



## Be Clear on Cancer: Local skin cancer campaign, 2014

**Caveats:** This summary presents the results of the metric on early stage at diagnosis. 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.

### Early stage at diagnosis

#### The campaign

A local skin cancer campaign ran from 16 June 2014 to 27 July 2014 in parts of the South West Strategic Clinical Network: Devon, Somerset and Cornwall.

The campaign's key message was:

- 'A change to a mole isn't the only sign of skin cancer – if you notice any unusual or persistent changes to your skin go to your doctor.'

#### Key message

The local skin cancer campaign appears to have had an impact on the proportion of malignant melanoma diagnosed at an early stage. However, caution must be applied as these results are based on small numbers.

#### Metric: Early stage at diagnosis

This metric considers whether the local skin cancer campaign had an impact on the proportion of malignant melanoma (ICD-10 C43) diagnosed at an early stage (AJCC stage IA – IIB) for men and women of all ages resident in Devon, Somerset and Cornwall (identified using Sustainability Transformation Partnerships).

Data was extracted from the national cancer analysis system for the diagnosis period February 2013 to January 2015. The analysis period was defined as two weeks after the start of the campaign (week 27 of 2014) to two months after the end of the campaign (week 39 of 2014). The proportion of early staged cases per week in the analysis period was compared with the overall median for February 2014 to January 2015. The campaign was considered to have a possible impact if a) the proportion per week was the same or higher than the median for five or more consecutive weeks and b) this sustained period started during the analysis period.

#### Results

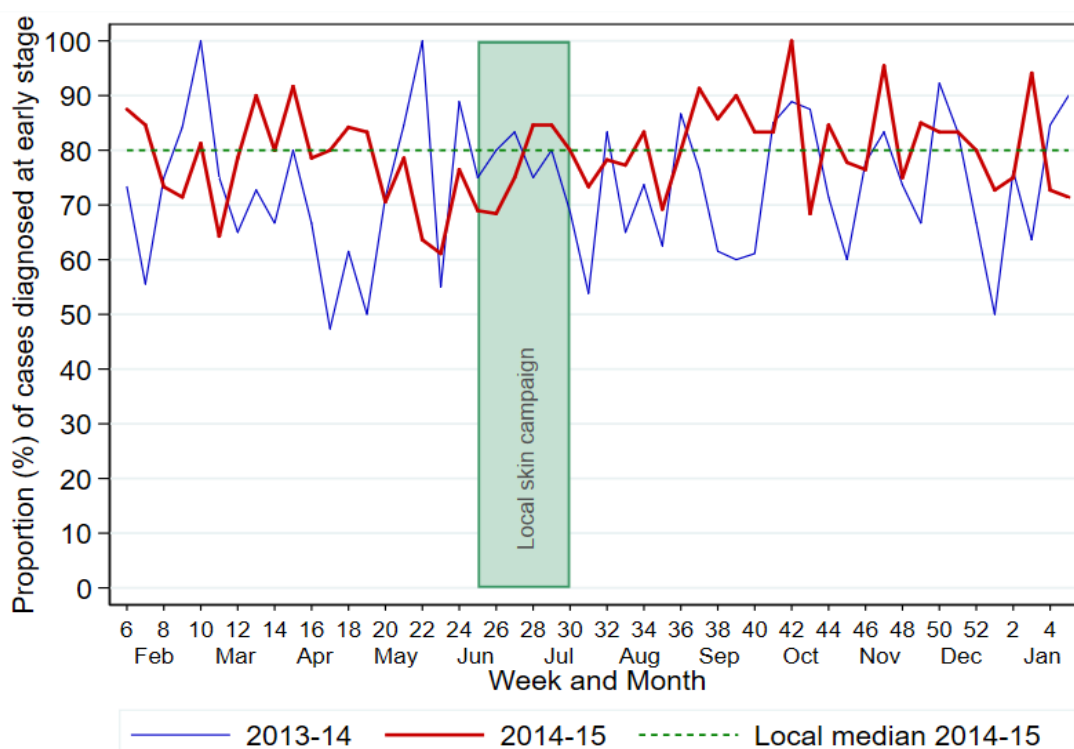
For persons aged 50 years and over the proportion of early staged malignant melanoma was the same as or higher than the 2014 to 2015 median from week 36 to 42 in 2014 (Figure 1). During this seven-week period, the proportion of malignant melanoma

diagnosed at an early stage was 88% compared to that expected based on the median (80%) (Figure 1).

For persons diagnosed at any age, the proportion of early staged malignant melanoma was the same as or higher than the 2014 to 2015 median from week 37 to 42 in 2014 (Figure 1). During this six-week period, the proportion of malignant melanoma diagnosed at an early stage was 88% compared to that expected based on the median (80%) (Figure 1).

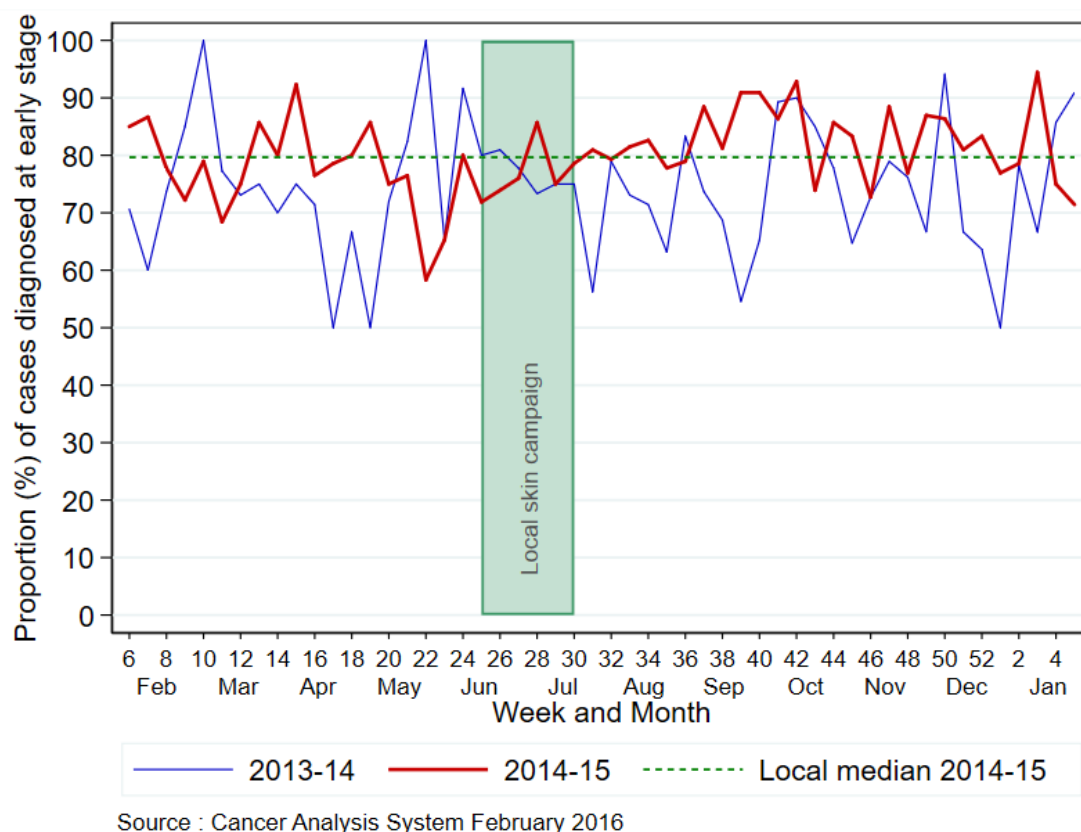
**Figure 1: Proportion of malignant melanoma diagnosed at an early stage by week, Devon, Somerset and Cornwall, February 2013 to January 2015**

**a) 50 years and over**



Source : Cancer Analysis System February 2016

## b) All ages



## Conclusions

There was a sustained period where the proportion of early stage malignant melanoma was the same as or higher than the median in Devon, Somerset and Cornwall.

The local skin campaign appears to have had an impact on the proportion of malignant melanoma diagnosed at an early stage. However, caution must be applied as these results are based on small numbers.

Other metrics being evaluated include urgent GP referrals, conversion and detection rate, cancers diagnosed 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.

The proportion of staged cases for the Be Clear on Cancer (BCoC) metric summaries was calculated using denominators which excluded cases with unknown stage. Other National Cancer Registration and Analysis Service (NCRAS) outputs on proportion of staged cases include cases with unknown stage in the denominator. Therefore, the proportion of staged cases reported in the BCoC metrics are different to other NCRAS

publications. Excluding cases with unknown stage ensures greater comparability across years for the BCoC metrics, as the proportion of cases with a completed stage has rapidly increased since 2014.

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, stage at diagnosis, and survival).

Find out more about Be Clear on Cancer at:

[www.ncin.org.uk/be\\_clear\\_on\\_cancer](http://www.ncin.org.uk/be_clear_on_cancer)

[www.nhs.uk/be-clear-on-cancer](http://www.nhs.uk/be-clear-on-cancer)