



Be Clear on Cancer: Third national breast cancer in women over 70 campaign, 2018

Caveats: This summary presents the results of the metric on cancer diagnoses resulting from a 2-week wait referral. 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.

Cancer diagnoses resulting from a 2-week wait referral

The campaign

The third national breast cancer in women over 70 campaign ran from 22 February 2018 to 31 March 2018 in England.

The core campaign messages were:

- 'One in 3 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.'

Key messages

The third national breast cancer campaign appears to have had an impact on the number of breast cancer diagnoses resulting from an urgent GP referral for suspected breast cancer in women aged 70 years and over. There is no evidence to suggest the campaign had an impact on the number of breast cancer diagnoses resulting from a breast symptom referral.

Metric: Cancer diagnoses resulting from a 2-week wait referral

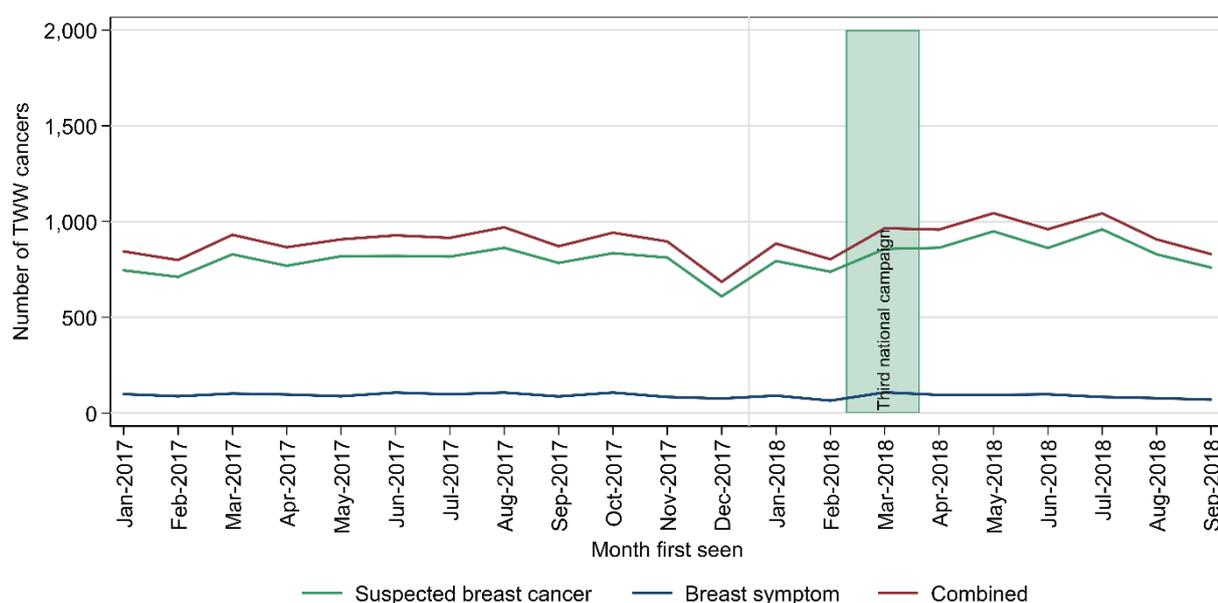
This metric considers whether the campaign had an impact on the number of breast cancer cases that resulted from a 2-week wait (TWW) referral, either as an urgent GP referral for suspected breast cancer or as a breast symptom referral. It uses data from the National Cancer Waiting Times Monitoring Data Set, provided by NHS England, presented by month first seen. The analysis period was March to April 2018 and was compared to the same 2 months in 2017. Breast cancer cases were defined as those with an ICD-10 diagnosis code of C50 or D05.

Results

The number of breast cancer diagnoses resulting from an urgent GP referral for suspected breast cancer in women aged 70 and over remained relatively stable across the time period, with a slight upward trend from February 2018 to July 2018 (Figure 1). In contrast, a slight downward trend is seen in the number of breast cancer diagnoses resulting from a breast symptom referral across the entire period (January 2017 to September 2018).

There was a statistically significant increase of 8% in the number of breast cancer diagnoses resulting from an urgent GP referral for suspected breast cancer in women aged 70 and over between March to April 2017 and March to April 2018, from 1,598 to 1,720 diagnoses ($p=0.034$). A non-significant increase of 2% was seen in the number of breast cancer diagnoses resulting from breast symptom referrals.

Figure 1: Monthly number of breast cancer diagnoses resulting from an urgent GP referral for suspected breast cancer, breast symptom referral and combined referral from January 2017 to September 2018, women aged 70 and over, England



There were no statistically significant changes in the number of breast cancer diagnoses resulting from any referral type between March to April 2017 and March to April 2018 in women aged 70 years and over by deprivation quintile.

In women aged under 70 years there were no statistically significant changes in the number of breast cancer diagnoses resulting from either an urgent GP referral for suspected breast cancer or a breast symptom referral. However, there were slight peaks in the trend of breast cancer diagnoses resulting from an urgent GP referral for suspected breast cancer during and following the campaign for women aged 40 to 49 and 50 to 59 years.

Conclusions

There was a statistically significant increase in the number of breast cancer diagnoses resulting from an urgent GP referral for suspected breast cancer in women aged 70 years and over. There appears to have been no change in the number of breast cancer diagnoses resulting from breast symptom referrals.

The third national campaign appears to have had an impact on the number of breast cancer diagnoses resulting from an urgent GP referral for suspected breast cancer in women aged 70 and over. There was no evidence to suggest the campaign had an impact on the number of breast cancer diagnoses resulting from a breast symptom referral.

Other metrics being evaluated include 2-week wait referrals, breast cancer diagnoses recorded in the Cancer Waiting Times database, number of cancers diagnosed and stage at diagnosis.

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 (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 and stage at diagnosis).

Find out more about Be Clear on Cancer at:

www.ncin.org.uk/be_clear_on_cancer

www.nhs.uk/be-clear-on-cancer/