



Be Clear on Cancer: Second national breast cancer in women over 70 awareness campaign, 2015

Caveats: This summary presents the results of the metric on two week wait referrals. 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.

Two week wait referrals

The campaign

The second national breast cancer in women over 70 awareness campaign ran from 13 July 2015 to 6 September 2015 in England.

Two key messages were promoted:

- 'One in three women who get breast cancer are over 70, so don't assume you're past it.'
- 'A lump isn't the only sign of breast cancer. If you're worried about any changes to your breasts, tell your doctor straight away.'

Metric: Two week wait referrals

This metric considers whether the second national breast cancer in women over 70 awareness campaign had an impact on the number of cases referred through the two week wait (TWW) referral pathway, either as urgent GP referrals for suspected breast cancer or as breast symptom referrals. It uses data from the National Cancer Waiting Times Monitoring Data Set, provided by NHS England, presented by month first seen. The analysis compared the campaign period (July to September 2015) with the same three months in 2014.

Results

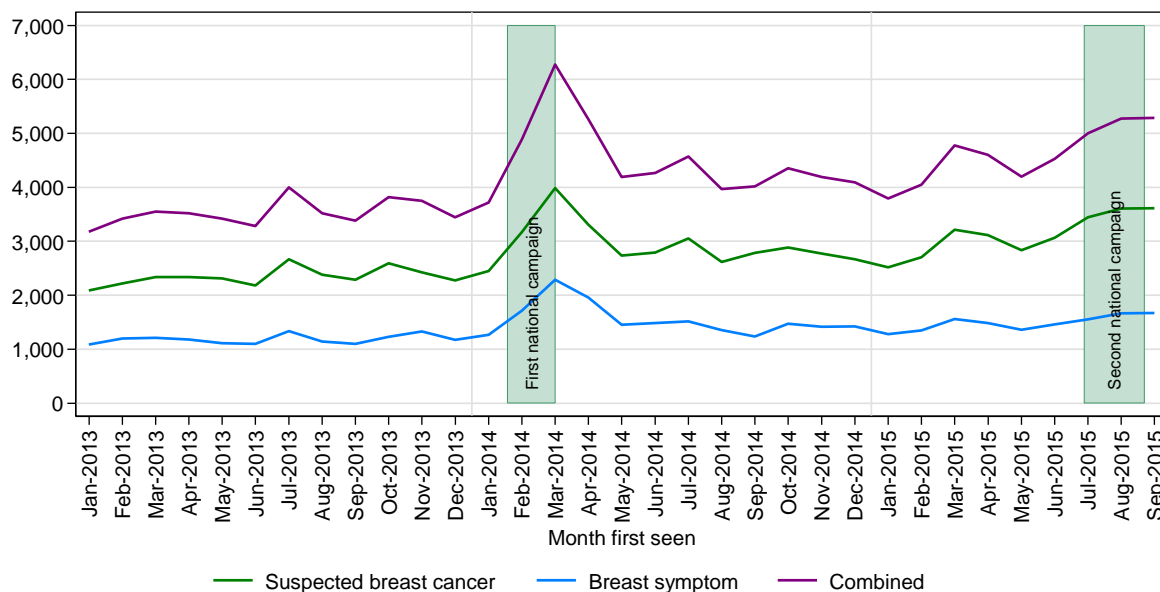
Since at least January 2013, there have been upward trends in the number of urgent GP referrals for suspected breast cancer and breast symptom referrals for women aged 70 and over, in England (Figure 1), with a notable peak following the first national campaign (February to March 2014).

Key messages

The second national breast cancer campaign appears to have led to an increase in the number of urgent GP referrals for suspected breast cancer and in the number of breast symptom referrals for those aged 70 and over.

There was a 26% increase in urgent GP referrals for suspected breast cancer between July to September 2014 and July to September 2015, from 8,452 to 10,666 referrals ($p < 0.001$). There was also a 19% increase in the number of breast symptom referrals, from 4,101 to 4,887 ($p < 0.001$). Both these increases, and the resulting 24% increase in combined referrals ($p < 0.001$), were larger than the increase for other suspected cancers¹ (11%).

Figure 1: Monthly number of urgent GP referrals for suspected breast cancer, breast symptom referrals and combined referrals, from January 2013-September 2015, England, women aged 70 and over



For women aged under 70, there was an 18% increase in suspected breast cancer referrals, but no statistically significant change in the number of breast symptom referrals. By comparison, for other suspected cancer referrals, there was a 15% increase.

Conclusions

The second national breast cancer in women over 70 awareness campaign appears to have had an impact on the number of suspected breast cancer referrals and on the number of breast symptom referrals for those aged 70 and over.

Other metrics being evaluated include emergency presentations, conversion and detection 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

In general, cancer incidence is increasing which may have an impact on trends over time for this and other metrics; the results must be considered with these underlying trends in mind.

¹ Referrals for other suspected cancers, excluding referrals for suspected breast, lung, urological, testicular, upper gastrointestinal or gynaecological cancers and referrals for (non-cancer) breast symptoms

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