



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 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.

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 (SCN): Devon, Somerset and Cornwall.

The campaign's key 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 message

The local skin campaign does not appear to have had an impact on one-year survival for patients aged 50 and over diagnosed with skin cancer.

Metric: Survival

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

Data for persons resident in the local pilot area (South West SCN) was extracted from the national cancer analysis system. Persons 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 those 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.

Results

There were no significant differences in one-year survival for men, women or persons aged 50 and over diagnosed with skin cancer between the analysis period (July 2014 to September 2014) and comparison period (January to June, October to December 2014)

¹ 50 and over

(Table 1). One-year survival for persons diagnosed during the analysis period was 88.6% compared with 99.4% for those diagnosed in the comparison period.

Table 1: One-year net survival (%) for men, women and persons aged 50 and over diagnosed with skin cancer 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)
Skin	Men	97.8% (95% CI: 93.6 - 101.9)	92.4% (95% CI: 81.5 -103.3)
	Women	100.7% (95% CI: 97.8 - 103.6)	84.2% (95% CI: 69.8 -98.5)
	Persons	99.4% (95% CI: 96.7 - 102.1)	88.6% (95% CI: 79.1 -98.0)

Source: Cancer Analysis System, September 2017

Conclusions

The local skin campaign does not appear to have had an impact on one-year survival for patients aged 50 and over diagnosed with skin cancer.

Other metrics being evaluated include emergency presentations, urgent GP referrals for suspected cancer, conversion rates, numbers of cancers diagnosed and stage at diagnosis. A full evaluation on the campaign metrics will be published as a final report 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 behavior (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/