

Protecting and improving the nation's health

Be Clear on Cancer: Second national blood in pee campaign, 2014

Caveats: This summary presents the results of the metric on early stage at diagnosis. This is one of a series of summaries that will be produced for this campaign, each focusing on a different metric. A comprehensive interpretation of the campaign incorporating a full evaluation of all the metrics is published separately. These metrics should not be considered in isolation.

Early stage at diagnosis

The campaign

The second national blood in pee campaign ran from 13 October 2014 to 23 November 2014 in England.

The campaign's key message was:

 'If you notice blood in your pee, even if it's just the once, tell your doctor.'

Metric: early stage at diagnosis

Key messages

The second national blood in pee campaign may have had an impact on the proportion of bladder cancers diagnosed at an early stage for persons aged 50 and over. There appears to have been no impact on the proportion of kidney cancers diagnosed at an early stage.

This metric considers whether the second national blood in pee campaign had an impact on the proportion of bladder (ICD-10 C67) and kidney (ICD-10 C64) cancers that were diagnosed at an early stage, for men and women aged 50 and over, and all ages combined. For bladder cancer, early stage was defined as stage 1 only, because stage 2 bladder cancer is muscle invasive. For kidney cancer, early stage was defined as stages 1 or 2.

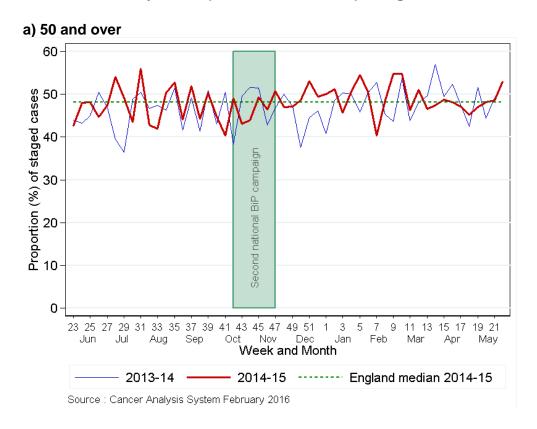
Data was extracted from the national cancer analysis system for the diagnosis period June 2013 to May 2015. The analysis period was defined as two weeks after the start of the campaign (week 44 of 2014) to two months after the end of the campaign (week 4 of 2015). The proportion of early staged cases per week during the analysis period was compared with the overall median for June 2014 to May 2015. The campaign was considered to have a possible impact if a) the proportion per week was the same or higher than the median for five or more consecutive weeks and b) this sustained period started during the analysis period.

Results

The proportion of early staged bladder cancers was the same as or higher than the 2014 to 2015 median from week 50 in 2014 to week 2 in 2015 (Figure 1) for persons aged 50 and over. During this five week period, an additional 16 cases were diagnosed at an early stage compared to the expected number based on the median (336 cases). There were no sustained periods where the proportion of early staged bladder cancer was the same as or higher than the 2014 to 2015 median for all ages combined.

There were no sustained periods where the proportion of early staged kidney cancers was the same as or higher than the 2014 to 2015 median (Figure 2).

Figure 1: Proportion of bladder cancers diagnosed at stage 1 by week, England, June 2013 to May 2015 a) 50 and over and b) all ages



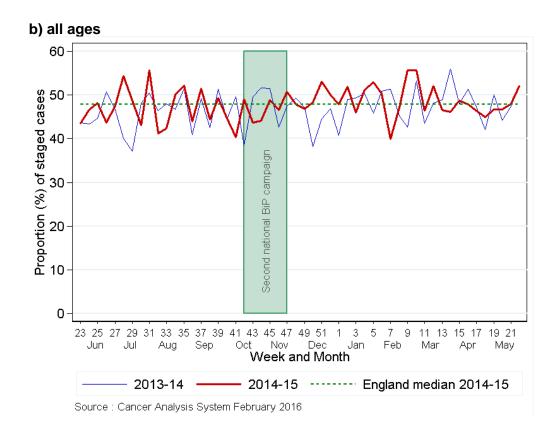
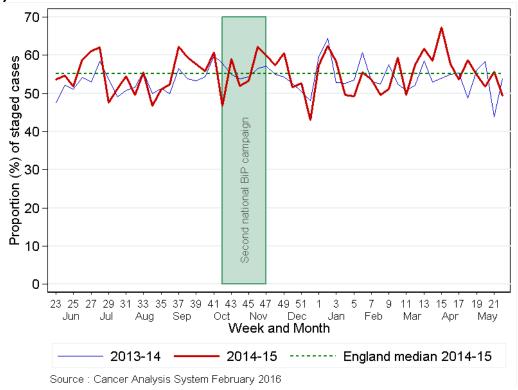
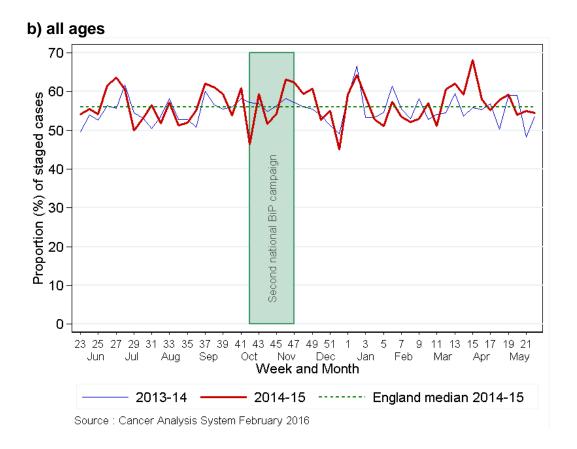


Figure 2: Proportion of kidney cancers diagnosed at stage 1 or 2 by week, England, June 2013 to May 2015, a) 50 and over and b) all ages







Conclusions

The second national blood in pee campaign may have had an impact on the proportion of bladder cancers diagnosed at an early stage for persons aged 50 and over. There appears to have been no impact on the proportion of kidney cancers diagnosed at an early stage.

Other metrics being evaluated include GP attendance, urgent GP referrals, conversion and detection rate, emergency presentations and one-year survival.

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.

The proportion of staged cases for the Be Clear on Cancer (BCoC) metric summaries was calculated using denominators which excluded cases with unknown stage. Other National Cancer Registration and Analysis Service (NCRAS) outputs on proportion of staged cases include cases with unknown stage in the denominator. Therefore the proportions of staged cases reported in the BCoC metrics are different to other NCRAS publications. Excluding cases with unknown stage ensures greater comparability across years for the BCoC metrics, as the proportion of cases with a completed stage has increased since 2014.

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