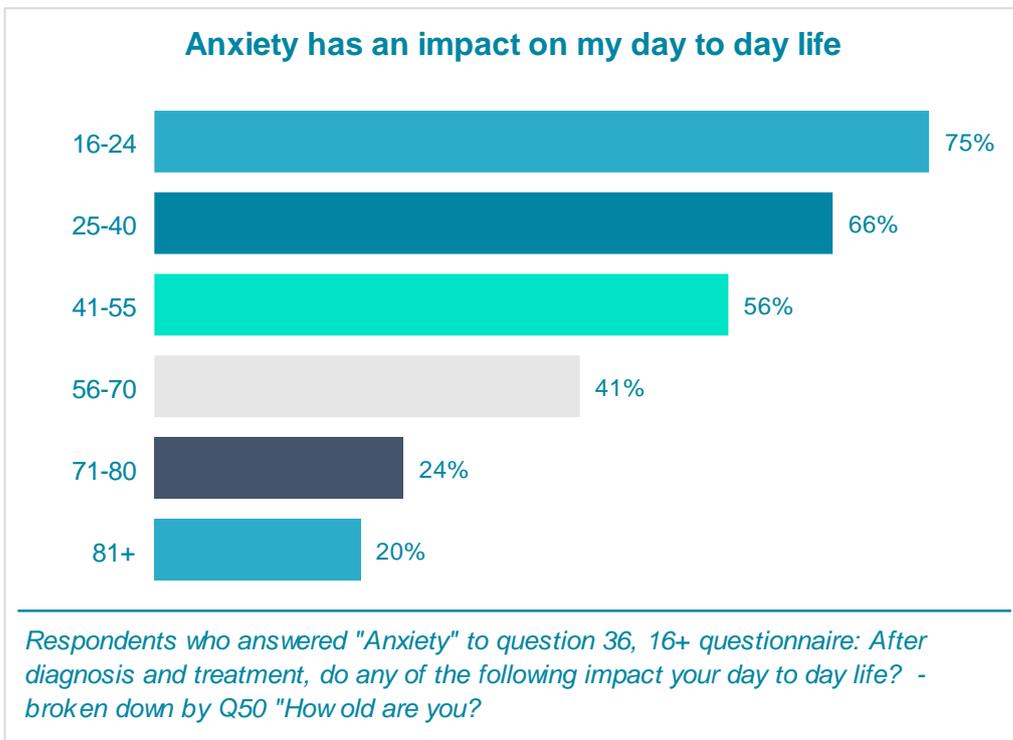
- **Q26 Younger people were less likely to say they have had a CNS in charge of their care at any time (55% of 16-24 year olds, compared to 65% and 63% of 41-55 year olds and 56-70 year olds respectively).**
- **Q28 The oldest age group were more likely to say they were given enough information to help make decisions about their treatment and care (65%-67% of those aged between 16 and 70, compared to 76% of those aged over 71).**

- **Q31 Younger people were more negative about the extent to which their sarcoma has affected their overall mental health/emotional wellbeing (45% of 16-24 year olds, compared to 21% of 56-70 year olds said 'severely').**



- **Q32 Older people were more likely to say they did not need emotional support from hospital staff (30% of 71-80 year olds, compared to between 5% and 15% of 16-55 year olds).**
- **Q34 Older people were more likely to say that the information given to them by the hospital about how their treatment would be followed up was very clear (77% of 71-80 year olds, compared to 62%-65% of 16 to 40 year olds).**

- **Q36 Younger people were more likely to say that anxiety impacts their day-to-day life after diagnosis and treatment (75% of 16-24 year olds, compared to 24% of 71-80 year olds).**

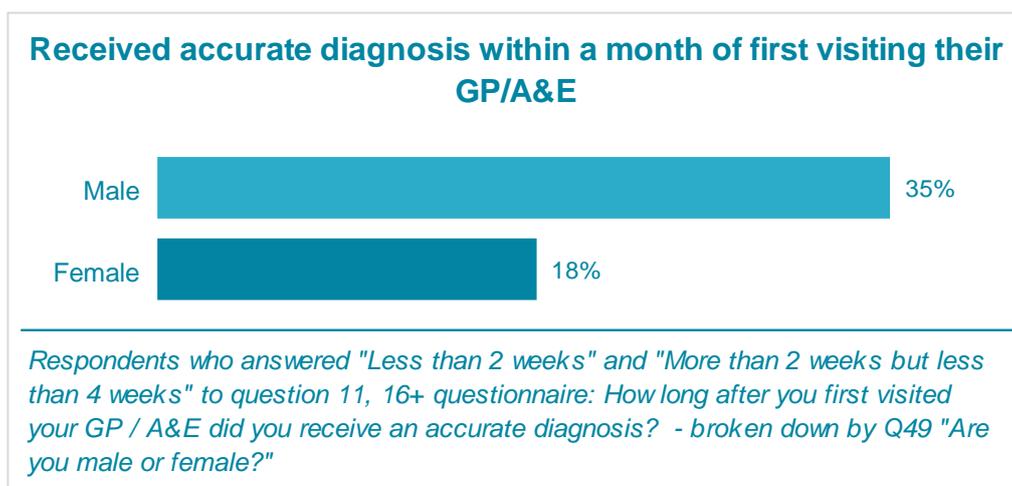


Gender

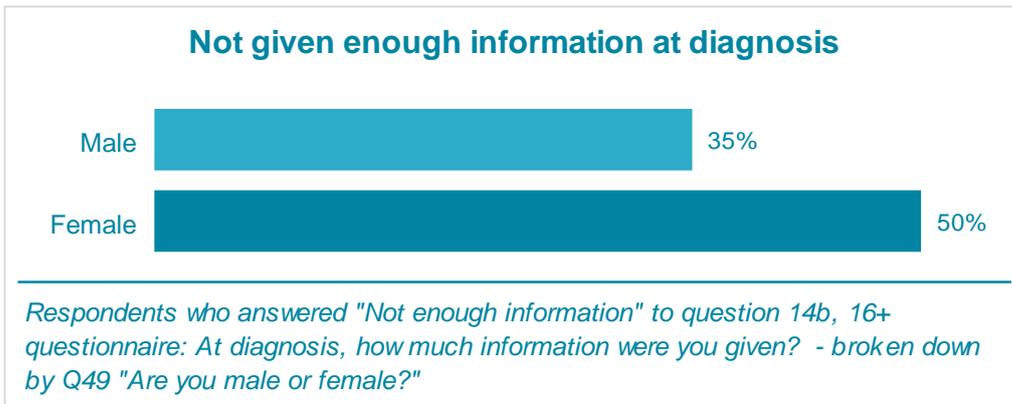
Generally, women were less satisfied with the amount of information and support that they were given. Women answered more negatively around some elements of their diagnosis experience, particularly the time it took to get an accurate diagnosis. Women were also more likely to say they were suffering with anxiety, and that their mental health or emotional wellbeing had been negatively impacted by their diagnosis and treatment.

It is important to consider the results here in terms of what this may be telling us over and above simple differences between men and women – for example: whether there are differences in expectations of men and women; how easy men and women find it to talk about, or admit to having emotional support needs; and whether men and women are treated differently by professionals.

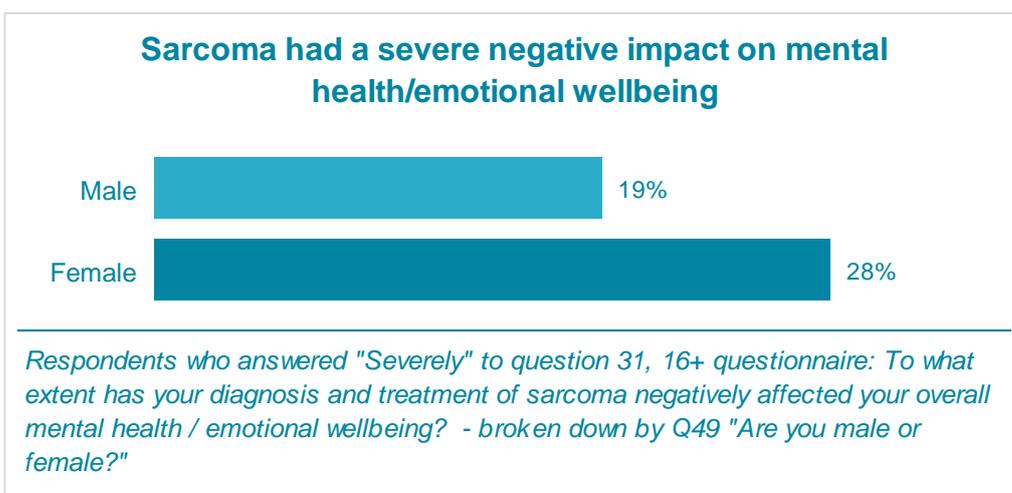
- Q6 More women than men said the healthcare professional they saw first didn't mention cancer or sarcoma (80% women, compared to 72% men).
- Q7 It was more common for men than women to go straight to hospital (30% men, compared to 19% women).
- **Q11 A higher percentage of men received an accurate diagnosis within a month of first visiting their GP/A&E (35% men, compared to 18% women).**



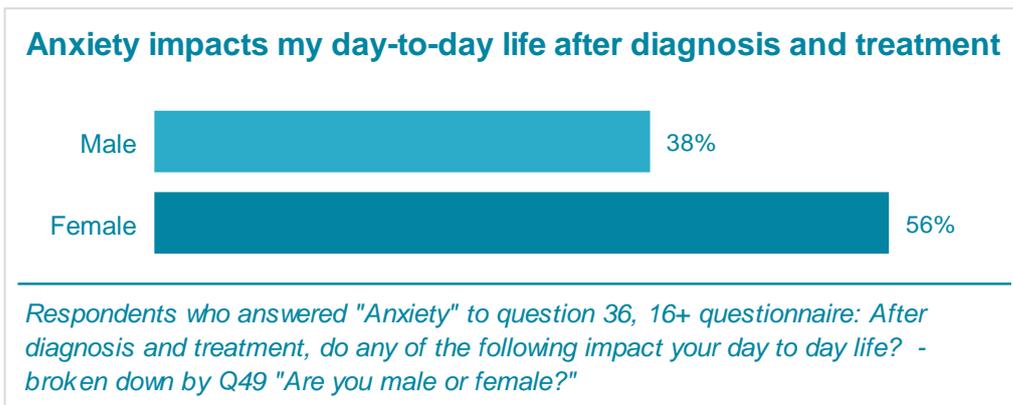
- **Q14b Women were more likely to say they were not given enough information at diagnosis (50% women, compared to 35% men).**



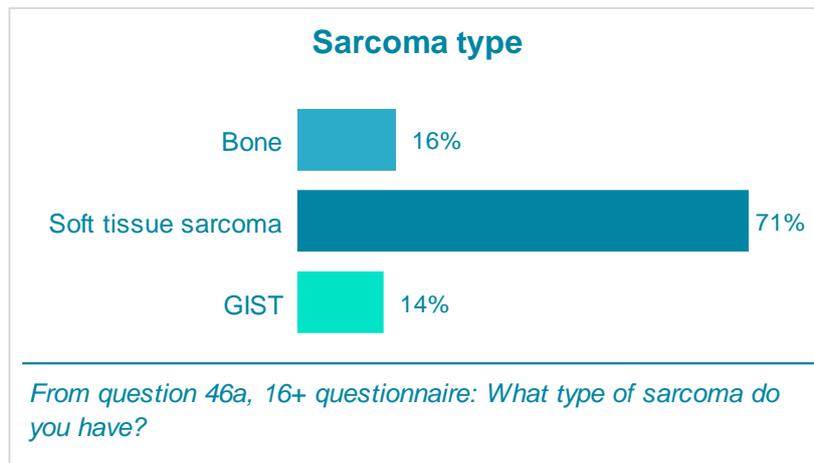
- Q25 Women were more likely to say they were not given a written care plan (58% women, compared to 46% men).
- Q26 Women were more likely to say they did not have a CNS in charge of their care at any time (18% women, compared to 13% men).
- Q28 Women were less likely to say they were given all the information they needed to help make decisions about their care and treatment (63% women, compared to 73% men).
- **Q31 Women were more likely to say that their diagnosis and treatment of sarcoma has negatively affected their overall mental health/emotional wellbeing (28% women, compared to 19% men saying their mental health/emotional wellbeing was 'severely' affected).**



- Q32 Women were more likely to say they would have liked more emotional support from hospital staff (44% women, compared to 28% men).
- Q34 Men were more likely to say that the information given to them by the hospital about how their treatment would be followed up was very clear (73% men, compared to 66% women).
- **Q36 Women were more likely to say that anxiety impacts their day-to-day life after diagnosis and treatment (56% women, compared to 38% men), whereas a similar percentage of men and women said depression impacts them (29% respectively).**



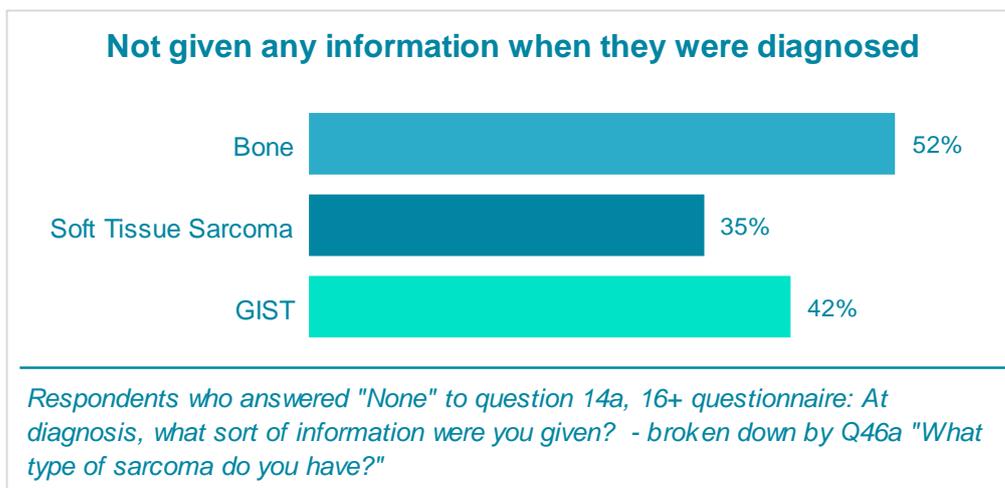
Sarcoma Type



The breakdown by sarcoma type provides detail on the differences between experiences of patients with different types of sarcoma, and enables some comparisons to be drawn. The data shows a mixed picture, with bone sarcoma patients experiencing longer waits for diagnosis and being less likely to say they do not have the information they need; while GIST patients were the least likely to say they were offered the emotional support they need, but more likely to have a written care plan.

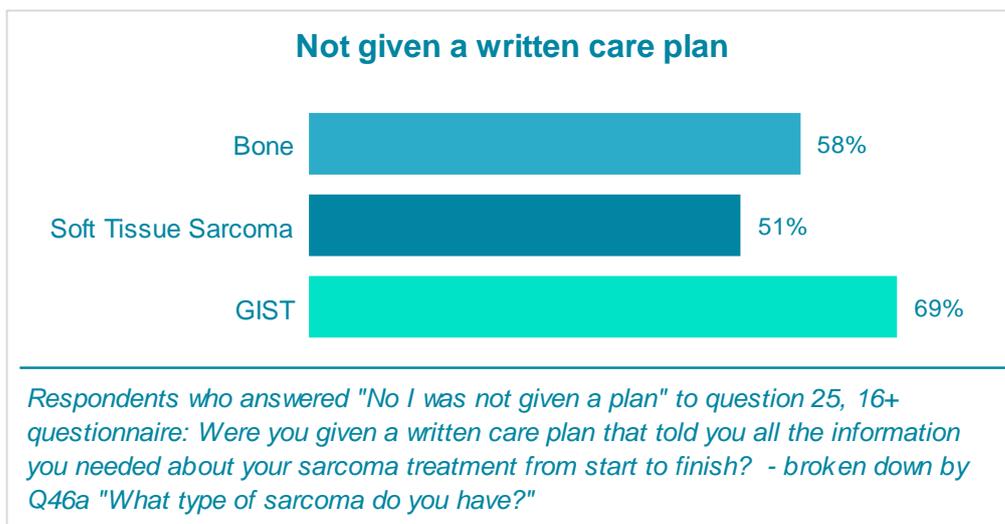
- Q3 GIST patients were most likely to see a doctor within 2 weeks of thinking that something might be wrong with them (55%) while bone sarcoma patients were least likely (19%).
- Q5 Bone sarcoma patients were most likely to be told that symptoms weren't serious and that they should come back if symptoms persisted (18%, compared to 10% soft tissue and 5% GIST).
- Q11 Bone and soft tissue sarcoma patients were more likely to wait longer for an accurate diagnosis (20% and 18% respectively, waited more than a year).

- **Q14a Bone sarcoma patients were more likely to say they were not given any information when they were diagnosed (52%).**



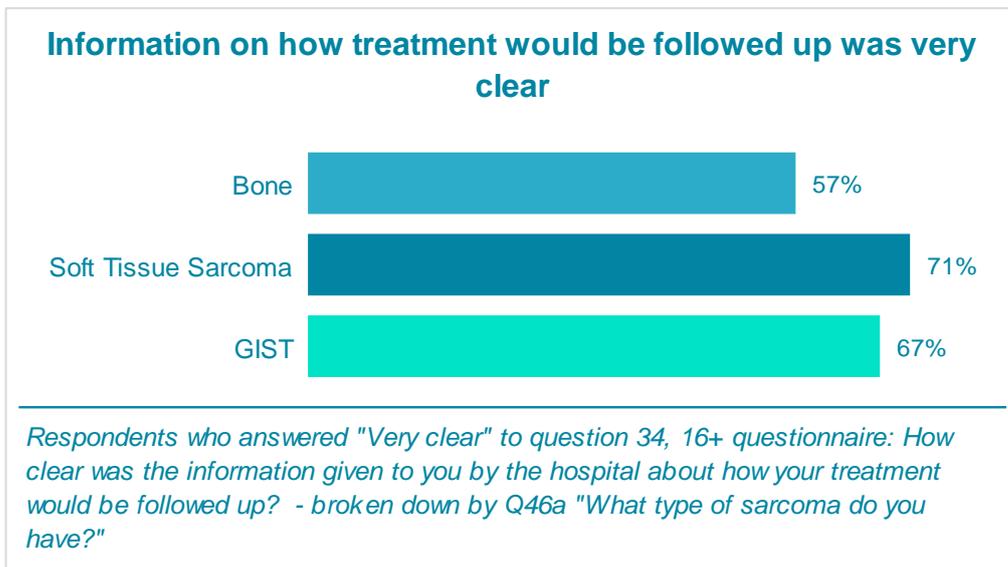
- Q14b GIST patients were more likely to say they had not been given enough information at diagnosis (51%) although the number was also high for both bone (43%) and soft tissue (44%) patients.
- Q22 Bone sarcoma patients were most likely to say they had experienced a range of side effects following treatment – 13 of the 17 symptoms listed were most likely to be experienced by bone sarcoma patients.
- Q23 Bone and soft tissue sarcoma patients were most likely to say that pain was the side effect which has had the greatest impact on their lives (47% and 37% respectively) – while for GIST patients it was daytime fatigue (44%).
- Q24 Bone and soft tissue sarcoma patients were most likely to say they were treated at a specialist sarcoma centre (86% and 84% respectively, compared to 64% GIST).

- **Q25 GIST patients were more likely to say they were not given a written care plan (69%), compared to 58% bone sarcoma and 51% soft tissue sarcoma.**

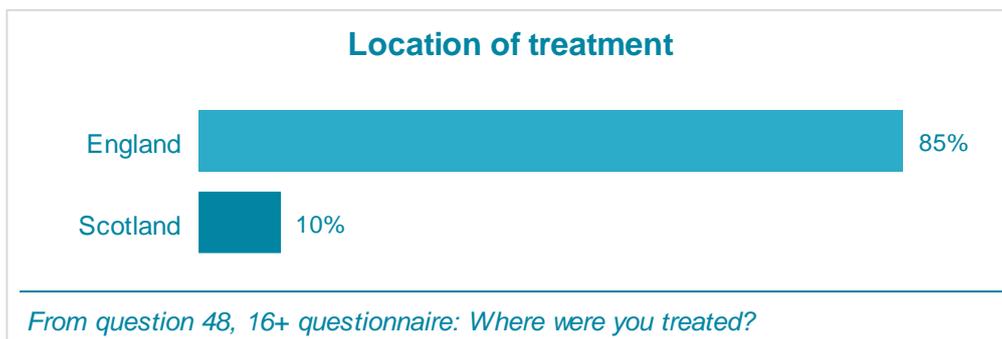


- Q26 Soft tissue sarcoma patients were more likely to say they have a named CNS or key worker (66%) compared to 57% bone sarcoma patients, 51% GIST patients.
- Q28 Bone sarcoma patients were less likely to say they had all the information they needed to help them make decisions about their treatment and care (57%), compared to 68% soft tissue sarcoma patients and 67% GIST patients.
- Q31 Bone and soft tissue sarcoma patients were more likely to say that their mental health/wellbeing had been affected by their diagnosis and treatment (24% and 28% respectively said 'severely', compared to 9% GIST).
- Q32 GIST patients were least likely to say they had definitely been given the emotional support they needed (9%), compared to 20% bone sarcoma and 18% soft tissue sarcoma.

- **Q34 Bone sarcoma patients were less likely to say that the information they were given on how their treatment would be followed up was very clear (57%), compared to 71% soft tissue and 67% GIST sarcoma.**



Location (England/Scotland comparison)

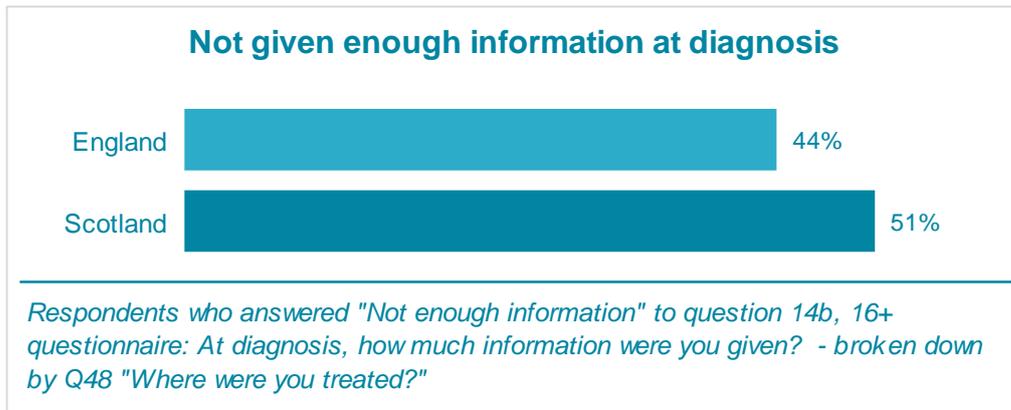


‘Other’ category includes people who said they were treated somewhere ‘other’ than the UK but also mentioned that they were also treated in the UK in the free text box.

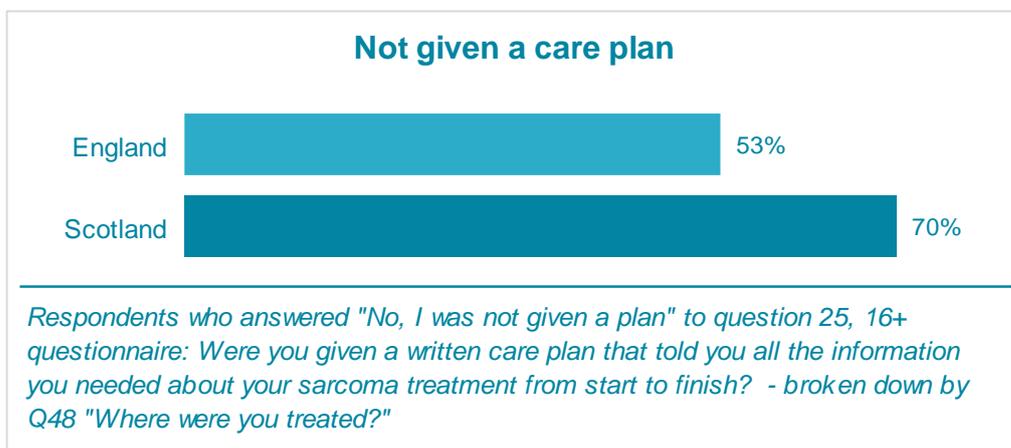
The numbers are lower for Scotland than for England so, when making comparisons, this group must be treated with caution. In addition, Wales and Northern Ireland have not been included in this analysis due to low numbers. The differences in how people in England and Scotland responded did not amount to one group consistently answering more positively or negatively. There were differences in experience around diagnosis, with more people in Scotland diagnosed after only one trip to a healthcare professional and within two weeks of initially presenting. Fewer people in Scotland received information at diagnosis, however they were more likely to have been informed of support groups (although not sarcoma-specific groups).

- Q4 People in Scotland were more likely to go to A&E first (13%, compared to 6% in England) rather than, for example, seeing a GP about their symptoms (73% compared to 84% in England).
- Q11 People in Scotland were more likely to receive an accurate diagnosis within the first two weeks of visiting a healthcare professional about their symptoms (14% compared to 8% in England).
- Q14a People in Scotland were more likely to say that they were not given any information at diagnosis (47% compared to 36% in England).

- **Q14b People in Scotland were more likely to say that they were not given enough information at diagnosis (51% compared to 44% in England).**



- Q21 Respondents in Scotland answered more positively about how easy or difficult it was to travel for their treatment (22% said 'very easy', compared to 12% in England).
- Q24 Fewer people in Scotland were treated by a sarcoma specialist team (68%, compared to 83% in England).
- **Q25 People in Scotland were less likely to be given a written care plan that told them all the information they needed about their treatment (70%, compared to 53% in England).**



- Q29 Fewer people in Scotland than England were invited to take part in any research (67% said no, compared to 47% in England).

5.4. Additional cross tabulations analysis

As a further part of the analysis, a number of cross tabulations were examined to establish whether there was a relationship between particular variables and answers given. In order to do this, Sarcoma UK provided a number of hypotheses or theories to explore. It is important to note that the analyses carried out were not statistical tests but were looking to see if there were trends in the data which add further evidence to the findings from the breakdown analysis (5.3).

The key findings are listed here, and the details of this can be found in appendix A. We have also included any analysis that has shown where there is not a clear relationship being shown in the survey data, which in itself can provide some interesting insights - for example, into assumptions about the impact of a diagnosis on different groups.

Finally, we have noted where we are unable to draw any meaningful conclusions because the numbers are too small.

Diagnosis

1. The relationship between time to receive an accurate diagnosis and the number of visits to a healthcare professional before being referred (see appendix A, D1)

Analysis confirmed that more than half of those who waited for more than a year for an accurate diagnosis, had to see a healthcare professional five or more times (D1). We also considered the relationship between different age groups and time to receive an accurate diagnosis (D2) for particular symptoms, however the numbers were too small to draw any meaningful conclusions.

Support

2. The emotional impact and support given, comparing those who were treated by a sarcoma specialist team to those who were not (see appendix A, S1/S2)

The analysis showed that a patient's overall mental health and wellbeing was no more or less likely to be negatively affected depending on if they are treated by a sarcoma specialist team (S1). Respondents were equally affected whichever setting they were treated in.

We also asked respondents what affected them when they finished treatment, and compared those who were treated in a sarcoma specialist team to those who were not. We could not compare the responses however as there were far more respondents who had been treated at a sarcoma specialist centre than those who had not, therefore some small numbers for individual response options.

Participants were more likely to be referred to a rehab service if they were treated by a specialist sarcoma cancer team (although as before, the numbers being treated by a non-specialist team were small, so comparison should be treated cautiously). (S2)

3. The relationship between various factors and patient anxiety (see appendix A, S3)

Analysis showed that the longer it took for a patient to be diagnosed, the more likely they were to experience anxiety (S3), and that those who found travelling for treatment difficult were also more likely to experience anxiety. However, there was no difference between those patients who had been told about support groups or not – both were equally likely to experience anxiety.

4. The relationship between being treated by a specialist sarcoma team and having the likelihood of having a Clinical Nurse Specialist (see appendix A, S4)

Analysis showed that those who were treated by a sarcoma specialist team were more likely to be aware that they had a Clinical Nurse Specialist in charge of their care (S4), although again, the numbers were small for those who were not treated in a specialist team, so comparisons should be treated cautiously.

Treatment

5. How number of hospitals attended impacts day-to-day life (see appendix A, T1)

Analysis showed that generally, people who attended more hospitals for their treatment were more likely to be impacted by pain, mobility issues and fatigue in their day-to-day life (T1). Respondents who had attended more than three hospitals for their treatment were the most likely to be impacted by any of these things (anxiety, insomnia, pain, mobility issues and fatigue.)

6. Whether waiting a long time to present impacts overall mental health and wellbeing (see appendix A, C1)

Analysis showed that the extent to which overall mental health and emotional wellbeing is negatively affected does not seem to be impacted by how long people wait to present (C1). However, those respondents who had waited longer to present were more likely to have been impacted by at least one on the following: anxiety, insomnia, pain, mobility issues and fatigue.

The analysis did not show that there were any clear differences in the treatment people had, depending on how long they had taken to present (C3). And again, the extent to which respondents said that their overall mental health and emotional wellbeing is negatively affected does not seem to be impacted by how long people wait to present.

The analysis also looked at whether the time it took to present affected whether patients experienced certain impacts on their day-to-day life once they had finished treatment (such as coping with side effects or reduced mobility). There were no clear messages emerging from this data.

7. The impact on those who had to see a healthcare professional more times before being referred (see appendix A, C4)

Analysis showed that those who saw a healthcare professional once before being referred were more likely to have an operation and/or radiotherapy than those who saw a healthcare professional more times (C4).

The analysis also showed that those who saw a healthcare professional more times were more likely to say that their overall mental health / emotional wellbeing had been negatively affected.

The analysis also looked at whether there was a correlation between how many times someone had seen a healthcare professional and how their day to day life was impacted once treatment was stopped. However, there were no clear findings emerging from this.

8. The impact of waiting longer to receive an accurate diagnosis (see appendix A, C5)

The analysis showed that those who waited longer to receive an accurate diagnosis were more likely to have had more than one operation (C5). It also showed that the length of time to receive an accurate diagnosis did not affect the extent to which people's overall mental health and emotional wellbeing is negatively affected.

There was some correlation between the length of time to receive an accurate diagnosis and the likelihood that someone is affected by a number of factors (such as coping with side effects, disability or reduced mobility). However, there were some small numbers here and this was not true for those people who had waited over a year.

9. Likelihood of receiving chemotherapy or radiotherapy if treated by a sarcoma specialist team (see appendix A, C6)

Analysis showed that those who were treated by a specialist sarcoma team appear more likely to receive radiotherapy or chemotherapy than those who were not (C6). However, there were small numbers in the group not treated by a specialist sarcoma team, so comparisons should be treated with caution.

10. The impact of being given a written care plan (see appendix A, C7)

The analysis looked at whether the likelihood of patients receiving a written care plan affected the kind of treatment they had (an operation, chemotherapy, radiotherapy). There was no clear finding emerging from this.

The analysis also appears to tell us that those who said they had a care plan but it only told them some things and those who said they were not given a care plan were both more likely to say their overall mental health and emotional wellbeing were severely negatively affected.

Finally, the analysis looked at whether those who were given a written care plan were more or less likely to be affected by a number of factors (such as coping with side effects, reduced mobility or disability). However, there were no clear findings emerging from this.

5.5. Thematic analysis

This summary presents the findings following a thematic analysis of the free text comments. In order for Sarcoma UK to understand and identify the main issues contained within these comments, Quality Health undertook a systematic analysis. All comments were read in full, and an appropriate code applied to each one. During this process, Quality Health categorised the comments by the themes which they address. Many of the comments were coded more than once if they addressed more than one theme. This means the total number of 'individual' comments exceeds the number of 'full' comments.

There were multiple free text opportunities in the questionnaires, and the thematic analysis detailed below is for the following questions:

- Is there anything else you would like to say about your (child's) journey to being diagnosed?
(Q9 16+ Questionnaire) (Q9 Parents of Under 16s Questionnaire)
- When your treatment finished, what affected you the most day to day? 'Something else (please specify)'
(Q37 16+ questionnaire)
- When your treatment finished, what were you most worried about? 'Something else (please specify)'
(Q38 16+ questionnaire)
- What would be the three biggest improvements that could be made to sarcoma services?
(Q43 16+ Questionnaire) (Q43 Parents of Under 16s Questionnaire) (Q22 Family and Carers Questionnaire)

The themes are listed by the number of comments (in descending order), with any miscellaneous and not applicable comments at the end. Example comments are provided for the most common themes.

Is there anything else you would like to say about your (child's) journey to being diagnosed? (Q9 16+ Questionnaire) (Q9 Parents of Under 16s Questionnaire)

In order for Sarcoma UK to understand and identify the main issues contained within these comments, Quality Health undertook a systematic analysis of the comments by theme. The themes arising from the comments are listed below:

- **Time before being referred** Comments about the time people waited before being referred for further tests.
- **Accuracy of diagnosis** Comments about the accuracy of the diagnosis people received, often about misdiagnosis.
- **Being taken seriously / listened to** Comments about medical professionals taking people's symptoms seriously, or not.
- **Time for diagnosis** General comments about the length of time to receive diagnosis.
- **General experience** Comments about the quality of experience, often about opinions of medical professionals.
- **Waiting times / speed of system** Comments about the speed of the system, for example, the time after being referred before being seen, or time to receive results.
- **Chance diagnoses and missed opportunities** Comments about people that were diagnosed by chance or felt there were missed opportunities to diagnose them – for example, at scans for other conditions.
- **Number of visits / people involved** Comments about seeing multiple medical professionals, going back for multiple tests, etc.
- **Impact of diagnosis speed / accuracy** Comments about how diagnosis experience affected outcomes i.e. a slow diagnosis leading sarcoma to metastasise.
- **Communication / information** Comments about communication of diagnosis, information shared, contact from medical professionals, etc.
- **Awareness of / familiarity with sarcoma** Comments about (mainly medical professionals') knowledge of or familiarity with sarcoma.
- **Personal details** Factual comments about respondents' diagnosis, for example, how long ago, or where they were treated.
- **Private care** Comments that refer to private care.

Is there anything else you would like to say about your journey to being diagnosed? (Q9 16+ Questionnaire)

There were **455** comments received for the 16+ questionnaire. Of the 455 full comments, **981** individual comments were identified.

Theme	Count	Percentage
Time before being referred	117	12%
Accuracy of diagnosis	117	12%
Being taken seriously / listened to	113	12%
Time for diagnosis	103	10%
General experience	98	10%
Waiting times / speed of system	93	9%
Chance diagnoses and missed opportunities	54	6%
Number of visits / people involved	52	5%
Impact of diagnosis speed / accuracy	51	5%
Communication / information	50	5%
Awareness of / familiarity with sarcoma	49	5%
Personal details	48	5%
Private care	36	4%
Total	981	100%

Time before being referred

'It was far too slow a process and when I was eventually sent for an MRI, it was months after seeing my GP. The MRI showed I had a sarcoma.'

'Disappointed I wasn't scanned earlier in the process. From initial GP check, where told to only come back if it gets bigger, to the point of the ultrasound scan which diagnosed the cancer, months elapsed.'

Accuracy of diagnosis

'Treated for something else - no tests done as considered too young for cancer!'

'I was misdiagnosed for six months.'

Being taken seriously / listened to

'The GP said I was a hypochondriac and sent me away!'

'I was made to feel that I was wasting my GP's time. It was only after I moved and saw a new GP that my concerns were taken seriously and acted upon.'

Is there anything else you would like to say about your child’s journey to being diagnosed? (Q9 Parents of Under 16s Questionnaire)

There were **44** comments received for the parents’ questionnaire. Of the 44 full comments, **89** individual comments were identified.

Theme	Count	Percentage
Being taken seriously / listened to	17	19%
Time before being referred	12	13%
Accuracy of diagnosis	9	10%
Time for diagnosis	8	9%
Waiting times / speed of system	8	9%
Number of visits / people involved	8	9%
General experience	7	8%
Chance diagnoses and missed opportunities	7	8%
Awareness of / familiarity with sarcoma	4	4%
Impact of diagnosis speed / accuracy	4	4%
Personal details	3	3%
Private care	1	1%
Communication / information	1	1%
Total	89	100%

Being taken seriously / listened to

‘It was far too difficult to get someone to act with urgency. Had I not lost patience and refused to leave A&E until we saw a paediatrician, I don’t know what would’ve happened.’

‘My GP wouldn’t listen to me. I knew something was seriously wrong with my child.’

Time before being referred

‘A&E doctors were all baffled and couldn’t understand why GP hadn’t referred them before now. They got us an appointment with specialist the following morning.’

‘My child was referred to hospital immediately by the GP and seen the next day. I felt let down by them as they told us for a month that it was something else before referring them for a scan, despite the fact that I was worried.’

Accuracy of diagnosis

‘After a couple of trips to the GP, we were told that our child had a condition (not sarcoma) and were referred to a specialist. We waited weeks for this appointment and the specialist knew straight away that it was a tumour and sent us straight to the correct consultant at a different hospital.’

‘GP said growing pains. I self-referred, and GP adamant nothing wrong apart from growing pains.’

When your treatment finished, what affected you the most day to day? ‘Something else (please specify)’ (Q37 16+ Questionnaire)

In order for Sarcoma UK to understand and identify the main issues contained within these comments, Quality Health undertook a systematic analysis of the comments by theme. The themes arising from the comments are listed below:

- **Fear of recurrence** Comments about the uncertainty around long-term health.
- **Coping with other side effects** Comments about coping with side effects (not including tiredness).
- **Anxiety and mental health** Comments about mental health, anxiety and need for support.
- **Work and getting back to normal** Comments about employment and returning to ‘normal’.
- **Tiredness** Comments specifically about fatigue.
- **Feeling left alone** Comments about a lack of follow-up appointments or contact.
- **Frustration with others (including healthcare professionals)** Comments about others’ behaviour – from friends to healthcare professionals.
- **NA / personal information** ‘Not applicable’ comments or factual comments about respondents’ situations, for example when they finished treatment.

There were **75** comments received in total. Of the 75 full comments, **87** individual comments were identified.

Theme	Count	Percentage
Fear of recurrence	20	23%
Coping with other side effects	17	20%
Anxiety and mental health	14	16%
Work and getting back to normal	10	11%
Tiredness	8	9%
Feeling left alone	8	9%
Frustration with others (including healthcare professionals)	7	8%
NA / personal information	3	3%
Total	87	100%

Fear of recurrence

‘Not knowing if/when it might metastasise or appear elsewhere.’

‘Thinking every ache or pain was a sign it had returned.’

Coping with other side effects

‘Side effects of radiotherapy – fatigue and bowel disturbance.’

‘Coping with hearing loss (which was an unexpected side effect of treatment).’

When your treatment finished, what were you most worried about? ‘Something else (please specify)’ (Q38 16+ Questionnaire)

In order for Sarcoma UK to understand and identify the main issues contained within these comments, Quality Health undertook a systematic analysis of the comments by theme. The themes arising from the comments are listed below:

- **All / most of the above** Comments stating more than one of the given answer options applied to them.
- **Family** Comments about the impact on family members.
- **Inappropriate follow-up care** Comments about concerns around inadequate follow up.
- **Work** Comments about work concerns.
- **Symptoms** Comments about symptoms (that might indicate something important).
- **Side effects** Comments about the impact of side effects.
- **Miscellaneous**
- **NA / personal information** ‘Not applicable’ comments or factual comments about respondents’ situations.

There were **22** comments received in total. Of the 22 full comments, **24** individual comments were identified.

Theme	Count	Percentage
All / most of the above	4	17%
Family	3	13%
Inappropriate follow-up care	3	13%
Work	2	8%
Symptoms	2	8%
Side effects	2	8%
Miscellaneous	2	8%
NA / personal information	6	25%
Total	24	100%

Family

‘Leaving my child without their parent.’

‘Family.’

‘What would happen to my kids if I pass?’

Inappropriate follow-up care

‘Not receiving appropriate follow up despite being advised that I would need lifelong follow up.’

‘No clear plan and seeing a different doctor at every appointment, along with different surgeon.’

What would be the three biggest improvements that could be made to sarcoma services? (Q43 16+ Questionnaire) (Q43 Parents of Under 16s Questionnaire) (Q22 Family and Carers Questionnaire)

In order for Sarcoma UK to understand and identify the main issues contained within these comments, Quality Health undertook a systematic analysis of the comments by theme. The themes arising from the comments are listed below:

- **Information** Comments about more or better information, across a wide variety of topics and points in the journey, including some comments about quality of explanation.
- **Sarcoma awareness – medical professionals** Comments about knowledge and awareness of sarcoma, specifically among medical professionals and often GPs.
- **(Emotional) support** Comments about support, often specifically emotional support.
- **Improved access to (sarcoma-specialist) care and professionals** Comments about more (or closer) sarcoma specialist centres and professionals, and general comments about improving access to care.
- **Communication and organisation of care** Comments about communication, regularity of contact and organisation of care.
- **Quicker / better diagnosis** Comments about an improved diagnosis, including support, information, and communication at diagnosis.
- **Sarcoma awareness – general** Comments about knowledge and awareness of sarcoma (that do not specifically mention medical professionals.)
- **Research / funding** Comments about research and funding, including comments about clinical trials and finding a cure for sarcoma.
- **Referral / speed** Comments about quicker results, waiting lists and immediate referrals.
- **Charities, peer support and groups** Comments about support groups, peer support and charity services.
- **Life with sarcoma** Comments across a range of day-to-day topics – from financial support, to comfier waiting rooms, to nutrition advice.
- **Aftercare** Comments about support after treatment, including emotional support, and getting 'back to normal'.
- **Information / support specific to children (specific to Parents of Under 16s Questionnaire)** Comments about care, support and information that is specifically for or in relation to children.
- **Bereavement support (specific to Family and Carers Questionnaire)** Comments about support for the bereaved.
- **End-of-life care (specific to Family and Carers Questionnaire)** Comments about improving the experience around the end of a patient's life.
- **Miscellaneous**
- **N/A**

What would be the three biggest improvements that could be made to sarcoma services? (Q43 16+ Questionnaire)

There were **1228** comments received for the 16+ questionnaire. Of the 1228 full comments, **1391** individual comments were identified.

Theme	Count	Percentage
Information	212	15%
Sarcoma awareness – medical professionals	153	11%
(Emotional) support	145	10%
Improved access to (sarcoma-specialist) care and professionals	138	10%
Communication and organisation of care	132	9%
Quicker / better diagnosis	122	9%
Sarcoma awareness – general	104	7%
Research / funding	87	6%
Referral / speed	82	6%
Charities, peer support and groups	69	5%
Life with sarcoma	59	4%
Aftercare	45	3%
Miscellaneous	26	2%
N/A	17	1%
Total	1391	100%

Information

'Clear written information and data about your type of sarcoma.'

'More information available at hospital outpatients.'

'Information about side effects from surgery that is realistic and not too optimistic.'

Sarcoma awareness: medical professionals

'More GP awareness and better training to identify sarcoma.'

'Clinicians' knowledge and understanding of it.'

(Emotional) support

'Stronger links to emotional support from the beginning.'

'Access to support services.'

'More support services – emotionally and physically.'

What would be the three biggest improvements that could be made to sarcoma services? (Q43 Parents of Under 16s Questionnaire)

There were **107** comments received for the parents' questionnaire. Of the 107 full comments, **118** individual comments were identified.

Theme	Count	Percentage
Research / funding	20	17%
Information	19	16%
Sarcoma awareness – medical professionals	15	13%
Improved access to (sarcoma-specialist) care and professionals	15	13%
Sarcoma awareness – general	11	9%
Charities, peer support and groups	9	8%
(Emotional) support	6	5%
Information / support specific to children	6	5%
Referral / speed	4	3%
Communication and organisation of care	3	3%
Life with sarcoma	2	2%
Aftercare	2	2%
Quicker / better diagnosis	1	1%
Miscellaneous	5	4%
N/A	0	0%
Total	118	100%

Research / funding

'More research into new treatments for childhood sarcoma.'

'Lobby for funds for research into this rare cancer.'

'More research into sarcoma and kinder treatments.'

Information

'More detailed info to reduce the need to Google.'

'More information about what it actually is and how it forms.'

Sarcoma awareness: medical professionals

'Make consultants more aware of sarcoma. Even though it is rare, it happens, and the diagnosis takes far too long. Every day matters.'

'Make sure that all GPs are aware of the golf ball campaign.'

What would be the three biggest improvements that could be made to sarcoma services? (Q22 Family and Carers Questionnaire)

There were **804** comments received for the family and carers' questionnaire. Of the 804 full comments, **903** individual comments were identified.

Theme	Count	Percentage
(Emotional) support	100	11%
Research / funding	98	11%
Sarcoma awareness – medical professionals	95	11%
Information	94	10%
Sarcoma awareness – general	90	10%
Improved access to (sarcoma-specialist) care and professionals	88	10%
Quicker / better diagnosis	80	9%
Communication and organisation of care	71	8%
Life with sarcoma	58	6%
Charities, peer support and groups	44	5%
Referral / speed	40	4%
Bereavement support	10	1%
Aftercare	8	1%
End of life care	5	1%
Miscellaneous	11	1%
N/A	11	1%
Total	903	100%

(Emotional) support

'Support to the patient and the family.'

'Support and counselling service for patients (children and young people especially) and their family members.'

Research / funding

'For the government to acknowledge sarcoma, and put funding into more research and resources.'

'Fund more research into diagnosis and treatment for sarcoma.'

Sarcoma awareness: medical professionals

'For GPs to be more aware of and knowledgeable about sarcoma and access to specialist sarcoma teams.'

'Publicise awareness – such as the 'golf ball initiative' – to health professionals, including non-GPs.'

6. Conclusions

Ahead of this survey, many people affected by sarcoma made it clear that their experience of care in the UK was not what it should have been. Now, this survey data from over 1,000 people provides a rich dataset that is clear in demonstrating that sarcoma patients are not getting access to the care and support they need.

Patients often took a long time before presenting at a primary care professional, and then faced a number of hurdles before being referred or receiving an accurate diagnosis. As a vast majority had not heard of sarcoma before their diagnosis, it is likely that patients did not recognise the signs and symptoms of sarcoma. In addition, many patients had to visit a healthcare professional many times with their symptoms before being referred for further tests, suggesting that GPs may not link the signs present to sarcoma either. Indeed, analysis of the free text comments showed that, when asked what the biggest improvements to sarcoma services would be, sarcoma awareness among medical professionals was one of the most popular choices.

Once referred into the system, patients experienced additional delays before receiving an accurate diagnosis. In the free text comments around diagnosis were a number of personal examples of how a slow diagnosis had led to worse outcomes for the individual. This unnecessarily long period between first symptoms and an accurate diagnosis is hugely concerning, as the sooner diagnosis takes place, the more likely a patient will be to have successful treatment.

Despite attempts to ensure that all sarcoma patients are treated at a specialist centre, for a significant number of people this is not the case. Drawing a comparison to the 2015 National Sarcoma Survey, the proportion of people treated outside of these centres has grown.

The effect of sarcoma on the psychological wellbeing of both patients and their support networks should not be underestimated – with almost all patients and carers responding to our survey saying that there was a negative impact on their mental health and wellbeing. Despite this, not enough said they were offered formal support.

Another clear area for improvement is a dissatisfaction in the level of information given to patients. Getting the right information at the right time can help to make better informed decisions about treatment, and can support mental wellbeing at such a difficult time. Information was the most popular choice when the 16+ group were asked what the biggest improvements to sarcoma services would be. Counselling and support groups can provide patients with someone to talk to from outside their support network. However, less than half of respondents were told about local support groups and, of these, only around half again were told about sarcoma-specific groups.

This results of this survey of sarcoma patients and carers provide the rich and robust data needed to lobby governmental bodies to improve sarcoma services.

7. Appendices

7.1. Appendix A – Cross tabulation of questions for further analysis

A1. Diagnosis (D)

D1. Q11 by Q7

Q7 <i>Before you were referred for further tests, how many times did you see a healthcare professional about the symptoms you had?</i>		Q11 How long after you first visited your GP / A&E did you receive an accurate diagnosis?											
		More than 2 weeks but less than 4 weeks		More than 4 weeks but less than 3 months		More than 3 months but less than 6 months		More than 6 months but less than a year		More than a year		More than 4 weeks	
Base		94		194		114		86		113		507	
Response Code		2		3		4		5		6		3-6	
Response Options		n	%	n	%	n	%	n	%	n	%	n	%
2	I saw a healthcare professional once	47	50%	66	34%	25	22%	9	10%	7	6%	107	21%
3	I saw a healthcare professional twice	7	7%	47	24%	22	19%	18	21%	10	9%	97	19%
4	I saw a healthcare professional 3 or 4 times	8	9%	23	12%	34	30%	31	36%	30	27%	118	23%
5	I saw a healthcare professional 5 or more times	1	1%	6	3%	15	13%	19	22%	58	51%	98	19%
	Saw HCP three times or more	9	10%	29	15%	49	43%	50	58%	88	78%	216	43%

D2. Q2a by Q3 & age bands

Q2a

What were the main health problems or symptoms that first made you think something was wrong? - Painless lump

	Q50 How old are you?											
	16-24		25-40		41-55		56-70		71-80		81+	
Base	20		134		252		187		62		5	
Response Code	1		2		3		4		5		6	
Q3 Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 Less than 2 weeks	4	20%	23	17%	28	11%	12	6%	8	13%	0	0%
2 More than 2 weeks but less than 4 weeks	3	15%	5	4%	27	11%	15	8%	6	10%	1	20%
3 More than 4 weeks but less than 3 months	1	5%	11	8%	18	7%	10	5%	6	10%	0	0%
4 More than 3 months but less than 6 months	0	0%	3	2%	6	2%	4	2%	1	2%	0	0%
5 More than 6 months but less than a year	0	0%	3	2%	9	4%	5	3%	1	2%	0	0%
6 More than a year	2	10%	3	2%	4	2%	1	1%	1	2%	0	0%

D2. Q2b by Q3 & age bands

Q2b

What were the main health problems or symptoms that first made you think something was wrong? - Painful lump

		Q50 How old are you?											
		16-24		25-40		41-55		56-70		71-80		81+	
Base		20		134		252		187		62		5	
Response Code		1		2		3		4		5		6	
Q3 Response Options		n	%	n	%	n	%	n	%	n	%	n	%
1	Less than 2 weeks	1	5%	10	7%	15	6%	4	2%	1	2%	1	20%
2	More than 2 weeks but less than 4 weeks	0	0%	4	3%	8	3%	11	6%	0	0%	0	0%
3	More than 4 weeks but less than 3 months	0	0%	5	4%	12	5%	5	3%	3	5%	0	0%
4	More than 3 months but less than 6 months	0	0%	4	3%	4	2%	3	2%	0	0%	0	0%
5	More than 6 months but less than a year	0	0%	3	2%	4	2%	1	1%	1	2%	0	0%
6	More than a year	1	5%	3	2%	5	2%	1	1%	0	0%	0	0%

D2. Q2c by Q3 & age bands

Q2c

What were the main health problems or symptoms that first made you think something was wrong? - Lump increasing in size

	Q50 How old are you?											
	16-24		25-40		41-55		56-70		71-80		81+	
Base	20		134		252		187		62		5	
Response Code	1		2		3		4		5		6	
Q3 Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 Less than 2 weeks	2	10%	18	13%	20	8%	4	2%	4	6%	1	20%
2 More than 2 weeks but less than 4 weeks	0	0%	4	3%	11	4%	14	7%	4	6%	1	20%
3 More than 4 weeks but less than 3 months	0	0%	9	7%	13	5%	10	5%	6	10%	0	0%
4 More than 3 months but less than 6 months	0	0%	5	4%	5	2%	1	1%	1	2%	0	0%
5 More than 6 months but less than a year	0	0%	3	2%	7	3%	2	1%	0	0%	0	0%
6 More than a year	2	10%	5	4%	6	2%	5	3%	0	0%	0	0%

D2. Q2d by Q3 & age bands

Q2d

What were the main health problems or symptoms that first made you think something was wrong? - New lump in the place where another lump was removed before

	Q50 How old are you?											
	16-24		25-40		41-55		56-70		71-80		81+	
Base	20		134		252		187		62		5	
Response Code	1		2		3		4		5		6	
Q3 Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 Less than 2 weeks	0	0%	2	1%	1	0%	1	1%	0	0%	0	0%
2 More than 2 weeks but less than 4 weeks	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
3 More than 4 weeks but less than 3 months	0	0%	0	0%	1	0%	0	0%	1	2%	0	0%
4 More than 3 months but less than 6 months	0	0%	1	1%	0	0%	1	1%	0	0%	0	0%
5 More than 6 months but less than a year	0	0%	1	1%	1	0%	1	1%	0	0%	0	0%
6 More than a year	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%

D2. Q2e by Q3 & age bands

Q2e

What were the main health problems or symptoms that first made you think something was wrong? - Bone pain

	Q50 How old are you?											
	16-24		25-40		41-55		56-70		71-80		81+	
Base	20		134		252		187		62		5	
Response Code	1		2		3		4		5		6	
Q3 Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 Less than 2 weeks	1	5%	2	1%	2	1%	2	1%	0	0%	0	0%
2 More than 2 weeks but less than 4 weeks	0	0%	4	3%	5	2%	2	1%	1	2%	0	0%
3 More than 4 weeks but less than 3 months	1	5%	5	4%	10	4%	4	2%	0	0%	0	0%
4 More than 3 months but less than 6 months	0	0%	4	3%	1	0%	2	1%	1	2%	0	0%
5 More than 6 months but less than a year	0	0%	2	1%	6	2%	0	0%	0	0%	0	0%
6 More than a year	1	5%	4	3%	3	1%	1	1%	0	0%	0	0%

A2. Support (S)

S1. Q24 by Q31 (also C6)

Q31 <i>To what extent has your diagnosis and treatment of sarcoma negatively affected your overall mental health / emotional wellbeing?</i>		Q24 Were you treated by a specialist sarcoma cancer team?			
		Yes		No	
Base		527		87	
Response Code		1		2	
Response Options		n	%	n	%
1	Severely	127	24%	20	23%
2	To some extent	233	44%	44	51%
3	Slightly	115	22%	13	15%
1-3	Had negative impact	475	90%	77	89%
4	Not at all	50	9%	10	11%

S1. Q24 by Q37 (also C6)

Q37 <i>When your treatment finished, what affected you the most day to day?</i>	Q24 Were you treated by a specialist sarcoma cancer team?			
	Yes		No	
Base	527		87	
Response Code	1		2	
Response Options	n	%	n	%
1 Coping with side effects of treatment	69	13%	11	13%
2 Coping with disability caused by surgery	66	13%	4	5%
3 Coping with reduced mobility	81	15%	6	7%
4 Loss of sexual function	4	1%	5	6%
5 Concerns about money	23	4%	1	1%
6 Not getting the support services I needed	9	2%	5	6%
7 Worries about infertility / early menopause	14	3%	2	2%
8 Something else	45	9%	12	14%
1-8 One of these affected me most	311	59%	46	53%
9 None of the above	77	15%	19	22%

S2. Q24 by Q33

Q33 Were you referred to any of the following rehab services?	Q24 Were you treated by a specialist sarcoma cancer team?			
	Yes		No	
Base	527		87	
Response Code	1		2	
Response Options	n	%	n	%
1 Physiotherapy	215	41%	14	16%
1 Occupational Therapy	73	14%	0	0%
1 Mobility assistance	34	6%	2	2%
1 Nutrition / Dietician	63	12%	8	9%
1 Emotional support (e.g. counselling)	94	18%	10	11%
1 Other	27	5%	3	3%
1 No	189	36%	54	62%

S3. Q36a by Q11

Q36a

After diagnosis and treatment, do any of the following impact your day to day life?

		Q11 How long after you first visited your GP / A&E did you receive an accurate diagnosis?											
		Less than 2 weeks		More than 2 weeks but less than 4 weeks		More than 4 weeks but less than 3 months		More than 3 months but less than 6 months		More than 6 months but less than a year		More than a year	
Base		54		94		194		114		86		113	
Response Code		1		2		3		4		5		6	
Response Options		n	%	n	%	n	%	n	%	n	%	n	%
1 Anxiety		20	37%	42	45%	101	52%	55	48%	47	55%	71	63%

S3. Q36a by Q21

Q36a
After diagnosis and treatment, do any of the following impact your day to day life?

		Q21 How easy or difficult has it been to travel for your treatment?									
		Very easy		Quite easy		Neither easy nor difficult		Quite difficult		Very difficult	
Base		88		213		158		151		41	
Response Code		1		2		3		4		5	
Response Options		n	%	n	%	n	%	n	%	n	%
1 Anxiety		35	40%	94	44%	79	50%	96	64%	29	71%

S3. Q36a by Q40

Q36a
After diagnosis and treatment, do any of the following impact your day to day life?

Q40 During your care and treatment, were you told about local cancer support groups and / or charities in the area where you live?

	Yes		No		I didn't want this information	
Base	273		340		17	
Response Code	1		2		3	
Response Options	n	%	n	%	n	%
1 Anxiety	136	50%	177	52%	8	47%

S4. Q46a by Q24 & Q26 – Option 1

		Q24 Were you treated by a specialist sarcoma cancer team?					
		Yes			No		
Base		527			87		
Response Code		1			2		
		Q46a What type of sarcoma do you have?					
		Bone			Soft tissue sarcoma		
		GIST			Bone		
		Soft tissue sarcoma			GIST		
Base		85	372	55	8	52	21
Response Code		1	2	3	1	2	3
Response Options		n	%	n	%	n	%
1	Yes, I was aware	54	64%	265	71%	36	65%
2	I was aware of a CNS for part of my treatment, but not all	10	12%	37	10%	3	5%
3	I did not have a CNS in charge of my care at any time	14	16%	36	10%	4	7%
		n	%	n	%	n	%
		2	25%	21	40%	5	24%
		2	25%	8	15%	2	10%
		4	50%	17	33%	10	48%

S4. Q46a (bone sarcoma) by Q24 & Q26 – Option 2

Q46a

What type of sarcoma do you have? - Bone

Q26 Were you aware of who the Clinical Nurse Specialist (CNS) in charge of your care was? (They may have been called a keyworker)						
	Yes, I was aware		I was aware of a CNS for part of my treatment, but not all		I did not have a CNS in charge of my care at any time	
Base	410		68		106	
Response Code	1		2		3	
Q24 Response Options	n	%	n	%	n	%
1 Treated by a specialist sarcoma cancer team	54	13%	10	15%	14	13%
2 Not treated by a specialist sarcoma cancer team	2	0%	2	3%	4	4%

S4. Q46a (soft tissue sarcoma) by Q24 & Q26 – Option 2

Q46a

What type of sarcoma do you have? - Soft tissue sarcoma

Q26 Were you aware of who the Clinical Nurse Specialist (CNS) in charge of your care was? (They may have been called a keyworker)

	Yes, I was aware	I was aware of a CNS for part of my treatment, but not all	I did not have a CNS in charge of my care at any time			
Base	410	68	106			
Response Code	1	2	3			
Q24 Response Options	n	%	n	%	n	%
1 Treated by a specialist sarcoma cancer team	265	65%	37	54%	36	34%
2 Not treated by a specialist sarcoma cancer team	21	5%	8	12%	17	16%

S4. Q46a (GIST) by Q24 & Q26 – Option 2

Q46a

What type of sarcoma do you have? - GIST

Q26 Were you aware of who the Clinical Nurse Specialist (CNS) in charge of your care was? (They may have been called a keyworker)

	Yes, I was aware		I was aware of a CNS for part of my treatment, but not all		I did not have a CNS in charge of my care at any time	
Base	410		68		106	
Response Code	1		2		3	
Q24 Response Options	n	%	n	%	n	%
1 Treated by a specialist sarcoma cancer team	36	9%	3	4%	4	4%
2 Not treated by a specialist sarcoma cancer team	5	1%	2	3%	10	9%

A3. Treatment (T)

T1. Q16 by Q36

Q36 <i>After diagnosis and treatment, do any of the following impact your day to day life?</i>		Q16 How many hospitals have you attended for treatment for your sarcoma?							
		One		Two		Three		More than three	
Base		187		283		122		66	
Response Code		1		2		3		4	
Response Options		n	%	n	%	n	%	n	%
1	Anxiety	93	50%	143	51%	60	49%	39	59%
1	Insomnia	47	25%	64	23%	33	27%	23	35%
1	Pain	58	31%	109	39%	55	45%	32	48%
1	Mobility Issues	53	28%	98	35%	50	41%	29	44%
1	Fatigue	86	46%	140	49%	75	61%	42	64%
1	At least one of these has an impact	143	76%	232	82%	104	85%	56	85%
1	None of the above	43	23%	47	17%	17	14%	10	15%

A4. Additional crosstabulations (C)

C1. Q3 by Q31

Q31 <i>To what extent has your diagnosis and treatment of sarcoma negatively affected your overall mental health / emotional wellbeing?</i>		Q3 How long was it from the time you first thought something might be wrong with you until you first saw a GP, Nurse or went to A&E?													
		Less than 2 weeks		More than 2 weeks but less than 4 weeks		More than 4 weeks but less than 3 months		More than 3 months but less than 6 months		More than 6 months but less than a year		More than a year		More than 2 weeks	
Base		214		132		142		48		47		48		631	
Response Code		1		2		3		4		5		6		2-6	
Response Options		n	%	n	%	n	%	n	%	n	%	n	%	n	%
1	Severely	54	25%	33	25%	31	22%	10	21%	16	34%	13	27%	157	25%
2	To some extent	97	45%	49	37%	72	51%	23	48%	15	32%	27	56%	283	45%
3	Slightly	43	20%	33	25%	24	17%	11	23%	12	26%	5	10%	128	20%
1-3	Has some negative effect	194	91%	115	87%	127	89%	44	92%	43	91%	45	94%	568	90%
4	Not at all	20	9%	17	13%	14	10%	4	8%	3	6%	2	4%	60	10%

C1. Q3 by Q36

Q36

After diagnosis and treatment, do any of the following impact your day to day life?

Q How long was it from the time you first thought something might be wrong with you until you first saw a GP, Nurse or went to A&E?

	Less than 2 weeks	More than 2 weeks but less than 4 weeks	More than 4 weeks but less than 3 months	More than 3 months but less than 6 months	More than 6 months but less than a year	More than a year	More than 2 weeks							
Base	214	132	142	48	47	48	631							
Response Code	1	2	3	4	5	6	1-6							
Response Options	n	%	n	%	n	%	n	%						
1 Anxiety	108	50%	63	48%	66	46%	21	44%	26	55%	34	71%	318	50%
1 Insomnia	44	21%	28	21%	39	27%	16	33%	11	23%	15	31%	153	24%
1 Pain	70	33%	48	36%	61	43%	18	38%	16	34%	27	56%	240	38%
1 Mobility Issues	60	28%	44	33%	56	39%	21	44%	17	36%	21	44%	219	35%
1 Fatigue	113	53%	62	47%	72	51%	29	60%	22	47%	26	54%	324	51%
1 At least one of these has an impact	167	78%	103	78%	113	80%	40	83%	41	87%	46	96%	510	81%
1 None of the above	44	21%	29	22%	27	19%	6	13%	6	13%	2	4%	114	18%

C3. Q3 (excluding A&E visits) by Q15

Q15
What treatment have you had for your sarcoma?

Q How long was it from the time you first thought something might be wrong with you until you first saw a GP, Nurse or went to A&E?

	Less than 2 weeks		More than 2 weeks but less than 4 weeks		More than 4 weeks but less than 3 months		More than 3 months but less than 6 months		More than 6 months but less than a year		More than a year		Total Excluding A&E	
Base	214		132		142		48		47		48		631	
Response Code	1		2		3		4		5		6		1-6	
Response Options	n	%	n	%	n	%	n	%	n	%	n	%	n	%
1 I have had an operation	139	65%	86	65%	93	65%	29	60%	26	55%	29	60%	402	64%
1 Radiotherapy	85	40%	55	42%	47	33%	27	56%	20	43%	12	25%	246	39%
1 Chemotherapy	72	34%	33	25%	40	28%	19	40%	16	34%	8	17%	188	30%
1 Ablative therapy	5	2%	3	2%	2	1%	2	4%	1	2%	1	2%	14	2%
1 Something else	31	14%	10	8%	18	13%	2	4%	3	6%	4	8%	68	11%

C3. Q3 (excluding A&E visits) by Q31

Q31 <i>To what extent has your diagnosis and treatment of sarcoma negatively affected your overall mental health / emotional wellbeing? (Excluding those who went to A&E)</i>		Q3 How long was it from the time you first thought something might be wrong with you until you first saw a GP, Nurse or went to A&E?												Total Excluding A&E	
		Less than 2 weeks		More than 2 weeks but less than 4 weeks		More than 4 weeks but less than 3 months		More than 3 months but less than 6 months		More than 6 months but less than a year		More than a year			
Base		214		132		142		48		47		48		631	
Response Code		1		2		3		4		5		6		1-6	
Response Options		n	%	n	%	n	%	n	%	n	%	n	%	n	%
1	Severely	44	21%	33	25%	29	20%	9	19%	15	32%	12	25%	142	23%
2	To some extent	86	40%	49	37%	70	49%	23	48%	14	30%	25	52%	267	42%
3	Slightly	39	18%	31	23%	23	16%	11	23%	12	26%	4	8%	120	19%
1-3	Had some negative effect	169	79%	113	86%	122	86%	43	90%	41	87%	41	85%	529	84%
4	Not at all	18	8%	17	13%	14	10%	4	8%	3	6%	2	4%	58	9%

C3. Q3 (excluding A&E visits) by Q37

Q37

*When your treatment finished, what affected you the most day to day?
(Excluding those who went to A&E)*

Q3 How long was it from the time you first thought something might be wrong with you until you first saw a GP, Nurse or went to A&E?

	Less than 2 weeks		More than 2 weeks but less than 4 weeks		More than 4 weeks but less than 3 months		More than 3 months but less than 6 months		More than 6 months but less than a year		More than a year		Total Excluding A&E	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Base	214		132		142		48		47		48		631	
Response Code	1		2		3		4		5		6		1-6	
Response Options	n	%	n	%	n	%	n	%	n	%	n	%	n	%
1 Coping with side effects of treatment	27	13%	20	15%	12	8%	8	17%	3	6%	6	13%	76	12%
2 Coping with disability caused by surgery	16	7%	14	11%	20	14%	8	17%	5	11%	2	4%	65	10%
3 Coping with reduced mobility	17	8%	17	13%	29	20%	4	8%	6	13%	9	19%	82	13%
4 Loss of sexual function	2	1%	1	1%	2	1%	2	4%	1	2%	0	0%	8	1%
5 Concerns about money	4	2%	3	2%	3	2%	3	6%	4	9%	3	6%	20	3%
6 Not getting the support services I needed	7	3%	5	4%	1	1%	0	0%	0	0%	2	4%	15	2%
7 Worries about infertility / early menopause	5	2%	5	4%	3	2%	2	4%	0	0%	4	8%	19	3%
8 Something else	22	10%	11	8%	12	8%	4	8%	4	9%	4	8%	57	9%
1-8 One of these affected me most	100	47%	76	58%	82	58%	31	65%	23	49%	30	63%	342	54%
9 None of the above	38	18%	16	12%	22	15%	3	6%	6	13%	7	15%	92	15%

C4. Q7 by Q15

Q15

What treatment have you had for your sarcoma?

Q7 Before you were referred for further tests, how many times did you see a healthcare professional about the symptoms you had?

	None - I went straight to hospital	I saw a healthcare professional once	I saw a healthcare professional twice	I saw a healthcare professional 3 or 4 times	I saw a healthcare professional 5 or more times	Saw a healthcare professional						
Base	146	162	110	131	99	502						
Response Code	1	2	3	4	5	2-5						
Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 I have had an operation	95	65%	116	72%	61	55%	82	63%	61	62%	320	64%
1 Radiotherapy	53	36%	71	44%	43	39%	45	34%	39	39%	198	39%
1 Chemotherapy	39	27%	43	27%	22	20%	48	37%	40	40%	153	30%
1 Ablative therapy	3	2%	1	1%	2	2%	7	5%	2	2%	12	2%
1 Something else	19	13%	14	9%	14	13%	15	11%	9	9%	52	10%

C4. Q7 by Q31

Q31

To what extent has your diagnosis and treatment of sarcoma negatively affected your overall mental health / emotional wellbeing?

Q7 Before you were referred for further tests, how many times did you see a healthcare professional about the symptoms you had?

	None - I went straight to hospital	I saw a healthcare professional once	I saw a healthcare professional twice	I saw a healthcare professional 3 or 4 times	I saw a healthcare professional 5 or more times	Saw a healthcare professional						
Base	146	162	110	131	99	648						
Response Code	1	2	3	4	5	2-5						
Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 Severely	36	25%	25	15%	20	18%	34	26%	46	46%	125	19%
2 To some extent	59	40%	72	44%	54	49%	65	50%	39	39%	230	35%
3 Slightly	38	26%	42	26%	24	22%	21	16%	7	7%	94	15%
1-3 Had some negative effect	133	91%	139	86%	98	89%	120	92%	92	93%	449	69%
4 Not at all	13	9%	22	14%	12	11%	10	8%	6	6%	50	8%

C4. Q7 by Q37

Q37

When your treatment finished, what affected you the most day to day?

Q7 Before you were referred for further tests, how many times did you see a healthcare professional about the symptoms you had?

	None - I went straight to hospital	I saw a healthcare professional once	I saw a healthcare professional twice	I saw a healthcare professional 3 or 4 times	I saw a healthcare professional 5 or more times	Saw a healthcare professional						
Base	146	162	110	131	99	648						
Response Code	1	2	3	4	5	2-5						
Response Options	n	%	n	%	n	%	n	%	n	%		
1 Coping with side effects of treatment	17	12%	22	14%	18	16%	17	13%	13	13%	70	11%
2 Coping with disability caused by surgery	14	10%	20	12%	10	9%	14	11%	13	13%	57	9%
3 Coping with reduced mobility	18	12%	21	13%	19	17%	16	12%	17	17%	73	11%
4 Loss of sexual function	1	1%	2	1%	0	0%	3	2%	1	1%	6	1%
5 Concerns about money	6	4%	5	3%	6	5%	4	3%	4	4%	19	3%
6 Not getting the support services I needed	6	4%	2	1%	3	3%	3	2%	4	4%	12	2%
7 Worries about infertility / early menopause	3	2%	4	2%	4	4%	3	2%	5	5%	16	2%
8 Something else	13	9%	16	10%	12	11%	11	8%	9	9%	48	7%
1-8 One of these affected me most	78	53%	92	57%	72	65%	71	54%	66	67%	301	46%
9 None of the above	22	15%	30	19%	19	17%	19	15%	8	8%	76	12%

C5. Q11 by Q15

Q15

What treatment have you had for your sarcoma?

Q11 How long after you first visited your GP / A&E did you receive an accurate diagnosis?

	Less than 2 weeks	More than 2 weeks but less than 4 weeks	More than 4 weeks but less than 3 months	More than 3 months but less than 6 months	More than 6 months but less than a year	More than a year						
Base	54	94	194	114	86	113						
Response Code	1	2	3	4	5	6						
Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 I have had an operation	36	67%	71	76%	118	61%	74	65%	50	58%	69	61%
1 I have had more than one operation	13	24%	22	23%	67	35%	36	32%	34	40%	45	40%
1 Radiotherapy	16	30%	41	44%	73	38%	45	39%	38	44%	39	35%
1 Chemotherapy	19	35%	28	30%	48	25%	36	32%	35	41%	26	23%
1 Ablative therapy	2	4%	1	1%	5	3%	3	3%	3	3%	1	1%
1 Something else	5	9%	8	9%	25	13%	16	14%	9	10%	9	8%

C5. Q11 by Q31

Q31 <i>To what extent has your diagnosis and treatment of sarcoma negatively affected your overall mental health / emotional wellbeing?</i>		Q11 How long after you first visited your GP / A&E did you receive an accurate diagnosis?											
		Less than 2 weeks	More than 2 weeks but less than 4 weeks	More than 4 weeks but less than 3 months	More than 3 months but less than 6 months	More than 6 months but less than a year	More than a year						
Base		54	94	194	114	86	113						
Response Code		1	2	3	4	5	6						
Response Options		n	%	n	%	n	%	n	%	n	%	n	%
1	Severely	17	31%	24	26%	36	19%	24	21%	27	31%	37	33%
2	To some extent	13	24%	32	34%	94	48%	58	51%	39	45%	59	52%
3	Slightly	19	35%	27	29%	44	23%	21	18%	14	16%	8	7%
1-3	Had some negative effect	49	91%	83	88%	174	90%	103	90%	80	93%	104	92%
4	Not at all	5	9%	11	12%	20	10%	11	10%	5	6%	8	7%

C5. Q11 by Q37

Q37

When your treatment finished, what affected you the most day to day?

Q11 How long after you first visited your GP / A&E did you receive an accurate diagnosis?

	Less than 2 weeks	More than 2 weeks but less than 4 weeks	More than 4 weeks but less than 3 months	More than 3 months but less than 6 months	More than 6 months but less than a year	More than a year						
Base	54	94	194	114	86	113						
Response Code	1	2	3	4	5	6						
Response Options	n	%	n	%	n	%	n	%	n	%	n	%
1 Coping with side effects of treatment	5	9%	8	9%	30	15%	15	13%	12	14%	17	15%
2 Coping with disability caused by surgery	4	7%	12	13%	22	11%	11	10%	11	13%	12	11%
3 Coping with reduced mobility	8	15%	11	12%	27	14%	15	13%	13	15%	18	16%
4 Loss of sexual function	0	0%	1	1%	1	1%	3	3%	3	3%	1	1%
5 Concerns about money	1	2%	3	3%	6	3%	3	3%	6	7%	6	5%
6 Not getting the support services I needed	3	6%	5	5%	1	1%	4	4%	1	1%	5	4%
7 Worries about infertility / early menopause	0	0%	3	3%	4	2%	6	5%	3	3%	3	3%
8 Something else	6	11%	7	7%	20	10%	9	8%	9	10%	8	7%
1-8 One of these affected me the most	27	50%	50	53%	111	57%	66	58%	58	67%	70	62%
9 None of the above	12	22%	17	18%	33	17%	15	13%	7	8%	16	14%

C6. Q24 by Q15

Q15

What treatment have you had for your sarcoma?

	Q24 Were you treated by a specialist sarcoma cancer team?			
	Yes		No	
Base	527		87	
Response Code	1		2	
Response Options	n	%	n	%
1 I have had an operation	340	65%	57	66%
1 I have had more than one operation	178	34%	26	30%
1 Radiotherapy	225	43%	15	17%
1 Chemotherapy	166	31%	16	18%
1 Ablative therapy	14	3%	1	1%
1 Something else	57	11%	8	9%

C7. Q25 by Q15

Q15

What treatment have you had for your sarcoma?

Q25 Were you given a written care plan that told you all the information you needed about your sarcoma treatment from start to finish?

Yes, a plan that told me everything

Yes, but it only told me some things

No, I was not given a plan

Base	144	96	356
Response Code	1	2	3

Response Options	n	%	n	%	n	%
1 I have had an operation	109	76%	56	58%	215	60%
1 I have had more than one operation	34	24%	30	31%	127	36%
1 Radiotherapy	76	53%	38	40%	105	29%
1 Chemotherapy	46	32%	33	34%	86	24%
1 Ablative therapy	0	0%	2	2%	13	4%
1 Something else	14	10%	12	13%	39	11%

C7. Q25 by Q31

Q31

To what extent has your diagnosis and treatment of sarcoma negatively affected your overall mental health / emotional wellbeing?

Q25 Were you given a written care plan that told you all the information you needed about your sarcoma treatment from start to finish?

	Yes, a plan that told me everything		Yes, but it only told me some things		No, I was not given a plan	
Base	144		96		356	
Response Code	1		2		3	
Response Options	n	%	n	%	n	%
1 Severely	29	20%	27	28%	96	27%
2 To some extent	53	37%	49	51%	163	46%
3 Slightly	40	28%	14	15%	67	19%
3 Had some negative effect	122	85%	90	94%	326	92%
4 Not at all	22	15%	6	6%	29	8%

C7. Q25 by Q37

Q37

When your treatment finished, what affected you the most day to day?

Q25 Were you given a written care plan that told you all the information you needed about your sarcoma treatment from start to finish?

Yes, a plan that told me everything

Yes, but it only told me some things

No, I was not given a plan

Base		144		96		356	
Response Code		1		2		3	
Response Options		n	%	n	%	n	%
1	Coping with side effects of treatment	21	15%	20	21%	38	11%
2	Coping with disability caused by surgery	16	11%	11	11%	38	11%
3	Coping with reduced mobility	24	17%	13	14%	42	12%
4	Loss of sexual function	1	1%	1	1%	7	2%
5	Concerns about money	7	5%	5	5%	13	4%
6	Not getting the support services I needed	3	2%	1	1%	12	3%
7	Worries about infertility / early menopause	4	3%	2	2%	10	3%
8	Something else	10	7%	4	4%	43	12%
1-8	One of these affected me most	86	60%	57	59%	203	57%
9	None of the above	26	18%	12	13%	55	15%

7.2. Appendix B – Free text coding summary counts

B1. Symptoms

Symptoms	Adult	Parents	F&C
	02f_Other	02f_Other	03f_Other
Misc pain / discomfort / irritation	48	5	23
Bleeding (including in stools and urine) / blood related	42	2	14
Bone related / pain, Restricted movement in joints, numbness	27	4	25
Tummy (abdominal) discomfort / pain	22	2	22
A mass, growth or swelling (inc painless lump in the abdomen)	29	1	13
Fatigue (tiredness or feeling of weakness), sleep issues	19	2	8
Bowel / urinary related	11	4	1
Being sick (vomiting) / nausea	7	1	6
Cough	6	0	8
High temperature (fever) / sweating at night	10	0	4
Breathlessness	7	2	3
Anaemia (low level of red blood cells)	9	0	0
Weight change	6	1	2
Eyes, Ears, Nose, Mouth, Throat	5	1	1
Heart related	3	1	1
Dizziness / balance issues	2	0	0
Hair loss	1	0	0
Spasms	1	0	0
Ulcers	1	0	0
Too broad to categorise	7	1	6

B2. Side effects

Side Effects	Adult	Parents
	22r_Other	23q_Other
Movement issues / bone or joint issues	12	1
Eyes, ears, nose, mouth, throat	9	3
Bowel / bladder issues, ulcers, reflux, gastric issues	11	0
Misc pain / discomfort	8	1
Mental health	4	3
Fatigue, loss of strength, dizziness, sleep related	6	0
Infertility, menopause, hormonal	4	0
Additional medical issue (e.g. surgery, seizure etc.)	3	0
Infection related	3	0
Seeping / bleeding	3	0
Cramping	1	1
Swelling related	2	0
Weight change	2	0
Heart issues	0	1
Hernia	1	0
Vitamin deficiency	1	0
Too broad to categorise	2	1

B3. Main side effect

Main Side Effect	Adult	Parents	F&C
	23r_Other	24q_Other	10r_Other
Movement issues / bone or joint related	12	1	19
Mental health	5	3	12
Eyes, ears, nose, mouth, throat	5	2	1
Fatigue, loss of strength, dizziness, sleep related	2	0	6
Seeping / bleeding	3	0	3
Weight change	3	0	3
Infertility, menopause, hormonal	4	0	1
Misc pain / discomfort	1	1	3
Bowel / bladder issues, ulcers, reflux, gastric issues	2	0	2
Additional medical issue (e.g. surgery, seizure etc.)	1	0	2
Infection related	1	1	1
Breathlessness	0	0	2
Hernia	1	0	0
Cramping	0	0	0
Swelling related	0	0	0
Vitamin deficiency	0	0	0
Too broad to categorise	0	0	6

B4. Sarcoma location

Sarcoma Location	Adult	Parents	F&C
	46c	46c	24c
Abdomen	68	2	43
Ankle	5	0	5
Arm (lower)	10	0	7
Arm (Upper)	9	1	6
Arm (Other/Unspecified)	8	1	11
Back	6	2	11
Bladder/bowel/Intestine	25	3	10
Bone	2	0	6
Brain	4	0	10
Breast	21	0	7
Buttocks	10	0	9
Chest	22	1	12
Foot	19	4	8
Groin	15	0	6
Hand	7	1	6
Head	25	16	15
Heart	1	1	11
Hip	8	1	8
Kidney	9	0	6
Leg (Upper)	118	3	58
Leg (Lower)	45	4	13
Leg (Knee)	24	0	17
Leg (Other/unspecified)	15	1	21
Liver	27	1	19
Lungs	51	3	58
Neck	11	5	13
Pelvis	31	2	22
Ribs	11	2	6
Shoulder	17	1	12
Spine	20	5	26
Stomach	41	0	16
Testes	2	4	3
Uterus	47	0	18
Other	50	7	46

B5. Sarcoma subtype

Sarcoma Subtype	Adult	Parents	F&C
	46b	46b	24b
Rhabdomyosarcoma	33	27	26
Spindle cell sarcoma	17	0	12
Angiosarcoma	91	0	42
n/a	23	0	23
Osteosarcoma	63	6	42
Chondrosarcoma	38	1	18
Chordoma	1	0	0
Liposarcoma	91	0	42
Pleomorphic sarcoma	6	0	3
Endometrial stromal sarcoma	33	27	26
Epithelioid sarcoma	3	1	5
Ewing's sarcoma	24	6	21
Gastrointestinal stromal tumour (GIST)	26	0	3
Synovial sarcoma	63	6	42
Kaposi's sarcoma	2	0	0
Leiomyosarcoma	74	0	40
Wild-type GIST	10	0	2
Malignant Peripheral Nerve Sheath Tumour	8	0	10
Undifferentiated sarcoma	7	0	8
Perivascular epithelioid	1	0	2
Other	66	9	38