



Be Clear on Cancer: Third national blood in pee campaign, 2016

Caveats: This summary presents the results of the metric on early stage at diagnosis. This is one of a series of summaries that will be produced for this campaign, each focusing on a different metric. A comprehensive interpretation of the campaign incorporating a full evaluation of all the metrics is published separately. These metrics should not be considered in isolation.

Early stage at diagnosis

The campaign

The third national blood in pee campaign ran from 15 February 2016 to 31 March 2016 in England.

The campaign's key message was:

- 'If you notice blood in your pee, even if it's just the once, tell your doctor.'

Metric: early stage at diagnosis

This metric considers whether the third national blood in pee campaign had an impact on the proportion of bladder (ICD-10 C67) and kidney (ICD-10 C64) cancers that were diagnosed at an early stage, for men and women aged 50 and over, and for all ages combined. For bladder cancer, early stage was defined as stage 1 only, because stage 2 bladder cancer is muscle invasive. For kidney cancer, early stage was defined as stages 1 or 2.

Data was extracted from the national cancer analysis system for the diagnosis period October 2014 to September 2016. The analysis period was defined as two weeks after the start of the campaign (week 9 of 2016) to two months after the end of the campaign (week 22 of 2016). The proportion of early staged cases per week during the analysis period was compared with the overall median for October 2015 to September 2016. The campaign was considered to have a possible impact if a) the proportion per week was the same or higher than the median for five or more consecutive weeks and b) this sustained period started during the analysis period.

Results

The proportion of early staged bladder cancers was similar to or higher than the 2015 to 2016 median from week 13 to week 21 in 2016 (Figure 1) for persons aged 50 and over, and for all ages combined. During this nine week period, an additional 53 cases were diagnosed at an early stage compared to the expected number based on the median (663 cases) for persons aged 50 and over. There were an additional 53 bladder cases

Key messages

The third national blood in pee campaign may have had an impact on the proportion of bladder cancers diagnosed at an early stage for persons aged 50 and over, and for all ages combined. There appears to have been no impact on the proportion of kidney cancers diagnosed at an early stage.

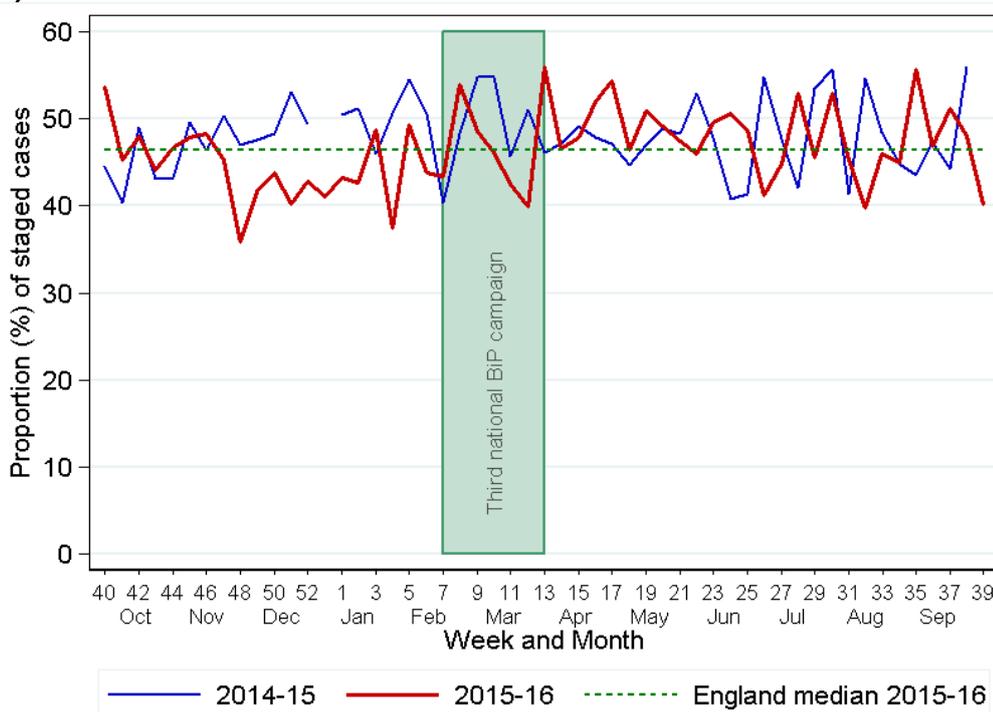
diagnosed at an early stage for all ages combined compared with the median (683 cases).

There were no sustained periods where the proportion of early staged kidney cancers was the same as or higher than the 2015 to 2016 median (Figure 2).

Figure 1: Proportion of bladder cancers diagnosed at stage 1 by week, England, October 2014 to September 2016 a) 50 and over and b) all ages

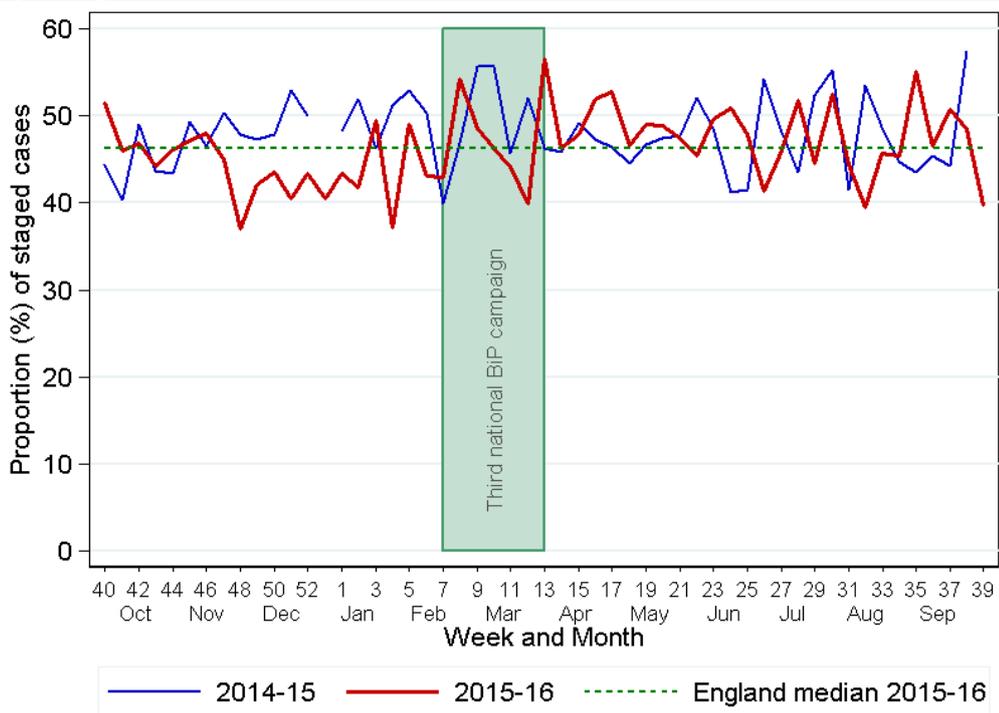
There is a week 53 in 2015 but not in 2014 hence the gap in the blue line for 2014-15

a) 50 and over



Source : Cancer Analysis System December 2017

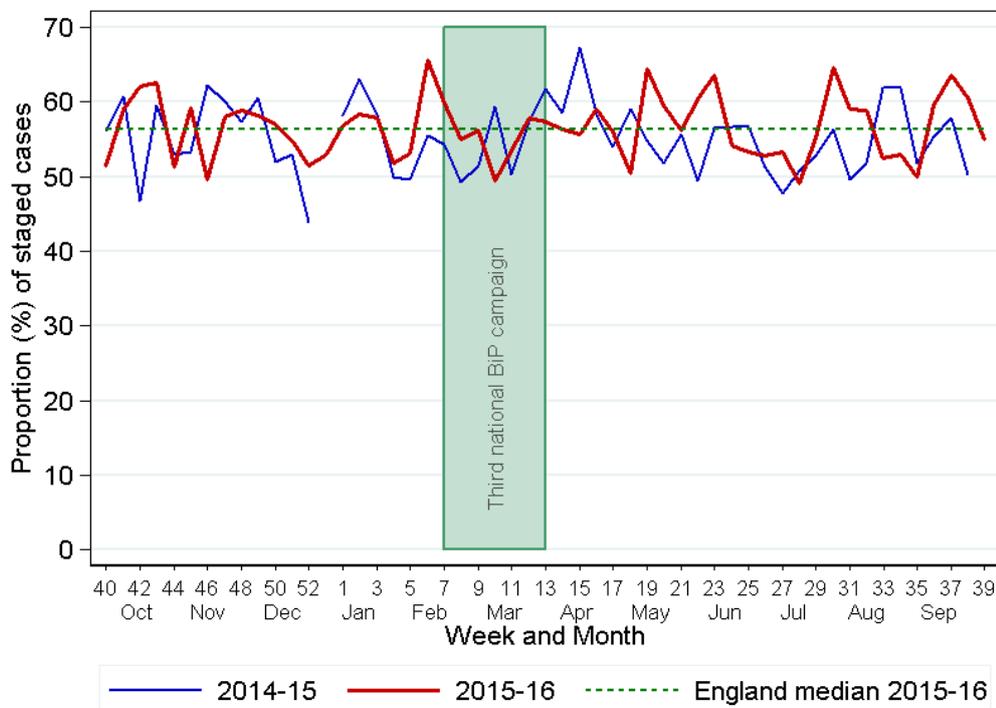
b) all ages



Source : Cancer Analysis System December 2017

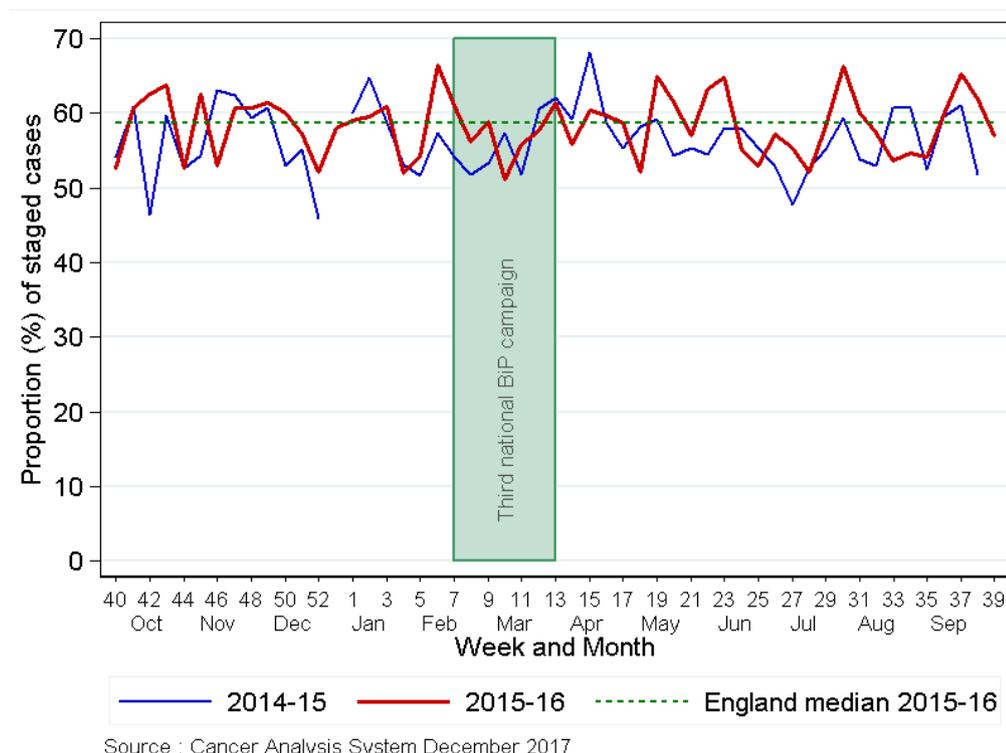
Figure 2: Proportion of kidney cancers diagnosed at stage 1 or 2 by week, England, October 2014 to September 2016, a) 50 and over and b) all ages
There is a week 53 in 2015 but not in 2014 hence the gap in the blue line for 2014-15

a) 50 and over



Source : Cancer Analysis System December 2017

b) all ages



Conclusions

The third national blood in pee campaign may have had an impact on the proportion of bladder cancers diagnosed at an early stage for persons aged 50 and over, and also for all ages combined. There appears to have been no impact on the proportion of kidney cancers diagnosed at an early stage.

Other metrics being evaluated include GP attendance, urgent GP referrals, conversion and detection rate, emergency presentations and one-year survival.

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.

The proportion of staged cases for the Be Clear on Cancer (BCoC) metric summaries was calculated using denominators which excluded cases with unknown stage. Other National Cancer Registration and Analysis Service (NCRAS) outputs on proportion of staged cases include cases with unknown stage in the denominator. Therefore the proportions of staged cases reported in the BCoC metrics are different to other NCRAS publications. Excluding cases with unknown stage ensures greater comparability across years for the BCoC metrics, as the proportion of cases with a completed stage has increased since 2014.

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