

Protecting and improving the nation's health

Be Clear on Cancer: First national respiratory and breathlessness campaign, 2016

Caveats: This summary presents the results of the metric on diagnostics in secondary care. 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.

Diagnostics in secondary care

The campaign

The first national respiratory and breathlessness campaign ran from 14 July 2016 to 16 October 2016 in England.

Key messages

There was no statistically significant change in the number of X-rays and CT scans carried out during or following the first national respiratory and breathlessness campaign, when compared with the same period of the year before.

The campaign's key messages were:

- 'If you've had a cough for three weeks or more, it could be a sign of lung disease, including cancer. Finding it early makes it more treatable. So don't ignore it, tell your doctor.'
- 'If you get out of breath doing things you used to be able to do, it could be a sign of lung or heart disease, or even cancer. Finding it early makes it more treatable. So don't ignore it, tell your doctor.

Metric: Diagnostics in secondary care

This metric considers whether the first national respiratory and breathlessness campaign had an impact on the number of X-rays and CT-scans conducted by the NHS. These include X-rays and CT-scans conducted for suspected lung cancer, heart diseases and other medical conditions.

The data on the total number of X-rays and CT-scans conducted for suspected lung cancer, heart diseases and other medical conditions

was obtained from the Diagnostic Imaging Dataset (DID) held on NHS Digital's iView system (http://content.digital.nhs.uk/iview). The data contain details of referrals by GPs, consultants and other referral types.

This metric compares the difference in the monthly number of X-rays and CT-scans between the analysis period of July 2016 to December 2016 and the comparison period of July 2015 to December 2015.

Results

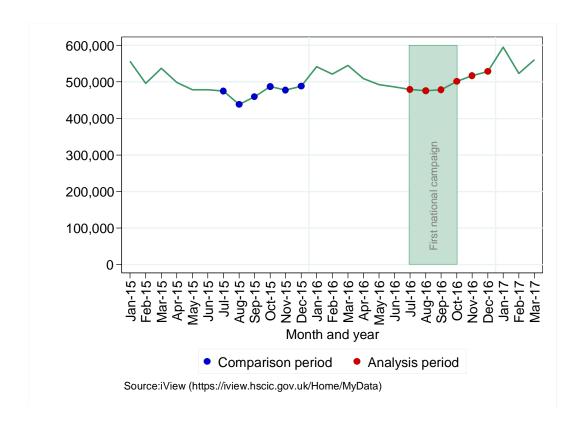
Comparing the months July 2016 to December 2016 with July 2015 to December 2015, there was a 5.5% increase in the number of X-rays and CT-scans for individuals aged 50 and over, and a 3.6% increase in the number of X-rays and CT-scans in all ages combined (Table 1). However, these changes were not statistically significant.

Table 1: Number of X-rays and CT-scans in July 2015 to December 2015 and July 2016 to December 2016, England

Tests	Age group	July 2015 to December 2015	July 2016 to December 2016	Percentage change
Number				
of	50 and over	2,824,935	2,981,325	5.5
imaging				
tests	All ages	3,939,355	4,082,810	3.6

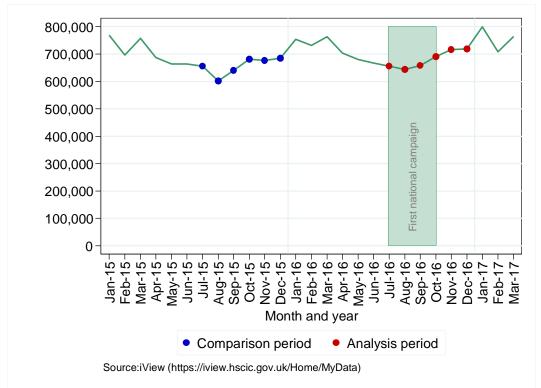
Figure 1: Monthly number of X-rays and CT-scans in January 2015 to March 2017, England a) 50 and over b) All ages

a) 50 and over



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b) All ages



Conclusion

The first national respiratory and breathlessness campaign did not appear to have an impact on the number of X-rays and CT-scans conducted for suspected lung cancer, heart diseases and other medical conditions.

Other metrics being evaluated include 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 (e.g. 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/

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