

Protecting and improving the nation's health

Be Clear on Cancer: First national blood in pee awareness campaign, 2013

Caveats: This summary presents the results of the metrics on cancer diagnoses recorded in the Cancer Waiting Times database and detection rate. This is one of a series of metric summaries that will be produced for this campaign, each focusing on a different metric. A comprehensive interpretation about the campaign is not included here as this requires a full evaluation of all the metrics. The full evaluation will be part of the final campaign report which will be published in due course. These metrics should not be considered in isolation.

Cancer diagnoses recorded in the Cancer Waiting Times database and detection rate

The campaign

The first national blood in pee awareness campaign ran from 15 October 2013 to 20 November 2013 in England.

Key message

There is some evidence that the first national blood in pee awareness campaign had an impact on the number of kidney and urological cancer diagnoses recorded in the Cancer Waiting Times database, although these changes may reflect long-term trends.

The campaign's key message was: 'If you notice blood in your pee, even if it's just the once, tell your doctor.'

Metric: Cancer diagnoses recorded in the CWT database

This metric considers whether the first national blood in pee awareness campaign had an impact on bladder, kidney or urological cancer diagnoses recorded in the Cancer Waiting Times (CWT) database.

Metric: Detection rates

This metric considers whether the campaign had an impact on the percentage of new CWT database recorded bladder or kidney or urological cancer diagnoses which resulted from an urgent GP referral for suspected cancer, often referred to as two week wait referrals.

Data are taken from the National Cancer Waiting Times Monitoring Data Set, provided by NHS England. Results are presented by month of first treatment. Taking into consideration the average interval from date first seen to treatment start date, the analysis considers the impact of the first national campaign for these two metrics with data from November 2013 onwards. The analysis compared November 2013 to January 2014 with November 2012 to

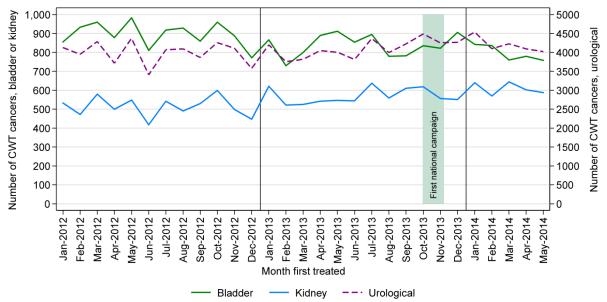
January 2013. The analysis considers how changes in bladder (ICD-10 C67), kidney (ICD-10 C64–65) and all urological cancers (ICD-10 C60–61, C63–68) may differ.

Results

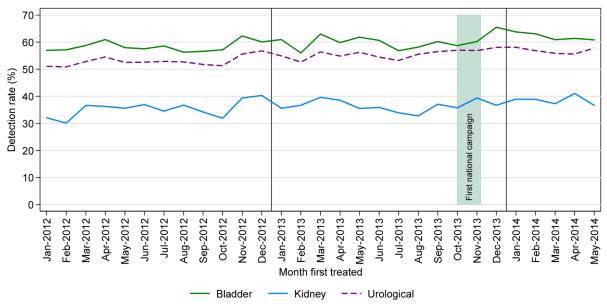
Between November 2012 to January 2013 and November 2013 to January 2014, there were significant increases in the number of kidney and urological cancers recorded in the CWT database for England (Figure 1). The number of kidney cancers increased by 12% (p=0.002) and the number of urological cancers increased by 10% (p<0.001). However, these increases may, at least partially, reflect long-term trends, with no clear peaks following the campaign.

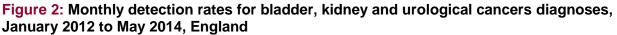
Over the same period, there was no statistically significant changes in number of bladder cancers recorded in the CWT database (p=0.538).

Figure 1: Monthly number of bladder, kidney and urological cancers diagnoses recorded in the CWT database, January 2012 to May 2014, England



There were slight increasing trends in the detection rates for bladder, kidney and urological cancers from January 2012 to May 2014 (Figure 2). From November 2012 to January 2013 to November 2013 to January 2014, the detection rate for urological cancers increased significantly from 55.7% to 57.7% for England (p=0.002), but there were no statistically significant changes in the bladder or kidney cancer detection rates.





Conclusions

There is some evidence that the first national blood in pee awareness campaign had an impact on the number of kidney and urological cancer diagnoses recorded in the CWT database, and on the urological cancer detection rate. However, these changes may, at least partially, reflect long-term trends.

Other metrics being evaluated include emergency presentations, urgent GP referrals for suspected cancer, conversation rates, numbers of cancers diagnosed, stage at diagnosis and one-year survival. A full evaluation report will be published on the campaign metrics when all of the results are available.

Considerations

Cancer incidence is increasing for most cancers, but declining for some (notably, bladder cancer), which may have an impact on trends over time for this and other metrics. Results must be considered with these underlying trends in mind.

Where the results are statistically significant there is some evidence for an impact of the campaign, although underlying trends and other external factors (eg other awareness activities, changing referral guidance) may also affect the results.

Campaigns are more likely to have a greater impact on metrics relating to patient behaviour (eg symptom awareness and GP attendance with relevant symptoms) and use of the healthcare system (eg urgent GP referrals for suspected cancer), compared to disease metrics (eg incidence, stage at diagnosis and survival).

Find out more about Be Clear on Cancer at: www.ncin.org.uk/be_clear_on_cancer www.nhs.uk/be-clear-on-cancer