Public Health England

Protecting and improving the nation's health

Be Clear on Cancer: Second national respiratory symptoms campaign, 2017

Caveats: This summary presents the results of the metric on early stage at diagnosis. 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 of each campaign is published as a final report incorporating the results of all the metrics. These metrics should not be considered in isolation.

Cancer diagnoses resulting from an urgent GP referral for suspected cancer and conversion rate

Key messages

There is no clear evidence of a campaign effect on the number of lung cancer diagnoses resulting from an urgent GP referral for suspected lung cancer or on the conversion rate, for persons aged 50 and over, or for all ages combined.

The campaign

The second national respiratory symptoms campaign ran from 18 May to 31 August 2017 in England.

The core campaign messages were:

- If you've had a cough for 3 weeks or more, it could be a sign of lung disease, including cancer. Finding it early makes it more treatable. So don't ignore it, tell your doctor.
- If you get out of breath doing things you used to be able to do, it could be a sign of lung or heart disease, or even cancer. Finding it early makes it more treatable. So don't ignore it, tell your doctor.

Metric: Cancer diagnoses resulting from an urgent GP referral for suspected cancer

This metric considers whether the campaign had an impact on the number of new lung cancer cases that resulted from an urgent GP referral for suspected lung cancer, often referred to as two week wait (TWW) referrals.

Metric: Conversion rate

This metric considers whether the campaign had an impact on the percentage of urgent GP referrals for suspected lung cancers resulting in a diagnosis of lung cancer (conversion rate).

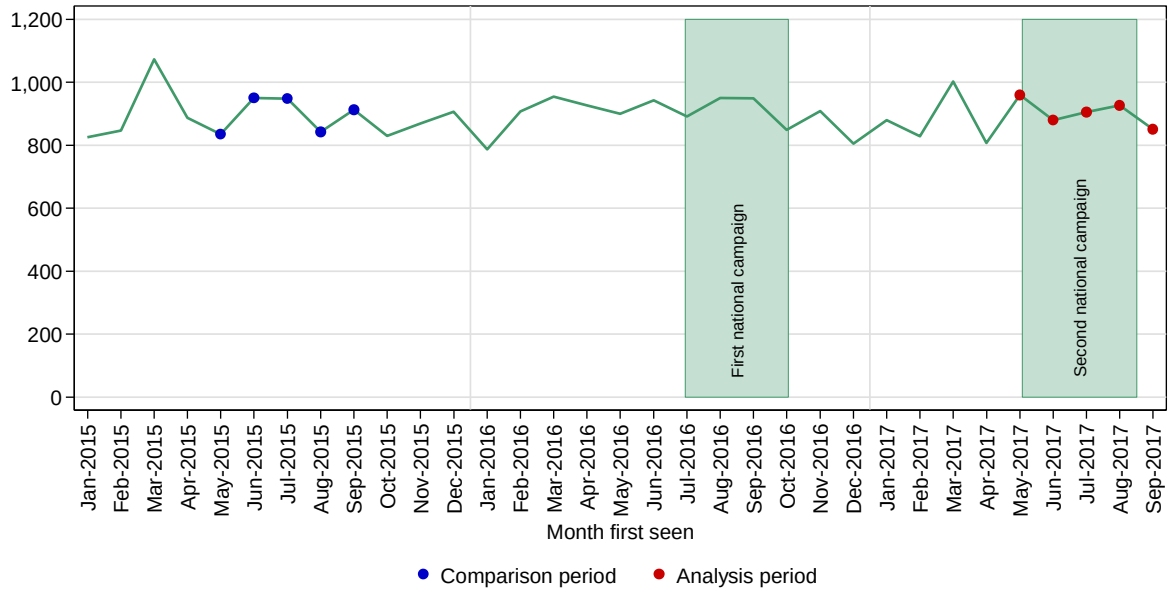
Data is taken from the National Cancer Waiting Times Monitoring Data Set which is provided by NHS England. Results are presented by the month that the patient was first

seen. For both metrics, the analysis compared the campaign period, May to September 2017, with the same 5 months in 2015[1]. Lung cancer cases were defined as those with an ICD-10 diagnosis code of C33-C34, C37-C39 or C45.

Results

Comparing May to September 2015 with May to September 2017 there was no statistically significant change in the number of lung cancer diagnoses resulting from an urgent GP referral for England (Figure 1). Results were similar for those aged 50 and over.

Figure 1: Monthly number of lung cancer diagnoses resulting from an urgent GP referral for suspected lung cancer from January 2015 to September 2017, all ages, England



Comparing May to September 2015 with May to September 2017, there was a statistically significant 2 percentage point decrease in the conversion rate for England (Figure 2). However, this appears to be in line with the long-term trend. Results were similar for those aged 50 and over.

[1] Data is not compared to the same period in the previous year (2016) as data for this period may be affected by the first national respiratory symptoms campaign which ran in England from 14 July to 16 October 2016.

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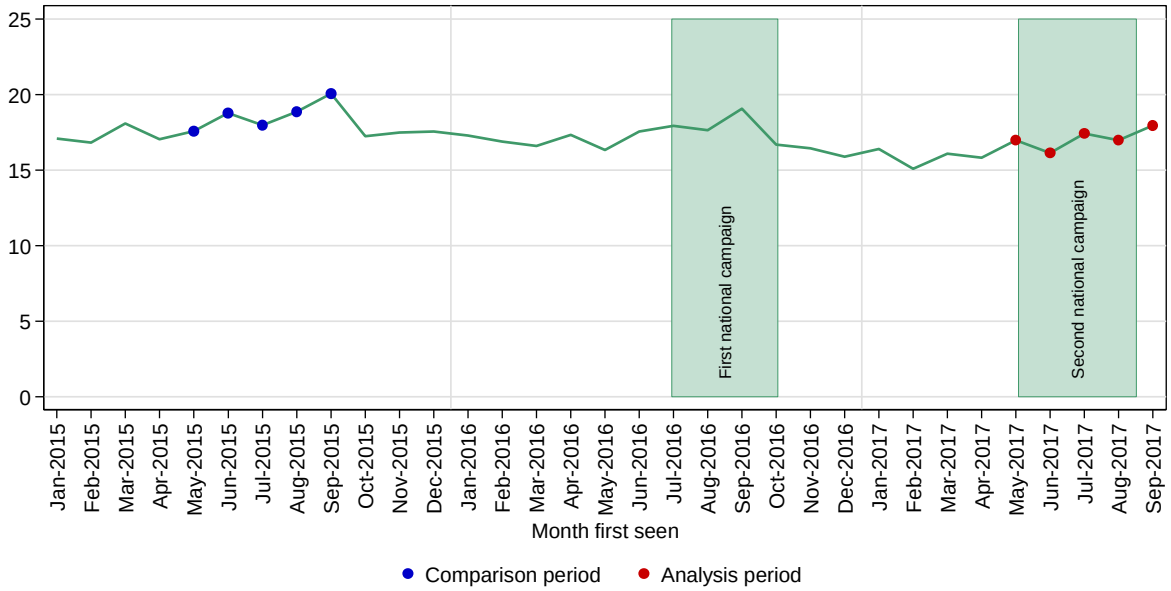
Figure 2: Monthly lung cancer conversion rates for urgent GP referrals for suspected lung cancers, January 2015 to September 2017, all ages, England



Conclusions

There is no clear evidence of a campaign effect on the number of lung cancer diagnoses resulting from an urgent GP referral for suspected lung cancer or on the conversion rate, neither for those aged 50 and over, nor for all ages combined. Any statistically significant changes were generally small and appeared in line with long-term trends.

Other metrics being evaluated include emergency presentations, urgent GP referrals for suspected cancer, detection rates, numbers of cancers diagnosed, stage at diagnosis and one-year survival.

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 (for example 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 (for example symptom awareness and GP attendance with relevant symptoms) and use of the healthcare system (for example urgent GP referrals for suspected cancer), compared to disease metrics (for example 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

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