



Be Clear on Cancer: Regional oesophago-gastric cancer campaign, 2014

Caveats: This summary presents the results of the metrics on diagnostics in secondary care. 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.

Diagnostics in secondary care

The campaign

The regional oesophago-gastric cancer campaign ran from 10 February 2014 to 9 March 2014 in the North of England.

The campaign's core message was:

- 'Having heartburn, most days, for 3 weeks or more could be a sign of cancer – tell your doctor.'

Metric: Diagnostics in secondary care

This metric considers whether the regional oesophago-gastric cancer campaign had an impact on the number of imaging tests conducted by NHS providers in the North of England. These included X-rays (barium meal and swallow), and endoscopy tests conducted for suspected oesophago-gastric cancer and other medical conditions.

The data on the total number of X-rays and endoscopies conducted were obtained from the Diagnostic Imaging Dataset (DID) held on NHS Digital's iView system (<https://iview.hscic.gov.uk/Home/About>). The data contains details of referrals by GPs, consultants and other healthcare professionals.

This metric compares the difference in the monthly number of X-rays and endoscopies between the analysis period of February to May 2014 and the comparison period of April to July 2013¹. The comparison period of April to July 2013 was used for this analysis as collection of imaging tests in the DID did not commence until April 2013.

¹ T-test was used for testing statistical significance.

Key message

There was no evidence to suggest that the national oesophago-gastric campaign had an impact on the number of X-rays and endoscopies carried out.

Results

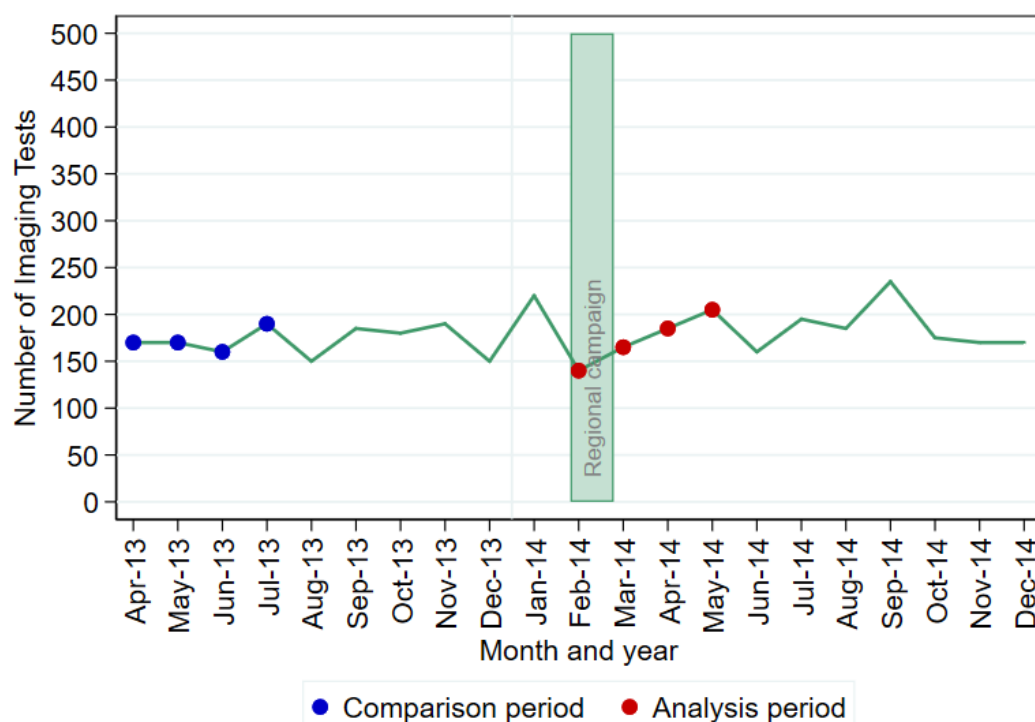
Comparing the months February to May 2014 with April to July 2013, there was a 0.7% increase in the total number of X-rays and endoscopies for those aged 50 years and over, and a 4.8% increase for all ages (Table 1). However, these changes were not statistically significant. Figure 1 shows the number of X-rays and endoscopies from April 2013 to December 2014.

Table1: Number of X-rays and endoscopies in April to July 2013 and February to May 2014, North of England.

Tests	Age group	April to July 2013	February to May 2014	Percentage change
Number of imaging tests	50 and over	690	695	0.7
	All ages	930	975	4.8

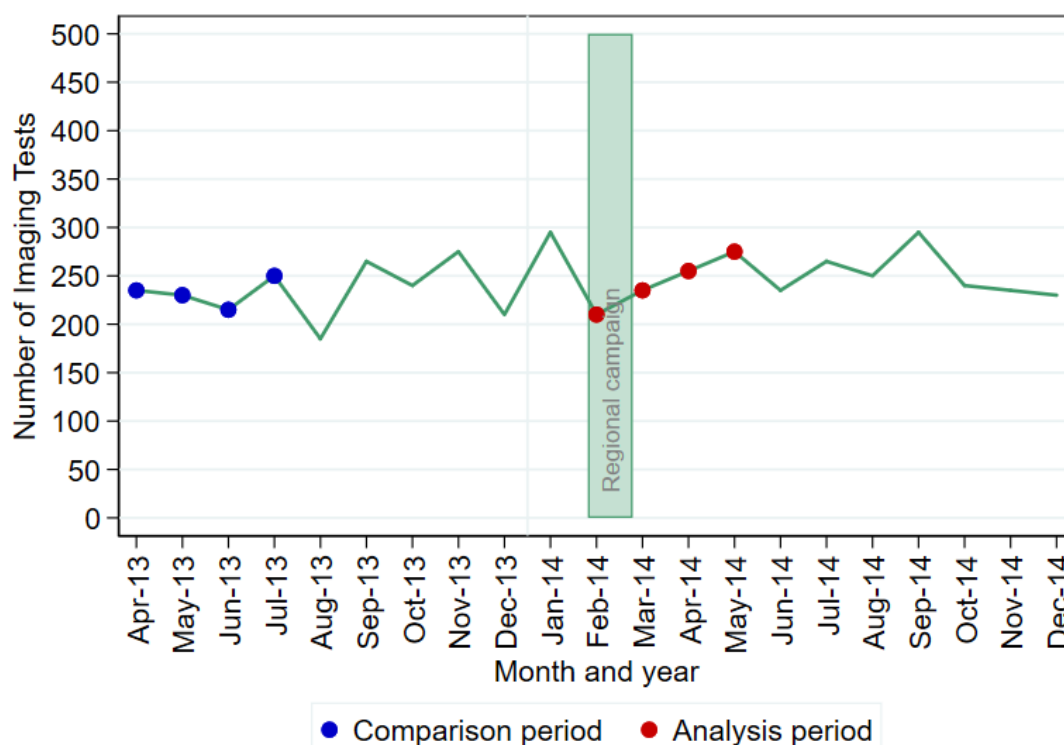
Figure 1: Monthly number of X-rays and endoscopies, April 2013 to December 2014, North of England. a) 50 and over b) All ages

a) 50 and over



Source: iView (<https://iview.hscic.gov.uk/Home/MyData>)

b) All ages



Source: iView (<https://iview.hscic.gov.uk/Home/MyData>)

Conclusions

There was an increase in the number of X-rays and endoscopies carried out, however this was not statistically significant.

There was no evidence to suggest that the national oesophago-gastric campaign had an impact on the number of X-rays and endoscopies carried out.

Other metrics being evaluated include the Cancer Waiting Times referrals, conversion and detection rates, numbers of cancers diagnosed, stage at diagnosis 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.

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