



Dr Nick Davies

Lung cancer awareness campaign: How Health Boards can support the awareness campaign in Wales

11 July – 11 August 2016

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NHS Wales is running a national campaign to raise awareness of a persistent three week cough as a symptom of lung cancer – you can help make it a success.

The campaign is led by NHS Wales' Lung Cancer Initiative (LCI) working with the Health Boards, the Cancer Network, Community Pharmacy Wales and third sector organisations including Tenovus Cancer Care. The LCI is one of the Cancer Implementation Groups' five priority areas for 2016/17 to improve outcomes for people diagnosed with lung cancer. The Awareness Campaign is a key part of this Initiative which spans the pathway from awareness to treatment.

Earlier diagnosis and rapid access to potentially curative treatments such as surgery and radiotherapy are crucial to improve survival.

What is the Campaign's focus?

The Campaign is based on Public Health England's 'Be Clear on Cancer' and aims to achieve earlier diagnosis of lung cancer by raising awareness of symptoms and, most importantly, encouraging people to see their GP without delay. This message to avoid delay follows on from the findings of the International Cancer Benchmarking Partnership. This research found that people in Wales, as in the rest of the UK, had lower awareness that the risk of cancer increases with age and reported more barriers to presenting their symptoms than other countries⁴, especially worry about wasting the doctor's time.

Who is the campaign aimed at?

Men and women over the age of 50 and their key influencers, such as friends and family.

Although smoking is by far the biggest cause of lung cancer, the adverts don't mention smoking; previous lung cancer awareness projects have revealed that leading on a smoking message can delay people from going to see their doctor. However, information being provided for GPs does highlight that smokers and ex-smokers are at higher risk.

What is the campaign's key message?

The message for the public is: **Been coughing for three weeks? Tell your doctor.**

Why lung cancer?

Lung cancer is the 3rd most common cancer in men and the 2nd most common in women and each year is responsible for more deaths than bowel and breast cancer combined¹. Survival from lung cancer in Wales is almost the lowest in Europe at 28th out of 29 countries². If the best lung cancer survival in Europe applied in Wales during 2012, an approximate estimate of well over 340 more people might have survived at least a year, and over 190 more people might survive at least five years¹. To improve outcomes we need to understand both the epidemiology and presentation of this disease. GPs now have information of variation in stage at diagnosis and in survival by stage in relation to age, sex and deprivation across clusters³. For example only 20% of people with lung cancer presented at Stages I and II in 2012 when the disease is potentially curable¹.

"Being diagnosed with lung cancer was a big shock, but it does not discriminate and can affect anyone, in particular people over the age of 50. I would urge anybody with symptoms, like a persistent cough, to go and see their doctor straight away."

Kathryn Davies

Key lung cancer facts:¹

- There are around 2,400 new cases of lung cancer in Wales every year
- Only 20% of people present their symptoms to their GP at an early enough stage when the disease is potentially curable
- 98% of people diagnosed with lung cancer in Wales are aged over 50

What activities are taking place and when?

A Wales wide lung cancer campaign will run from 11 July to 11 August 2016, highlighting the symptom of a persistent three week cough.

Adverts will appear on ITV Wales and S4C, on Wales' radio stations, in local papers and online, and on buses. Community awareness raising campaigns will take place as well as media and public relation activities.

In addition to this activity, NHS Wales is working strategically to raise awareness across pharmacies in Wales.

What are the outcomes we can expect based on similar lung cancer awareness raising campaigns⁵?

Be Clear on Cancer campaigns have run in England since 2010. Results from the first national campaign focusing on symptoms of lung cancer, which ran from May–June 2012, indicate that the campaign changed levels of public awareness.

- Increases in unprompted awareness of cough as a symptom of lung cancer from 54% pre-campaign to 65% post campaign, with specific mention of persistent / prolonged cough increasing from 12% pre-campaign to 15% post campaign

There were also indications that patients were being diagnosed earlier. These are some of the statistically significant findings following the first national lung cancer campaign in England (2012). Compared to the same period in the previous year, results showed:

- An increase of 9.1% in the number of lung cancer cases diagnosed during the months surrounding the campaign;
- An increase of 3.1 percentage points for the proportion of non-small cell lung cancers diagnosed at Stage I (14.1% to 17.3%). There was also a corresponding 3.5 percentage point decrease in the proportion of people diagnosed at Stage IV (52.5% to 49.0%);
- An increase of 2.3 percentage points (13.7% to 16.0%) for the proportion of patients receiving surgical resections as a first definitive treatment.

No evidence of change was found for the control period of any of the above measures.

What impact will the campaign have on GP practices and chest X-ray referrals?

GP attendance data for England's first national lung cancer campaign showed that more people with a cough visited their GP:

- When looking at the campaign period of May to July 2012, compared with May to July 2011, the number of patients aged 50+ presenting with a cough went up 63% – the equivalent of around 3 additional visits per practice, per week (based on practices in the sample that had an average list size of around 7,800 patients)
- The number of GP-referred chest X-rays increased by 18.6% in May–July 2012, compared with April 2012.

Will urgent GP referrals increase as a result of the campaign?

We also expect there to be an increase in urgent GP referrals as a result of this campaign. England's first national lung cancer campaign saw an increase of 32% in referrals for urgent suspected lung cancer in the campaign months, compared with the same period in the previous year – the equivalent of 0.14 additional referrals per GP practice, per month.

How many extra CT scans are likely to be needed?⁵

The national data from England showed that during the campaign period of May – July 2012, there was a 15.7% rise in GP-referred chest and/or abdomen CT scans per working day compared with April 2012.

Dr Nick Davies

Wedi bod yn pesychu am 3 wythnos?

Been coughing for 3 weeks?

Dywedwch wrth eich meddyg.

Tell your doctor.

Gallai peswch cyson fod yn arwydd o ganser yr ysgyfaint. Mae ei ganfod yn gynnar yn golygu ei fod yn haws ei drin.

A persistent cough could be a sign of lung cancer. Finding it early makes it more treatable.

BOD YN GLIR AM GANSER

BE CLEAR ON CANCER

eicwch.gig.cymru/canseryrsgyfaint

go.nhs.wales/lungcancer

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Will there be an impact on any other departments?

If the campaign is successful we would expect an increase in demand for both non surgical and surgical radical treatment. The second LCI work stream is working closely with Welsh Health Specialised Services Committee (WHSSC) and is focusing on optimising patients through the clinical pathway.

Two things you can do to support the ongoing lung cancer campaign:

1 Brief colleagues. Service managers, multi-disciplinary teams and clinicians all need to be aware that this campaign is running and that they are likely to see increases in demand for their services.

2 Capacity planning. It's vital that you continue to plan for an increase in urgent GP referrals for chest X-rays, requests for CT scans, urgent suspected cancer referrals and this will depend on the level of implementation of NICE referral guidance. Surgical centres are planning for increased activity and WHSSC are aware of this.

This briefing follows on from regular updates to Health Boards via the Cancer Implementation Group, a workshop of Health Board representatives in January 2016, diary markers to Health Board Chief Executives, Chief Operating Officers, Directors of Planning, Directors of Public Health, Medical Directors, Cancer Lead Clinicians and Cancer Lead Managers; and communications with the General Practitioners Committee (GPC) Wales (GPs), National Imaging Programme Board (NIPB, radiologists), Community Pharmacy Wales and the Welsh Centre for Pharmacy Professional Education (WCPPE, pharmacies).

- 1 Lung Cancer in Wales. Wales Cancer Intelligence and Surveillance Unit
- 2 De Angelis R et al. Lancet Oncol 2013;15:23-34.
- 3 GP Cluster Lung Cancer Profile Overall Summary. Wales Cancer Intelligence and Surveillance Unit
- 4 L.J.L. Forbes et al., Differences in cancer awareness and beliefs between Australia, Canada, Denmark, Norway, Sweden, and the UK (the International Cancer Benchmarking Partnership): do they contribute to differences in cancer survival? B.J.C (2013), 108, 292-300
- 5 L. Ironmonger et al., An evaluation of the impact of large-scale interventions to raise public awareness of a lung cancer symptom. B.J.C (2015) 112, 207-216