



Be Clear on Cancer: Second national lung cancer campaign, 2013

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 of the campaign incorporating a full evaluation of all the metrics is published separately. These metrics should not be considered in isolation.

Diagnostics in secondary care

The campaign

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

The core campaign's message was:

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

Metric: Diagnostics in secondary care

This metric considers whether the second national lung cancer campaign had an impact on the number of imaging tests conducted by the NHS. These comprise chest x-rays and chest and abdominal CT scan tests conducted for suspected lung cancer – hereafter referred to as x-rays and CT scans.

The data on the total number of x-rays and CT scans were obtained from the Diagnostic Imaging Dataset (DID) held on NHS Digital's iView system (<https://iview.hscic.gov.uk/DomainInfo/DiagnosticImaging>).

Data were restricted to x-rays and CT scans referred via GP surgeries.

This metric compares the difference in the monthly number of x-rays and CT scans between the analysis period of July 2013 to October 2013 and the comparison period of July 2012 to October 2012.

Key messages

There was no evidence to suggest the second national lung cancer campaign had an impact on the number of x-rays and CT scan tests carried out.

Results

Comparing the months July 2012 to October 2012 with July 2013 to October 2013, there was a 5.4% decrease in the number of x-rays and CT scans for individuals aged 50 and over, and a 7.9% decrease in the number x-rays and CT scans in all ages (Table 1, Figure 1). The changes in the number x-rays and CT scans were not statistically significant.

Table 1: Number of x-rays and CT scans in July 2012 to October 2012 and July 2013 to October 2013, England

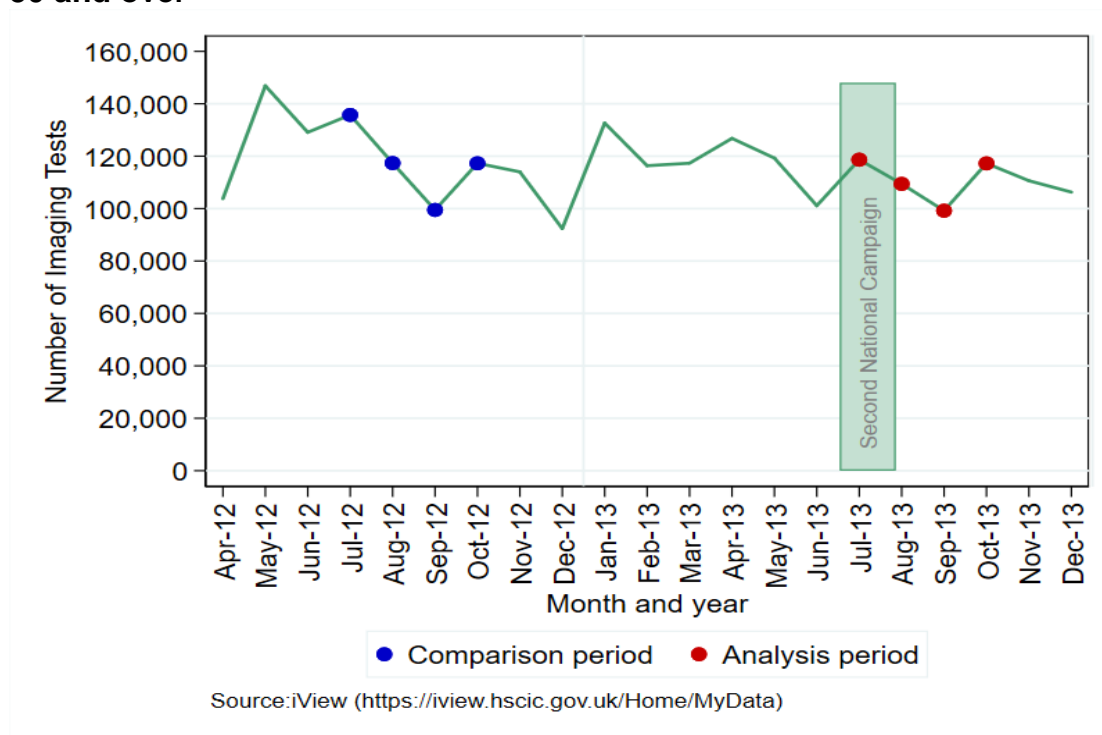
Tests	Age group	July 2012 to October 2012	July 2013 to October 2013	Percentage change	p-value
x-rays and CT scans	50 and over	469,855	444,550	-5.4	0.492
	All ages	665,750	612,865	-7.9	0.295
x-rays	50 and over	460,350	433,475	-5.8	0.459
	All ages	654,390	599,860	-8.3	0.275
CT scans	50 and over	9,505	11,075	16.5	0.051
	All ages	11,360	13,005	14.5	0.071

There was a 16.5% and 14.5% increase in the number of CT scans comparing the analysis and comparison periods, for persons aged 50 years and over and all ages, respectively (Table 1). However, these increases were not statistically significant and followed the long-term trend.

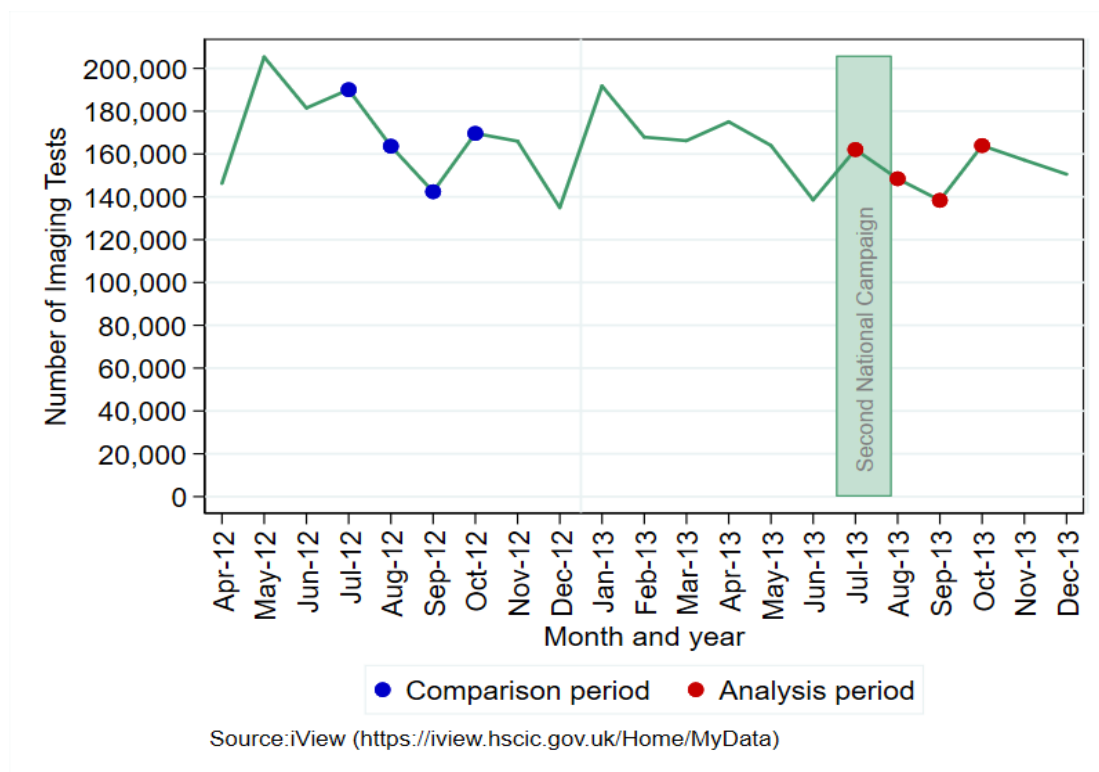
There was a non-significant 5.8% and 8.3% decrease in the number of x-rays comparing the analysis and comparison periods, for persons aged 50 years and over and all ages, respectively (Table 1)

Figure 1: Monthly number of x-rays and CT scans in April 2012 to December 2013, England a) 50 and over b) All ages

a) 50 and over



b) All ages



Conclusion

There was a decrease in the number of x-rays and an increase in the number of CT scans, however these results were not statistically significant.

There was no evidence to suggest that second national lung cancer campaign had an impact on the number of x-rays and CT scan tests carried out.

Other metrics being evaluated include Cancer Waiting Times referrals, conversion and detection rate, numbers of cancers diagnosed, stage at diagnosis 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.

Where the results are statistically significant there is some evidence for an impact of the campaign, although underlying trends and other external factors (for example 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 (for example symptom awareness and GP attendance with relevant symptoms) and use of the healthcare system (for example urgent GP referrals for suspected cancer), compared to disease metrics (for example incidence and stage at diagnosis).

Find out more about Be Clear on Cancer at:

www.ncin.org.uk/be_clear_on_cancer
www.nhs.uk/be-clear-on-cancer/