





Be Clear On Cancer

O-G Audit meeting 12 Nov 2014





Four things....

- Pass on a message from the central team to all of the north east and north Cumbria teams
- Share a few of the O-G pilot results
- Listen to how its feeling now, 8 months on
- Next steps...



thank you....

The oesophago-gastric cancer campaign

Watch the Oesophagogastric cancer TV advert and BSL leaflet





Metrics

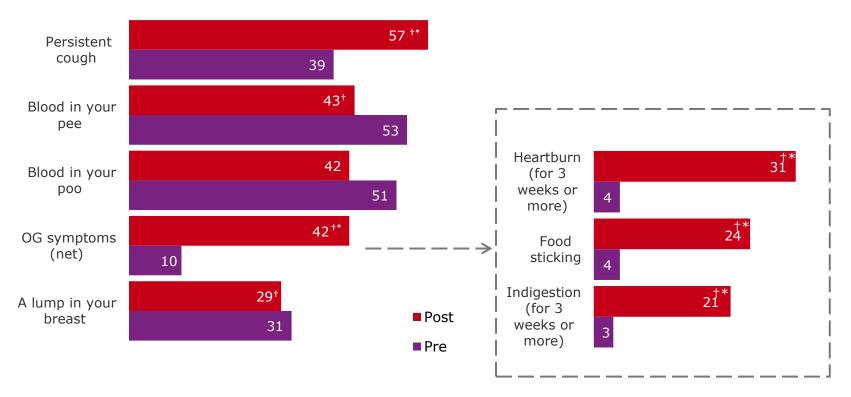
Metric	Data provider	Type of data
Public awareness	TNS BMRB (A market research organisation)	Sample of population
Patients GPs recorded as presenting with key campaign symptoms	Mayden (Healthcare IT specialists)	Sample of GP practices
Urgent GP referrals for suspected cancer, conversion and detection rates	East Midlands KIT from the Cancer Waiting Times database (NHS England)	National dataset
Diagnostic tests	-Monthly Diagnostics Waiting Times and Activity dataset (DM01) -Diagnostic Imaging Dataset team (NHS England)	National dataset
Diagnosis & staging	Cancer Analysis System, via NCIN	National dataset
Emergency presentations	Proxy from Hospital Episode Stats, via NCIN	National dataset

Colleagues at NCIN will be leading on all evaluation elements



Regional pilot results: Significant increase in people <u>spontaneously</u> mentioning oesophago-gastric cancer symptoms post campaign

% of those in pilot region spontaneously mentioning sign or symptom



BASE: All who have seen, heard or read any adverts, publicity or other types of information in the last couple of months about the symptoms of cancer pre/post (Pilot: 127/167; Control 272/250)

NEW3. What cancer symptoms do you remember seeing or hearing about in the last couple of months?

Significant difference pre to post (*) / pilot/control (†)

^{&#}x27;OG Specific symptoms net defiinition: Heartburn, indigestion and food sticking

Additional results from the awareness tracker

People think it is important and understand the campaign

- 96% agreed with the statement: 'it is important that adverts like this are shown'
- 63% agreed with the statement: 'the advertising told you something new'
- 96% agreed with the statement: 'the advertising is clear and easy to understand'

Overall confidence in knowledge of oesophago-gastric symptoms increased

- Significant increase pre to post in the pilot region, up from 25% to 35% stating they were very/fairly confident that they knew signs of oesophago-gastric cancer
- No increase in control region

Results: clinical metrics

GPs in the pilot area increased the number of people they referred for suspected upper gastrointestinal cancers

 52% increase in urgent GP referrals (two-week wait) for suspected upper GI cancers in pilot area compared to 17% in the control area

The total number of upper GI cancers diagnosed did not increase – but promising results in target age group

- There was a significant increase of 29 percentage points in the proportion of upper GI cancers diagnosed via a 2WW referral, among those aged 60–69 only
- This is based on a relatively small number of cases and there was some variation in the data over time, therefore the observed increase may not be wholly attributable to impact of the campaign.



Results: local data

Barrett's oesophagus data: 22/09/2014

Hospital Trust	Full year 2013	Feb – April 2013	Feb –April 2014
City Hospitals Sunderland NHS FT	105	27	52
South Tees Hospitals NHS FT	602	151	181
Gateshead Health NHS FT			
Northumbria Healthcare NHS FT			
North Tees & Hartlepool NHS FT		56	77
South Tyneside NHS FT	115	28	27
Newcastle upon Tyne Hospitals NHS FT	413	91	100
County Durham & Darlington NHS FT			
North Cumbria University Hospitals NHS			
Trust			

More data is needed to fully understand the impact of the campaign



Impact on services

2WW:

- The 8 trusts in the regional pilot saw an increase in 2WW referrals over the campaign period, particularly in March 2014
- Max average 15 extra 2WW per week per trust, but this reduced in April 2014 to on average 7 extra 2WW per week per trust
- A reduction in the percentage of people seen within the 14 day window also decreased over this time, from 94% in Feb 2014, to 90% in May 2014, with some recovery seen by July 2014 (92%)
- No additional increase in 2WW referrals was observed in the trusts not covered by the pilot, although a slight decrease in the percentage of people seen within the 14 day window was observed (from a peak of 95% in Feb 2014, to a low of 92% in Jun 2014).

Does that feel about right... anything else you would want to add?



Impact on services

Endoscopy:

- The average increase per week was 16 additional gastroscopies over the course of the pilot (data used from Mar 2014 to Jul 2014)
- However the range across the eight NHS trusts in the pilot areas went from 1
 additional gastroscopy per week up to 23 additional gastroscopies
- Caveat... The region for the pilot has abnormally high activity at baseline levels compared to the rest of the country, even outside the campaign period
- Average waiting times in the pilot sites showed an increase from Feb 2014 to May 2014, with a slight decrease between Jun 2014 - Aug 2014.
- Neither of these trends were observed in the trusts outside of the pilot.

Does that feel about right... anything else you would want to add?



How does it feel 8 months on from the end of the campaign?

These are the sorts of questions we are being asked....

- Details of the numbers and types of treatments (first and subsequent) given to patients with OG cancer in the pilot areas in the year before and the year after the campaign
- Details of the stage of diagnosis prior to and after the campaign for OG cancer
- Precise figures on the % increase in diagnoses of Barrett's Oesophagus mentioned as being an effect
- Number of minor operations carried out for: OG cancer or high grade dysplasia before and after the campaign in the pilot areas (endoscopic mucosal resection, HALO, RFA etc.)
- What is the significance of heartburn as a symptom of O-G cancer?
- There is more evidence for the 'food sticking' symptom, why didn't you lead with that in the TV advertising? Heartburn is a very common symptom that GPs see all the time in the surgery. Wont this campaign cause unnecessary panic?
- Can we contact the trusts that participated in the regional campaign to understand the impact?

What next....

O-G goes national....

- 26 January to the 22 February
- National (England only) TV, radio, events...
- Much more stakeholder engagement
 - Events in Liverpool, Nottingham, London and Southampton
 - HCP publications updates/opinion pieces
 - Sharing your story anyone fancy being filmed?!?!?
- Some new ways we are looking to reach the target audience
 - Pharmacy setting



Thanks again....

How are campaigns evaluated?

Metric	Broad questions we're seeking to answer
Cancer and campaign awareness	Are people seeing the campaign and is it raising awareness of the signs and symptoms?
GP attendance	Are we seeing more people going to their GP with the symptoms promoted by the campaign, and is there any shift in the profile of patients presenting?
Urgent referrals for suspected cancer	Are we seeing more people referred urgently for suspected cancer, and is there any shift in the profile of these patients?
Conversion rates	Of those referred urgently for suspected cancer, how many actually turn out to have that cancer?
Impact on investigations	Are we seeing an increase in diagnostic investigation activity, or the length of time patients are waiting for tests?
Cancer incidence and staging	Are we seeing an increase in the numbers of patients diagnosed with cancer, and/or a shift towards earlier stage disease?



Piloting the oesophago-gastric cancer campaign

Spring/summer 2012 seven local pilots ran across England with promising results:

- 26% statistically significant increase in urgent
 GP referrals for upper gastrointestinal cancers
- 20% increase in the number of oesophageal cancers diagnosed following an urgent GP referral

Based on promising results, regional pilot ran which included TV advertising

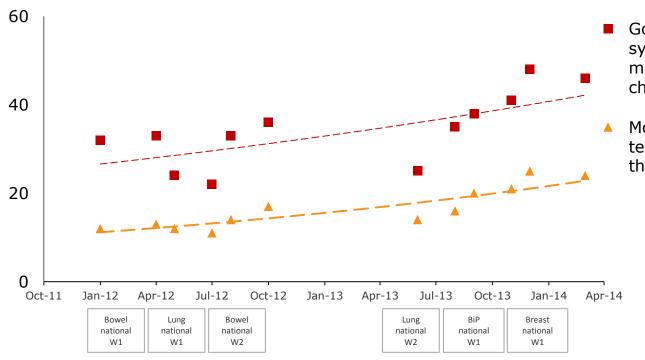
- Northern England Strategic Clinical Network area
- advertising from 10 February to 9 March 2014





Growing recognition of the importance of early diagnosis

% strongly disagree



Going to my GP with a symptom of [x] cancer makes no difference to my changes of surviving cancer

Most cancer treatment is terrible; it is even worse than death

Source: TNS BMRB tracking 2011-14

