Two regional “Be Clear on Cancer” awareness campaigns – How does their impact compare? Assessment of the impact on urgent GP referrals for suspected cancer

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INTRODUCTION

In February and March 2014, two “Be Clear on Cancer” awareness campaigns were piloted regionally; for oesophago-gastric (OG) cancers in the North East and stomach cancer in the North West. These campaigns aimed to raise public awareness of cancer symptoms and encourage those with symptoms to see their GP, supporting initiatives to diagnose cancer earlier and improve survival.

For each “Be Clear on Cancer” campaign there is a comprehensive evaluation process. Data is collected on a number of metrics to reflect possible campaign impact. These include whether:

• campaigns raised awareness of signs and symptoms of cancer;
• more people were going to their GPs with the symptoms highlighted by the campaign;
• more people were being referred urgently for suspected cancer;
• there was an increase in diagnostic activity;
• those referred urgently for suspected cancer were diagnosed with cancer;
• there were increases in the number of cancers diagnosed; and
• there was evidence of a shift towards earlier stage disease.

Data is not yet available to assess all of these metrics. This analysis compares the evaluation of these two regional pilot campaigns based on the impact on urgent GP referrals for suspected cancer. Did the number of 2ww referrals increase? How did diagnoses following a 2ww referral change?

RESULTS

Both campaigns appeared to have a clear impact on the number of 2ww referrals made overall, with a 22% increase in referrals for suspected upper GI cancer (1,462 additional referrals) and a 24% increase in referrals for suspected gynaecological cancer (879 additional referrals) in the regional pilot areas in February-April 2014 when compared with February-April 2013 (Figure 2). In the control areas, the increase over the same time period was only 17% and 16% respectively.

Both campaigns were aimed at those aged 50 and over. For the OG campaign, there were large increases in the number of referrals for suspected upper GI cancer for those in their 50s (85%) and 60s (69%). For the ovarian campaign, there were larger increases in the number of referrals for suspected gynaecological cancer in those aged less than 50 (35%) or aged 50 to 59 (26%) than for older women.

There were no statistically significant changes in the total number of CWT recorded cancers in the regional pilot area for either upper GI cancer or gynaecological cancer.

CONCLUSIONS

● For these metrics, the regional pilot oesophago-gastric campaign appeared to have a larger impact than the regional pilot ovarian campaign, particularly on urgent GP referrals for suspected cancer and for the target age-group.

● Other early evaluation results showed that both campaigns had an impact on cancer awareness, improving knowledge of the signs and symptoms of oesophago-gastric and ovarian cancer in the target groups.

● A national “Be Clear on Cancer” campaign for oesophago-gastric cancer ran in February and March 2015.

REFERENCES
