



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

Caveats: This summary presents the results of the metric on emergency presentations. 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.

Emergency presentations

The campaign

The fourth national blood in pee 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 if it's 'just the once', tell your doctor.'

Key message

The fourth national blood in pee awareness campaign may have had some impact on the proportion of patients diagnosed with bladder cancer who presented as an emergency.

Metric: Emergency presentations

The Hospital Episode Statistics (HES) derived emergency presentation metric is calculated from inpatient data and uses the methodology set out in the cancer outcomes metric specification¹. It measures the proportion of cancer diagnoses that first presented as an emergency.

Data was extracted for persons admitted between January 2017 and December 2018, resident in England with a primary diagnosis of bladder cancer (ICD-10 C67) or kidney and unspecified urinary cancer (ICD-10 C64-C66, C68), further referred to as kidney cancer. Numbers do not include persons diagnosed via other routes, for example outpatient or general practice settings.

For persons aged 50 years and over, and for all ages combined, the monthly proportion was calculated as the number of first inpatient admissions with bladder or kidney cancer presenting through an emergency route, divided by the total number of first inpatient admissions with bladder or kidney cancer, multiplied by 100.

¹ Public Health England. Indicator Specification: Proportion of cancer admissions diagnosed for the first time via emergency presentation. 2015.

To assess whether the campaign had an impact on the proportion of bladder or kidney cancers diagnosed as an emergency presentation, the proportion for the campaign period plus two months post-campaign, July to October 2018, were compared with the same months in 2017.

Results

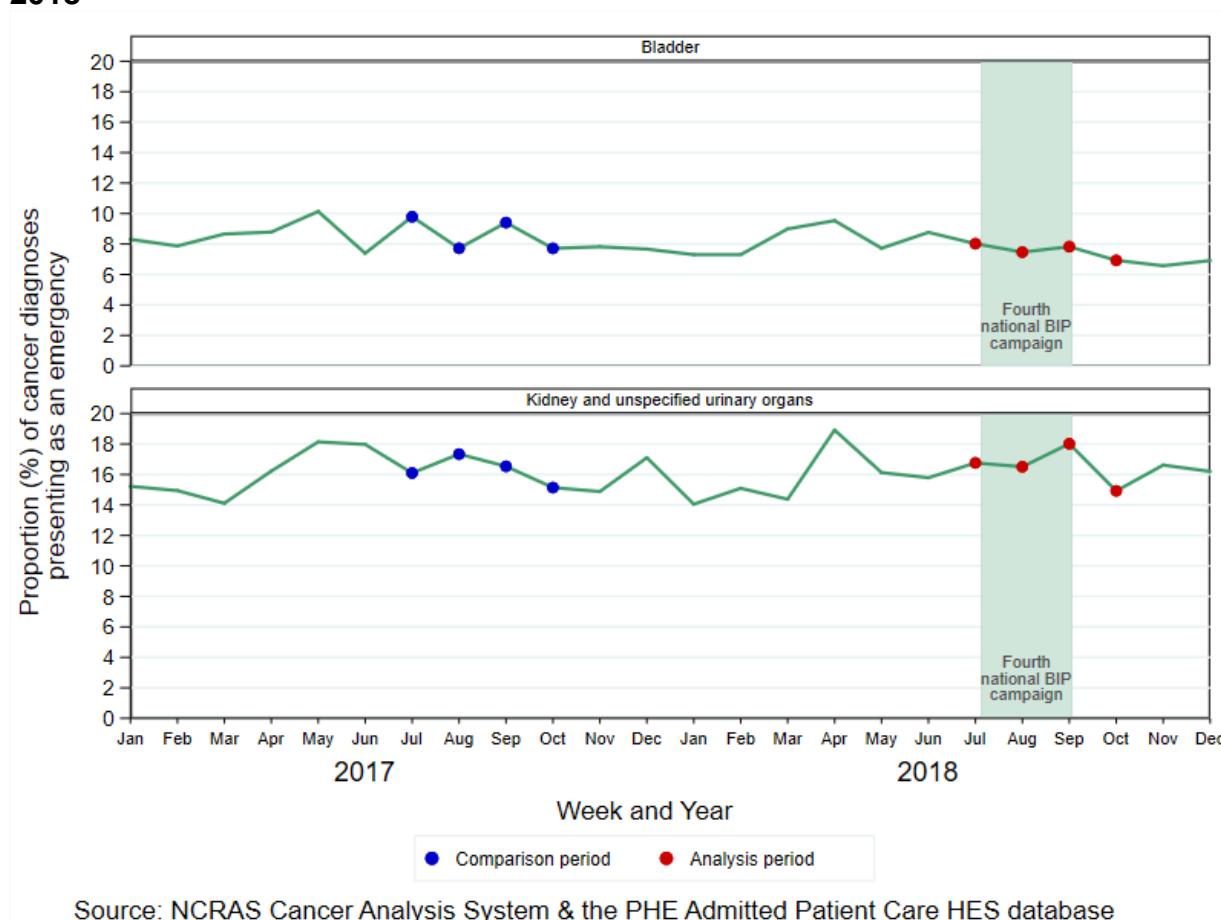
There was a statistically significant 1.0 percentage point decrease in the proportion of all patients diagnosed with bladder cancer who presented as an emergency, from 8.6% in July to October 2017 to 7.6% in July to October 2018 (p value=0.036). A similar decrease was observed for patients diagnosed aged 50 years and over (8.8% to 7.7%, p value=0.041).

For men there was a statistically significant 1.3 percentage point decrease in the proportion of emergency presentations from 7.7% in July to October 2017 to 6.4% July to October 2018 (p value=0.023). There was no difference in the proportion of women with bladder cancer presenting as an emergency between these periods.

There was a very slight decrease in the proportion of patients with bladder cancer presenting as an emergency between January 2017 and December 2018 (Figure 1), suggesting that there is an underlying decreasing trend which should be considered when interpreting the results.

For patients diagnosed with kidney cancer, there were no statistically significant difference in the proportion who presented as an emergency by age or gender. The proportion of patients with kidney cancer presenting as an emergency remained stable over the period January 2017 to December 2018.

Figure 1: Proportion of emergency presentations for bladder and kidney cancer by month, all ages combined, England, January 2017 to December 2018



Conclusions

There was a statistically significant decrease in the proportion of patients diagnosed with bladder cancer who presented as an emergency; though the proportion appears to be decreasing this appears to be in line with the long-term trend.

The fourth national blood in pee awareness campaign may have had some impact on the proportion of patients diagnosed with bladder cancer who presented as an emergency.

There was no evidence to suggest the fourth national blood in pee awareness campaign had an impact on the proportion of patients diagnosed with kidney cancer who presented as an emergency.

Other metrics being evaluated for this campaign include Cancer Waiting Times referrals, conversion and detection rate, 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; 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