

Protecting and improving the nation's health

Be Clear on Cancer: Fourth national blood in pee awareness campaign, 2018

Caveats: This summary presents the results of the metric on cancer diagnoses recorded in the Cancer Waiting Times database. 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.

Cancer diagnoses recorded in the Cancer Waiting Times database

The campaign

The fourth national blood in pee awareness campaign ran from 19 July 2018 to 16 September 2018 in England.

The core campaign message was:

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

Metric: Cancer diagnoses recorded in the Cancer Waiting Times database

This metric considers whether the fourth national blood in pee awareness campaign had an impact on the numbers of bladder, kidney and urinary tract, urological (including prostate), and urological (excluding prostate) cancer diagnoses recorded in the Cancer Waiting Times (CWT) database. It uses data from the National Cancer Waiting Times Monitoring Dataset, provided by NHS England, presented by month of first treatment. The analysis period was August to November 2018 and was compared to the same four months in 2017. The analysis considered four cancer sites: bladder (ICD-10 C67), kidney and urinary tract (C64-C66 & C68), urological (including prostate) (C60-C61 & C63-C68), and urological (excluding prostate) (C60 & C63-C68)¹.

Key message

There was no evidence to suggest the fourth national blood in pee awareness campaign had an impact on the numbers of bladder, or kidney and urinary tract cancer diagnoses recorded in the CWT database.

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¹ Further details on methodology used for Be Clear on Cancer campaign analysis can be found here

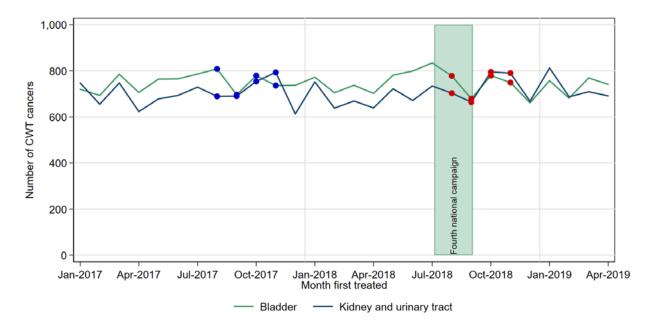
Results

Trend charts show stable trends in the numbers of bladder, kidney and urinary tract, and urological (excluding prostate) cancer diagnoses recorded in the CWT database from January 2017 to April 2019 (Figures 1 and 2). Whereas, an increasing trend can be observed in the number of urological (including prostate) cancer diagnoses, especially since February 2018 with a peak from April to September 2018 (Figure 2).

Comparing August to November 2018 with the same months in the previous year:

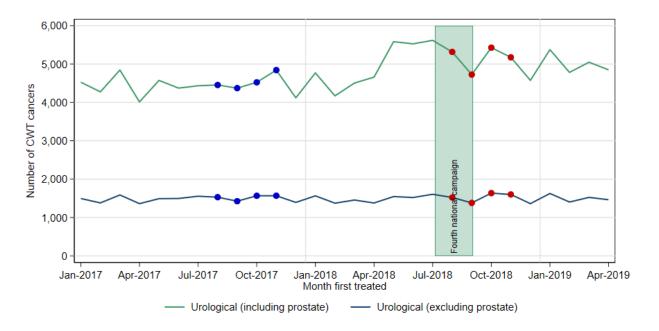
- There were no statistically significant changes in the numbers of bladder, or kidney and urinary tract cancer diagnoses recorded in the CWT database overall, nor by age, sex, or deprivation.
- There were no statistically significant changes in the number of urological cancer (excluding prostate) cancer diagnoses overall, nor by age or deprivation. However, there was a statistically significant increase in the number of urological (excluding prostate) cancer diagnoses recorded in the CWT database for men (4.4%, p=0.048) and a statistically significant decrease for women (-6.8%, p=0.031).
- There was a statistically significant 13.5% increase in the number of urological (including prostate) cancer diagnoses recorded in the CWT database (p<0.001).

Figure 1: Monthly number of bladder, and kidney and urinary tract cancer diagnoses recorded in the CWT database, from January 2017 to April 2019, England



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Figure 2: Monthly number of urological, and urological excluding prostate cancer diagnoses recorded in the CWT database, from January 2017 to April 2019, England



Conclusion

There appears to have been no change in the numbers of bladder or kidney and urinary tract cancer diagnoses recorded in the CWT database. There was a statistically significant increase in the number of urological (excluding prostate) cancer diagnoses for men. There was also a statistically significant increase in the number of urological cancer diagnoses, however this appears to be consistent with a change in trend for prostate cancer shortly before the campaign.

It is worth noting that in the same year that the campaign was run, two high-profile public figures announced their prostate cancer diagnoses.

There was no evidence to suggest the fourth national blood in pee awareness campaign had an impact on the numbers of bladder, or kidney and urinary tract cancer diagnoses recorded in the CWT database.

Other metrics being evaluated include cancer diagnoses resulting from an urgent referral for suspected cancer, urgent referrals for suspected cancer, numbers of cancers diagnosed, and stage at diagnosis.

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.

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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/

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