



Sorca Clarke TD,
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Re.

PQ 46543/25 To ask the Minister for Health the average waiting time for patients referred from primary care to dermatology services for assessment of potentially cancerous moles; and if she will make a statement on the matter.

Dear Deputy Clarke,

The National Cancer Strategy 2017-2026 identified that the Irish population are at increased risk of developing skin cancer and recognised that Non-Melanoma Skin Cancer (NMSC) is the most common cancer diagnosed in Ireland. The strategy prioritised the development of a National Skin Cancer Prevention Plan (Recommendation 3) and the enhancement of care pathways between primary and secondary care (Recommendation 8).

The National Skin Cancer Prevention Plan (2023-2026) launched in March 2023 and builds on the work done to date in key action areas including education, media campaigns, environmental measures and policy changes across multiple settings.

Data on waiting times are not collected by the NCCP. The NCCP have undertaken a variety of work to progress development and enhancement of national pathways for skin cancer. Rapid access clinics (pigmented lesion clinics) for suspected melanoma have been established in the cancer centres and some regional hospitals. The NCCP have developed a GP referral guideline for suspected melanoma and an accompanying electronic referral form. This facilitates faster access for those with suspected melanoma for diagnosis and treatment. The NCCP have also published a National Clinical Guideline Radiological Staging and Surveillance of Patients with Cutaneous Melanoma (May 2024). This guideline was developed by a multidisciplinary group including patients and optimises the opportunity for timely treatment.

The NCCP are developing a care pathway for patients with high-risk NMSC from primary care through secondary care. As part of this pathway, a HSE National Clinical Guideline: GP Guideline for the referral of patients with high risk squamous cell carcinoma (SCC) and accompanying electronic referral form have been developed and are currently being piloted. This guideline will facilitate GPs in determining which patients with symptoms of a high risk SCC require referral to secondary care. Data from this pilot will inform the further development of national skin cancer services.

Yours sincerely,

Fiona Bonas

Assistant National Director,
National Cancer Control Programme