

Protecting and improving the nation's health

Be Clear on Cancer: Second national lung campaign, 2013

Caveats: This summary presents the results of the metric on emergency presentations. 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.

Key messages

months in 2011.

Based on the proxy measure, there were no

during and following the second national

campaign (2013) compared to the same

significant differences in the proportions of lung cancers diagnosed via emergency presentation

Emergency Presentations

The campaign

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

The campaign's key message was:

- 'Been coughing for three weeks? Tell your doctor.'

Metric: Proxy for Emergency Presentations

The Hospital Episode Statistics (HES) derived emergency presentation metric is calculated from inpatient data and uses the methodology set out in the cancer outcomes metric specification.¹ It measures the proportion of persons diagnosed with lung cancer who first presented as an emergency.

Data were extracted on 19 October 2016 for persons admitted in 2011 and 2013, resident in England with a primary diagnosis of lung cancer (ICD-10 C33-34). Numbers do not include persons diagnosed via other routes, for example outpatient or general practice settings.

For each month, the proportion was calculated as the number of first inpatient admissions with lung cancer presenting through an emergency route, divided by the total number of first inpatient admissions with lung cancer, multiplied by 100. Binomial confidence intervals were calculated using the Wilson score method. As an earlier wave of the lung campaign was conducted in 2012, results for the campaign year (2013) were compared with 2011.

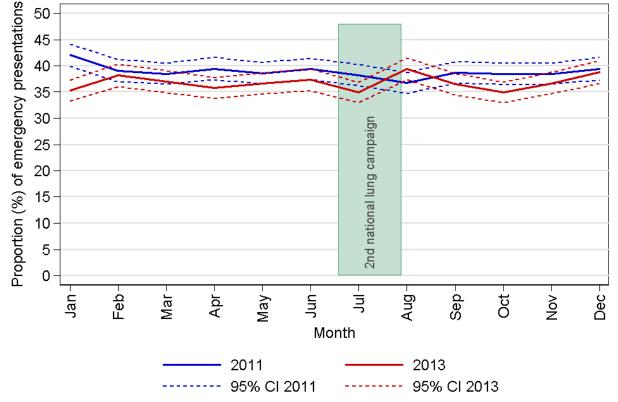
¹ Public Health England. Indicator Specification: Proportion of cancer admissions diagnosed for the first time via emergency presentation. 2015.

Results

There were 25,873 persons admitted with lung cancer in 2011 and 10,058 were diagnosed through emergency presentation. In 2013, there were 25,534 and 9,369 respectively.

There was a statistically significant difference in the proportion of lung cancer diagnosed via emergency presentation in January 2011 (35%) compared to January 2013 (42%) (Figure 1). However, this occurred before the second national lung campaign. The proportions of lung cancers diagnosed via emergency presentation during the second national campaign period were 35% in July and 39% in August compared with 38% and 37% for the same months in 2011.





²nd national lung campaign 02 Jul - 11 Aug 2013 Source: NCRAS Cancer Analysis System & the PHE Admitted Patient Care HES database

Conclusions

There was a statistically significant difference in the proportions of lung cancers diagnosed via emergency presentation for England between January 2011 and January 2013. However, as this difference occurred before the second national campaign, the finding was not associated with campaign intervention. There were no significant differences during and following the campaign.

Other metrics being evaluated include the Cancer Waiting Times referrals, conversion and detection rate, 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 www.nhs.uk/be-clear-on-cancer/