



Be Clear on Cancer: Regional oesophago-gastric campaign, 2014

Caveats: This summary presents the results of the metric on emergency presentations. 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.

Emergency Presentations

The campaign

A regional oesophageal-gastric campaign ran from 10 February 2014 to 9 March 2014 in the former North of England Cancer Network.

The campaign's key message was:

- 'Having heartburn, most days, for 3 weeks or more could be a sign of cancer – tell your doctor.'

Metric: Proxy for Emergency Presentations

The Hospital Episode Statistics (HES) derived emergency presentation metric is calculated from inpatient data and uses the methodology set out in the cancer outcomes metric specification.¹ It measures the proportion of people with oesophageal or stomach cancers who first presented as an emergency.

Data were extracted on 19 October 2016 for persons admitted in 2013 and 2014, in the former North of England Cancer Network with a primary diagnosis of oesophageal cancer (ICD-10 C15) or stomach cancer (ICD-10 C16). Numbers do not include persons diagnosed via other routes, for example outpatient or general practice settings.

For each month, the proportion was calculated as the number of first inpatient admissions with oesophageal or stomach cancer presenting through an emergency route, divided by the total number of first inpatient admissions with oesophageal or stomach cancer, multiplied by 100. Binomial confidence intervals were calculated using

Key messages

Based on the proxy measure, there were no significant differences in the proportions of oesophageal or stomach cancers diagnosed via emergency presentations in the North of England for the campaign year (2014) compared to 2013.

¹ Public Health England. Indicator Specification: Proportion of cancer admissions diagnosed for the first time via emergency presentation. 2015.

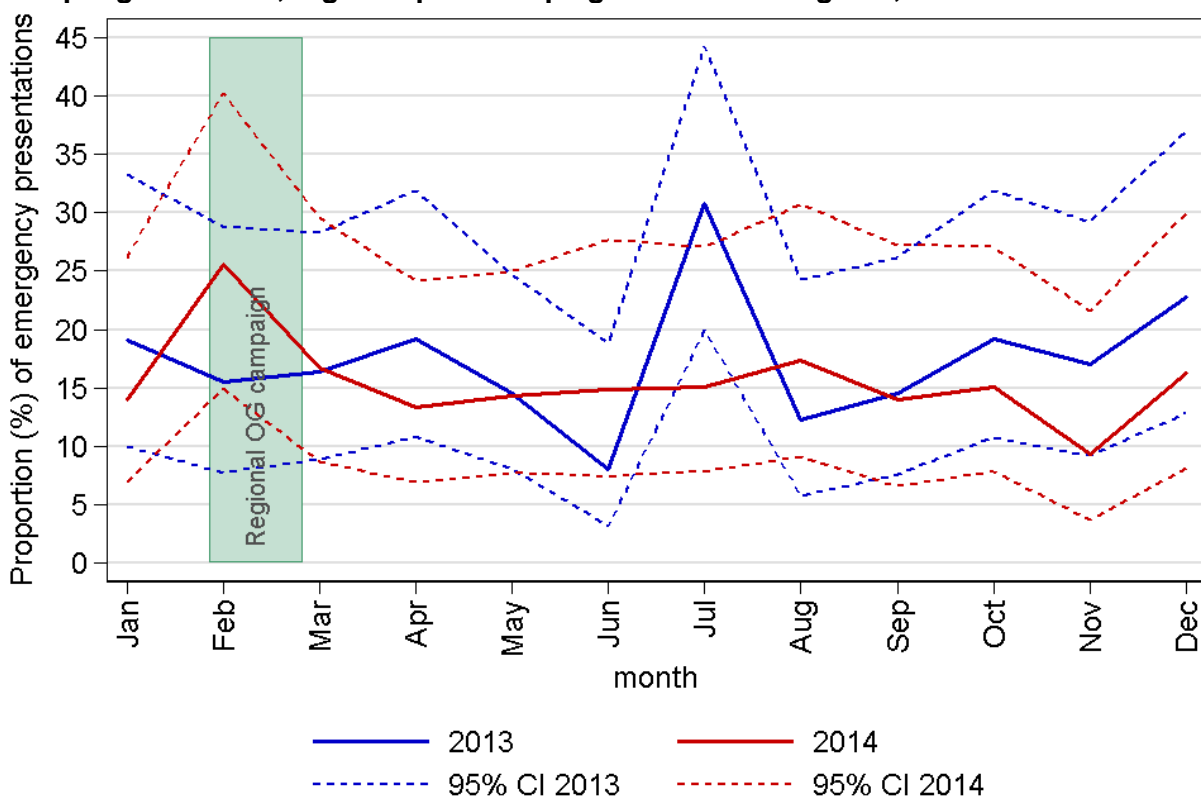
the Wilson score method. Results for the campaign year (2014) were compared with the previous year (2013).

Results

There were 618 persons admitted with oesophageal cancer in 2013 and 107 were diagnosed through emergency presentation. In 2014, there were 592 and 91 respectively.

There were no significant differences in the proportions of oesophageal cancers diagnosed via emergency presentation for the regional pilot area in 2014 compared to 2013 (Figure 1). The proportions of patients with oesophageal cancer diagnosed via emergency presentation during the regional campaign period were 26% in February 2014 and 17% in March 2014 compared to 16% for the same two months in 2013.

Figure 1: Proportion of emergency presentations and 95% confidence intervals for oesophageal cancer, regional pilot campaign – North of England, 2013 & 2014.



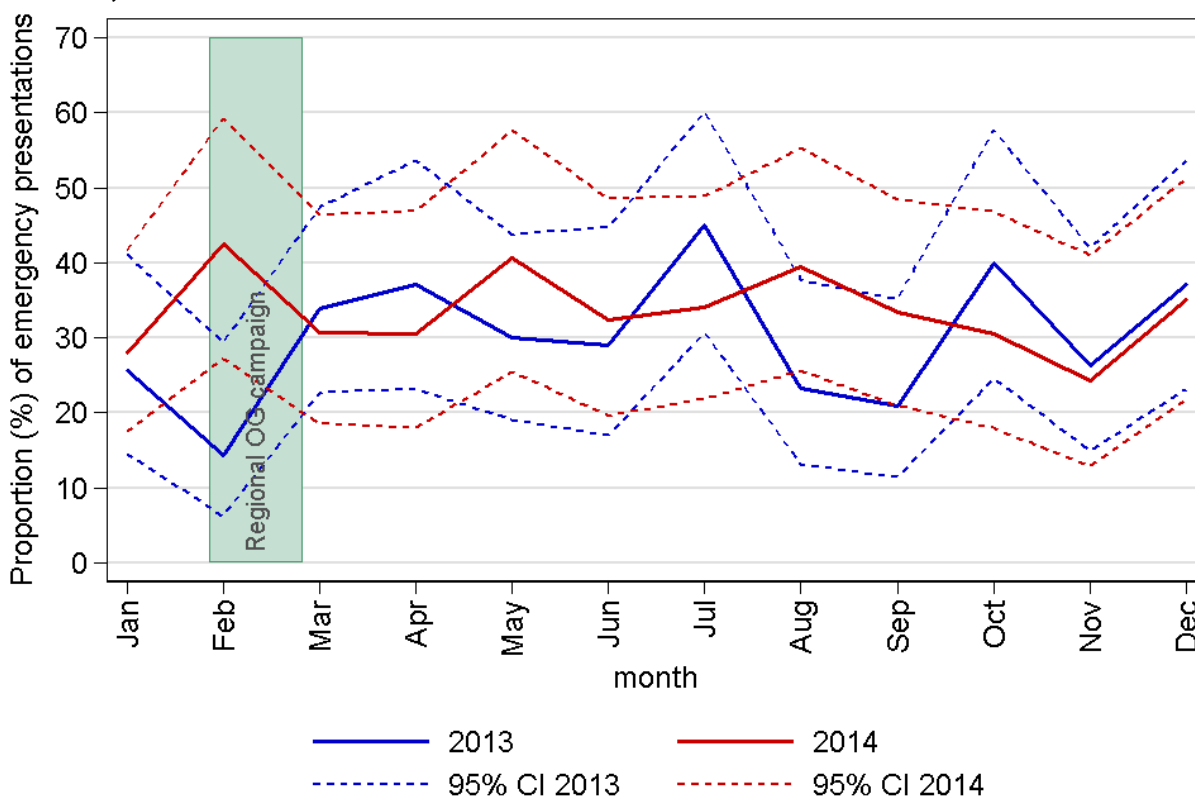
Regional OG campaign period 10 Feb - 9 Mar 2014

Source: NCRAS Cancer Analysis System & the PHE Admitted Patient Care HES database

There were 479 persons admitted with stomach cancer in 2013 and 144 were diagnosed through emergency presentation. In 2014, there were 457 and 152 respectively.

There were no significant differences in the proportions of stomach cancers diagnosed via emergency presentation for the regional pilot area in 2014 compared to 2013 (Figure 2). The proportions of patients with stomach cancer diagnosed via emergency presentation during the regional campaign period were 42% in February and 31% in March compared to 14% and 34% for the same two months in 2014.

Figure 2: Proportion of emergency presentations and 95% confidence intervals for stomach cancer by month, regional pilot campaign – former North of England Cancer Network, 2013 & 2014



Regional OG campaign period 10 Feb - 9 Mar 2014

Source: NCRAS Cancer Analysis System & the PHE Admitted Patient Care HES database

Conclusions

There were no significant differences in the proportions of patients with oesophageal or stomach cancer diagnosed via emergency presentation for the regional campaign year (2014) compared to 2013.

Other metrics being evaluated include the Cancer Waiting Times referrals, conversion and detection rate, 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, and so the 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/