

Dr Nick Davies

Lung cancer awareness campaign: How GP practices can support the campaign in Wales

11 July - 11 August 2016

Last updated: 23 June 2016

NHS Wales is running a national campaign to raise awareness of a persistent three week cough as a symptom of lung cancer – and 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 Lung Cancer Initiative 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.

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.

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 campaign materials don't lead on smoking; this is because previous lung cancer awareness projects have revealed that leading on a smoking message can delay people from going to see their doctor. However, we know that smokers and ex-smokers are at higher risk.

"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.

Lung cancer risk factors

Anyone can develop lung cancer. It affects both men and women however, is more common in older age, with 98% of people diagnosed in Wales aged over 50¹. Smoking causes more than 8 in 10 lung cancers in the UK. People who smoke, used to smoke, or have been exposed to second-hand smoke have an increased risk of developing the disease.

Lung cancer symptoms

The recommendations in the <u>2015 NICE guidelines</u> are that an;

An urgent referral is required for people with a chest X-ray that suggests lung cancer or are aged 40 and over with unexplained haemoptysis.

An urgent chest X-ray should be offered to people with two or more of the following unexplained symptoms or if they have ever smoked and have one or more of the following unexplained symptoms:

- cough
- fatigue
- shortness of breath
- chest pain
- weight loss
- appetite loss

Consider an urgent chest X-ray to assess for lung cancer in people aged 40 and over with any of the following;

- persistent or recurrent chest infection
- finger clubbing
- supraclavicular lymphadenopathy or persistent cervical lymphadenopathy
- chest signs consistent with lung cancer
- thrombocytosis

Assessment and referral

Whilst the above summarises the NICE guidance for assessment and referral, continue to use your clinical judgement and remember, if the chest X-ray is normal but you have a good reason to suspect lung cancer, you can still make a referral for urgent suspected cancer or request a repeat X-ray. The radiation exposure from X-rays is equivalent to three days or normal background radiation.

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

Be Clear on Cancer campaigns have run in England since 2010. Results from the first national campaign focussing 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 campaign showed that more people with a cough visited their GP:

- When looking at the campaign period of May to June 2012, compared with May to June 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.

Things you can do:

Talk about the campaign. People who have previously ignored their symptoms may be prompted to come along to your surgery but they may be afraid, not find it easy to communicate their symptoms, or worry they're wasting your time. Even if the patient doesn't have cancer, it's a great opportunity to discuss prevention or lifestyle changes.

Encourage your colleagues to support the campaign. The whole practice team has an important role to play. Ensure everyone is aware of the campaign, so they can support it and recognise when a patient requires a CXR. Prepare for more patients coming to your practice as a result of the campaign.

- 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

