



Be Clear on Cancer: First national breast cancer in women over 70 awareness campaign, 2014

Caveats: This summary presents the results of the metric on GP attendances. 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 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.

GP attendances

The campaign

The first national breast cancer in women over 70 awareness campaign ran from 3 February 2014 to 16 March 2014 in England.

Two key messages were promoted:

- 'One in three 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.'

Metric: GP attendances

This metric considers whether the campaign had an impact on the number of women aged 70 and over attending a GP with a range of breast symptoms which can result from cancer¹.

Data on GP attendances for breast and control² symptoms was collected from 265 practices³ for nine defined periods between December 2011 and May 2014. These periods were the eight week pre-campaign period (9 December 2013 to 2 February 2014), the six week campaign period (3 February to 16 March 2014) and the eight week post-campaign period (17 March to 11 May 2014), and the same weeks in the previous two years.

Data was adjusted to account for bank holidays and the number of weeks in each period.

¹ These were: breast lump; changes in the size or shape of the breast, to the skin of breast or to the nipple and; pain in breast or armpit.

² These were: headache or migraine; knee, shoulder or neck pain and; urinary tract infection.

³ Organised by local commissioning groups, these practices volunteered to provide data for this project in return for a fixed payment. Compared to all practices nationally, practices submitting data had a similar age-sex population structure but a slightly less deprived population.

Key messages

The 2014 campaign appears to have led to an increase in the number of GP attendances recorded with breast symptoms during the campaign.

Some of this effect may have been maintained in the months following the campaign.

This increase was seen in women aged under 70 as well as in the target age group (70 and over).

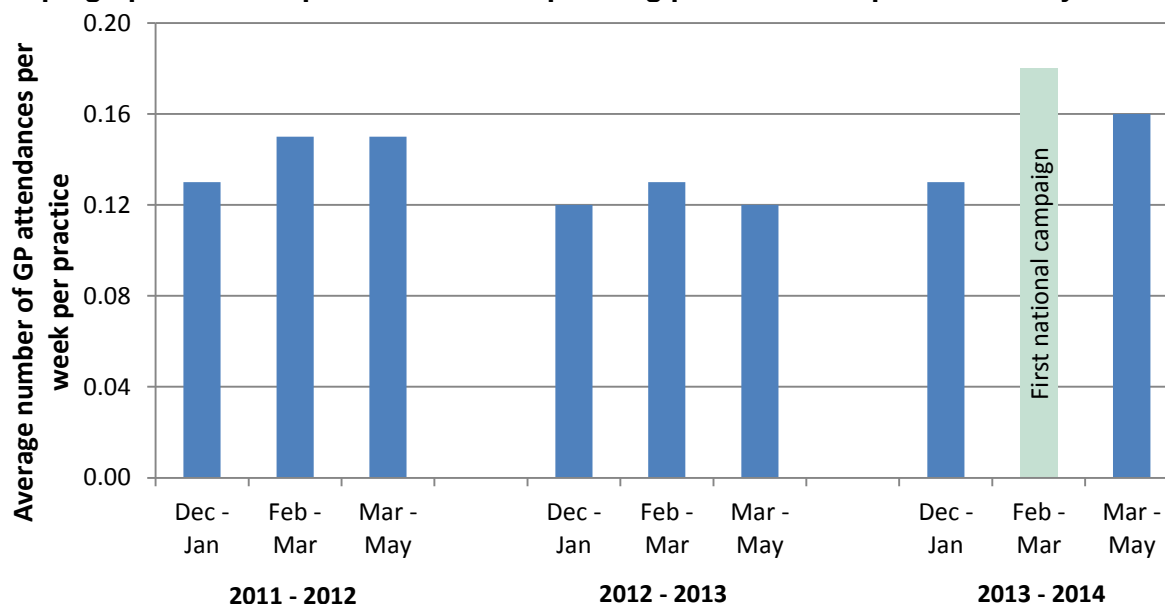
Results

The number of attendances at GP practices for breast symptoms in women aged 70 and over was statistically significantly higher in the 2014 campaign period (289 attendances) than the average in all the other eight periods combined (216.6 attendances after adjustment, $p=0.001$). The average number of attendances per week per practice (Figure 1) fluctuated between 0.12 and 0.15 attendances in the 7 periods before the campaign, with higher numbers seen during the campaign period (0.18 attendances per week per practice, compared to 0.13 during the same period in 2013) and also for the post-campaign period (0.16).

The average number of attendances per week per practice for breast symptoms was 36% higher (statistically significant, $p<0.001$) during the campaign than in the same six weeks in 2013. This compares to a smaller increase (5%, also statistically significant, $p\text{-value}=0.022$) for the control symptoms over the same period, suggesting that the campaign had an impact on GP attendances for breast symptoms.

There were statistically significant increases in the number of attendances during the campaign period for both women aged under 70 ($p=0.020$) and women aged 70 and over ($p=0.001$), showing that the campaign had an impact on women under 70 as well as those targeted by the campaign.

Figure 1: Average number of GP attendances for breast symptoms per week per practice (adjusted for bank holidays) for women aged 70 and over during the pre, live and post campaign periods compared with corresponding periods in the previous two years



Conclusions

There was a large, statistically significant, increase in the number of GP attendances for breast symptoms, for women aged 70 and over, during and following the first national breast cancer in women over 70 awareness campaign. This increase was also observed in women aged under 70.

Other metrics being evaluated include urgent GP referrals for suspected cancer, 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/