



Be Clear on Cancer: Local prostate cancer campaign, 2014

Caveats: This summary presents the results of the metric 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 local prostate cancer campaign ran from 20 October 2014 to 23 November 2014 in London (Hackney, Haringey, Newham, Lambeth, Lewisham and Southwark).

The campaign's core message was:

- '1 in 4 black men will get prostate cancer. Prostate cancer often has no obvious symptoms. If you are a black man over 45 and want to discuss your personal risk of prostate cancer, visit your GP'

Metric: Diagnostics in secondary care

This metric considers whether the local prostate cancer campaign had an impact on the number of imaging tests conducted by NHS providers. These include ultrasound, CT scan and MRI tests conducted for suspected prostate cancer and other medical conditions.

The data on the total number of ultrasounds, CT scans and MRIs 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 total monthly number of ultrasounds, CT scans and MRIs between the analysis period of November 2014 to January 2015 and the comparison period of November 2013 to January 2014¹.

¹ T-test used for testing statistical significance.

Key messages

There was no evidence to suggest the local prostate cancer campaign had an impact on the number of ultrasounds, CT scans and MRIs carried out.

Results

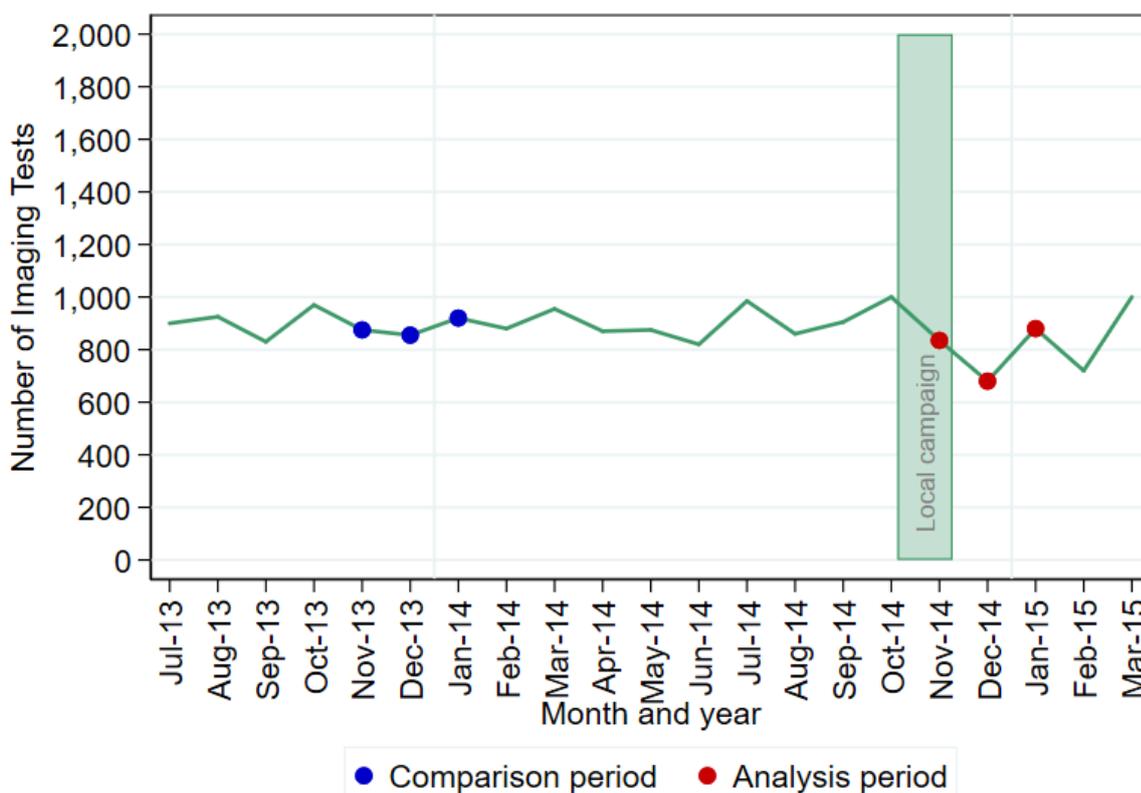
Comparing the months November 2014 to January 2015 with November 2013 to January 2014, there was a 9.6% decrease in the total number of ultrasounds, CT scans and MRIs for those aged 50 years and over, and a 9.1% decrease for all ages. However, these changes were not statistically significant. Figure 1 shows the number of ultrasounds, CT scans and MRIs from July 2013 to April 2015.

Table 1: Number of ultrasounds, CT scans and MRIs in October 2013 to January 2014 and October 2014 to January 2015, London (Hackney, Haringey, Newham, Lambeth, Lewisham and Southwark).

| Tests | Age group | November 2013 to January 2014 | November 2014 to January 2015 | Percentage change |
|-------------------------|-------------|-------------------------------|-------------------------------|-------------------|
| Number of imaging tests | 50 and over | 2,650 | 2,395 | -9.6 |
| | All ages | 3,885 | 3,530 | -9.1 |

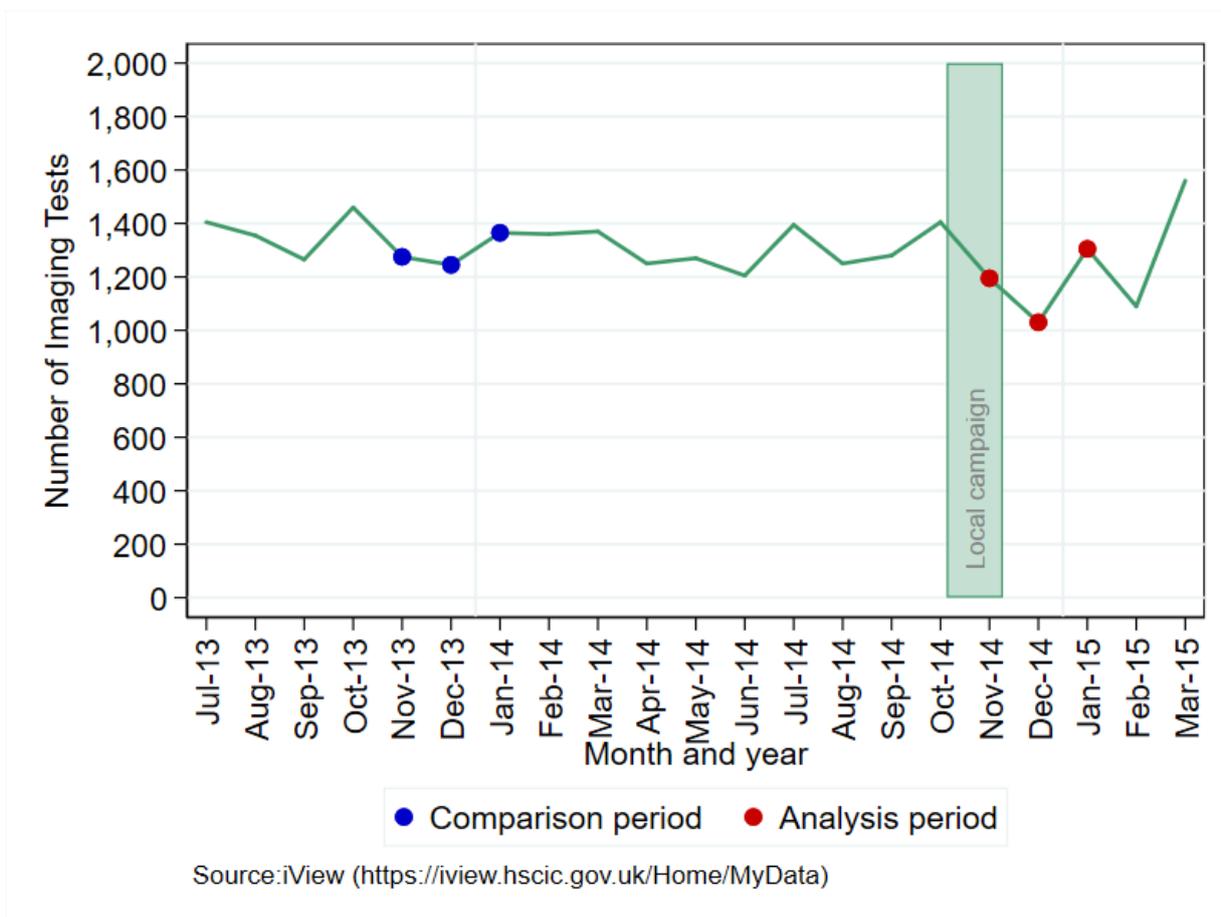
Figure 1: Monthly number of ultrasounds, CT scans and MRIs, July 2013 to April 2015, London (Hackney, Haringey, Newham, Lambeth, Lewisham and Southwark). a) 50 and over b) All ages

a) 50 and over



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

b) All ages



Conclusions

There was a decrease in the number of ultrasounds, CT scans and MRIs carried out, however this was not statistically significant.

There was no evidence to suggest the local prostate cancer campaign had an impact on the number of ultrasounds, CT-scans and MRIs 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. A full evaluation report will be published on the campaign metrics when all of the results are available.

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