



## Be Clear on Cancer: Second national lung cancer campaign, 2013

**Caveats:** This summary presents the results of the metric on GP attendances. 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.

### GP attendances

#### The campaign

The second national lung cancer campaign ran from 2 July 2013 to 11 August 2013 in England.

The campaign's key message was:

'If you've been coughing for 3 weeks or more, tell your doctor'

#### Key message

The second national lung cancer campaign may have led to a small increase in the number of GP attendances for a cough.

#### Metric: GP attendances

This metric considers whether the campaign had an impact on the number of patients visiting a GP to report a persistent cough.

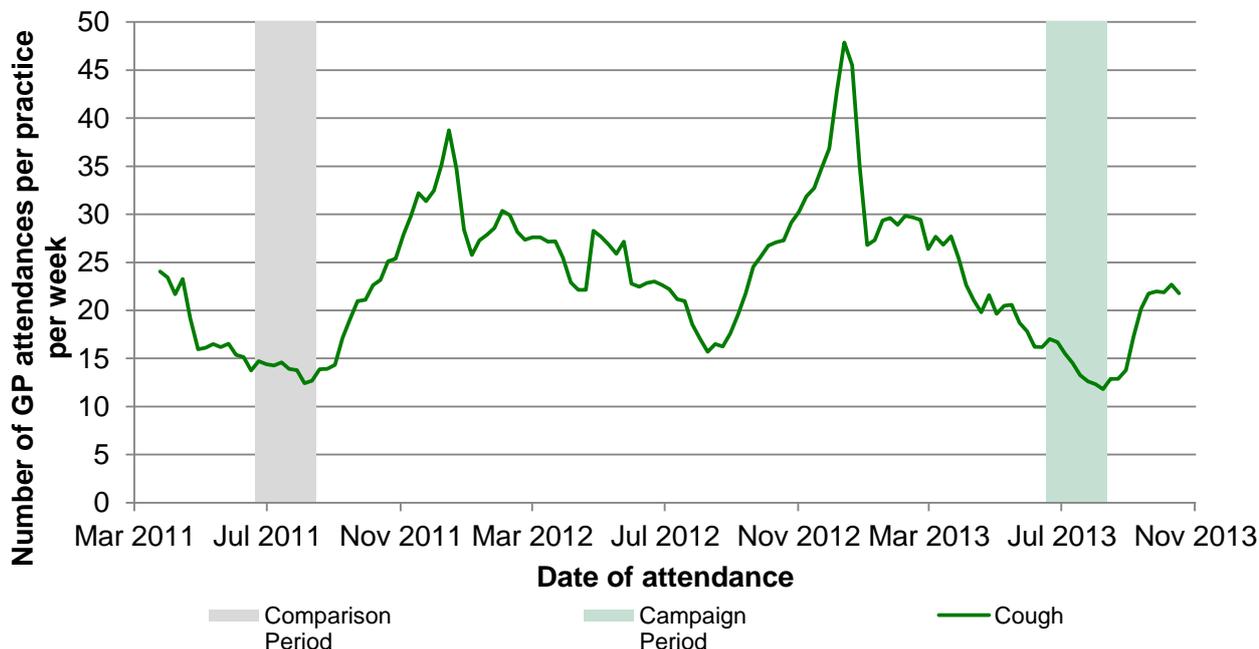
Data on GP attendances reporting a cough or a control symptom (back pain) were sourced from The Health Improvement Network (THIN) database for the period 4 April 2011 to 3 November 2013. The data was grouped into weeks and adjusted to account for bank holidays. Information on the number of GP practices submitting data each week (which decreased from 450 to 383 practices over the period considered<sup>1</sup>) was also extracted, to enable the calculation of the average number of attendances per practice per week.

Analysis considered three periods; a ten week pre-campaign period (22 April 2013 to 30 June 2013), an eight week campaign period (1 July 2013 to 25 August 2013) and a ten week post-campaign period (26 August 2013 to 3 November 2013). It compared the average number of GP attendances per practice per week during these periods in 2013 with the same periods two year earlier, in 2011<sup>2</sup>.

#### Results

There is a seasonal trend in the number of GP attendances per practice per week for a cough, with lower numbers in summer and higher numbers in winter, peaking in December 2012 and January 2013 (Figure 1). There was no notable change from this seasonal trend during the campaign period.

**Figure 1: Average number of GP attendances, per practice per week, for a cough, 4 April 2011 to 3 November 2013, all ages**



Source: The Health Improvement Network

During the 2013 campaign period, for patients of all ages the number of attendances for a cough showed a statistically significant increase of 2.7% ( $p < 0.001$ ), when compared with the same period in 2011 (from 13.85 visits per practice per week in 2011 to 14.23 visits per practice per week in 2013). In comparison, for the control symptom (back pain), there was no statistically significant change in the number of attendances per practice per week for the 2013 campaign period, compared to the same period in 2011.

For patients aged 50 and over, the number of attendances for a cough during the 2013 campaign period showed a statistically significant increase of 7.4% ( $p < 0.001$ ) when compared with the same period in 2011.

## Conclusions

The second national lung cancer campaign may have led to a small yet statistically significant increase in the number of patients attending GP with cough symptoms.

Other metrics being evaluated include the number of urgent GP referrals for suspected cancer, 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](http://www.ncin.org.uk/be_clear_on_cancer)

[www.nhs.uk/be-clear-on-cancer/](http://www.nhs.uk/be-clear-on-cancer/)

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<sup>1</sup> Compared to all practices nationally, these practices had a similar age-sex population structure, but a less deprived population on average.

<sup>2</sup> Data was not compared to the same period in the previous year (2012) as data for this period may be affected by the first national lung cancer campaign which ran in England from 8 May 2012 to 30 June 2012.