

Be Clear on Cancer: Local skin cancer campaign, 2014

Caveats: This summary presents the results of the metric on one-year survival. 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 of the campaign incorporating a full evaluation of all the metrics is published separately. These metrics should not be considered in isolation.

One-year survival

The campaign

A local skin cancer campaign ran from 16 June 2014 to 27 July 2014 in parts of the South West Strategic Clinical Network: Devon, Somerset and Cornwall.

The core campaign message was:

 'A change to a mole isn't the only sign of skin cancer – if you notice any unusual or persistent changes to your skin go to your doctor.'

Key messages

There was no evidence to suggest that the local skin cancer campaign had an impact on one-year survival for patients aged 50 years and over diagnosed with skin cancer.

Metric: Survival

This metric considers whether the local skin cancer campaign had an impact on one-year survival for patients, aged 50 years and over¹ with their first malignant melanoma (ICD-10 C43) cancer diagnosed during and following the campaign compared with the rest of the year.

Data for patients resident in the local pilot area of Devon, Somerset and Cornwall (defined using Sustainability Transformation Partnerships) was extracted from the national cancer analysis system. Patients were followed up until December 2016 to obtain their last known vital status. The analysis period was defined as two weeks from the start of the campaign (1 July 2014) to two months from the end of the campaign (30 September 2014). One-year age specific net survival was calculated using the methodology outlined in the Office for National Statistics: Cancer Survival Statistical Bulletins. Net survival refers to the probability of surviving cancer accounting for other causes of death. The one-year survival for patients diagnosed in the analysis period was compared with those diagnosed from 1 January to 30 June 2014 and from 1 October to 31 December 2014.

¹ Aged 50 to 99 years

Results

There were no significant differences in one-year survival for men, women and persons diagnosed with malignant melanoma between the analysis period (July 2014 to September 2014) and comparison period (January to June, October to December 2014), respectively (Table 1). One-year survival for persons diagnosed during the analysis period was 97.0% (95% CI: 93.6 -100.4%) compared with 96.8% (95% CI: 94.5 - 99.0%) for those diagnosed in the comparison period.

Table 1: One-year net survival (%) for men, women and persons aged 50 years and over diagnosed with malignant melanoma during the analysis period, 1 July to 30 September 2014, compared with the rest of 2014

| Site | Sex | Comparison period (01/01/2014 to 30/06/2014, 01/10/2014 to 31/12/ 2014) | Analysis period (01/07/2014 to 30/09/2014) |
|-----------------------|---------|---|--|
| Malignant melanoma | Men | 95.3% (95% CI: 91.9 - 98.7) | 97.8% (95% CI: 93.0 -102.7) |
| | Women | 98.5% (95% CI: 95.8 - 101.1) | 95.7% (95% CI: 91.0 -100.4) |
| | Persons | 96.8% (95% CI: 94.5 - 99.0) | 97.0% (95% CI: 93.6 -100.4) |

Source: Cancer Analysis System, December 2018

Conclusions

There appears to have been no change in one-year survival for patients diagnosed with malignant melanoma.

There was no evidence to suggest that the local skin campaign had an impact on one-year survival for patients aged 50 years and over diagnosed with malignant melanoma.

Other metrics being evaluated include urgent GP referrals for suspected cancer, conversion rates, numbers 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 behavior (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). Be Clear on Cancer: Local skin cancer campaign, 2014: One-year 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