





Lou Pescod, cancer survivor

Ovarian cancer: How NHS trusts can prepare for the regional campaign

The NHS is piloting a regional campaign in the North West to raise awareness of persistent bloating as a symptom of ovarian cancer. Around 500 lives could be saved in England each year if women were diagnosed earlier. Your continued help with earlier diagnosis of cancer is vital.

How does *Be Clear on Cancer* help the NHS deliver improved outcomes?

In January 2011, Improving Outcomes: a Strategy for Cancer set out the ambition to prevent 5,000 deaths from cancer per year by 2014/2015. This would bring survival rates in England up to the average for Europe. In line with this, there are indicators in the NHS Outcomes Framework 2013 to 2014 on cancer survival rates. Be Clear on Cancer is one of a number of actions to support the NHS to improve survival rates, by tackling late diagnosis through raising awareness of symptoms and encouraging more people to see their GP without delay.

What is the main message of this campaign?

Feeling bloated, most days, for three weeks or more could be a sign of ovarian cancer. Tell your doctor.

What activities will be taking place and when?

Adverts will appear on TV, radio and in the press from 10 February to 16 March 2014 across the North West television region. There will also be events in public places, like shopping centres.

Who is the campaign aimed at?

All women over 50, the age group most at risk of developing ovarian cancer, and their friends and family.

What evidence is there to support a regional ovarian cancer campaign?

Results from local ovarian pilot campaigns, which ran from January to March 2013, have been encouraging:

- Confidence in people's knowledge of the symptoms of ovarian cancer increased significantly in the Anglia/ Essex pilot area after the campaign, up from 20 to 31% of people saying they were 'very/fairly confident' of them
- 57% of women agreed that 'the advertising told me something new'

What impact will the regional campaign have on GP practices and diagnostic tests in primary care?

GPs may see more women coming to their practice with the symptom of persistent bloating, but it is anticipated that this should be manageable. Analysis of GP attendance data during the local pilots in early 2013 showed a 22% increase. This equates to 0.04 additional patients, per practice, per week.

We are also looking at the impact local pilots have had on CA125 testing in primary care – an increase in assessments is expected. Briefing sheets for GPs and nurses highlight the NICE guidelines recommendation around using this as a diagnostic tool in primary care and the availability of CA125 testing.



Key facts about ovarian cancer

- An average of 28 cases of ovarian cancer are diagnosed in each clinical commissioning group (CCG) per year. This equates to around two cases of ovarian cancer in each CCG per month
- For ovarian cancer, more than six in 10 women are diagnosed with stage III or IV disease, and only around three in 10 women are diagnosed at the earliest stage
- Just over 5,900 women are diagnosed with ovarian cancer in England each year – around 4,900 of whom (more than 80%) are aged 50 and over

What impact do you expect the campaign to have on referrals and diagnostic tests in secondary care?

Interim results from the local pilots in early 2013 showed that within the campaign areas there were some statistically significant increases in the number of referrals for suspected gynaecological cancer, particularly for those aged 40–49 and 50–59, of 13% and 14% respectively. But an overall increase was anticipated following the introduction of NICE guidelines specifically on ovarian cancer in April 2011.

The Department of Health (DH) has done some work to assess the possible impact of the regional campaign on 2 Week Wait (2WW) referrals and anticipates that it will equate to 0.2 extra referrals per week, per trust. It suggests trusts plan for a corresponding increase in the number of ultrasound scans.

'Ovarian cancers are often diagnosed late because of the nature of symptoms. This campaign is a real opportunity to improve earlier diagnosis and make a difference to patient's outcomes in our area, so it's really important to plan ahead and make sure there's capacity for more of the necessary diagnostic tests. Good communication with primary care colleagues is critical to this. As a priority, we're working together to plan for any extra demand, so the resulting impact will be manageable.'

Anne Tomlinson, Clinical Nurse Specialist, Lancashire Teaching Hospitals NHS Foundation Trust

How will the campaign impact on other secondary care services?

There may be an increase in referrals and diagnostic tests and more patients requiring treatment. Make colleagues responsible for performing procedures and patient admissions aware of the campaign. Work with them to plan what resources are necessary to meet any increased demand ahead of time.

Three things you can do

Brief colleagues. Let service managers, multi-disciplinary teams, and clinicians know about the campaign and when it's running. Ensure everyone is briefed and prepared for an increase in activity.

Plan additional capacity. It's vital to plan for increases in urgent GP referrals, as well as extra diagnostic tests and treatment. Take a look at activity levels for your trust for the same period last year (February–March 2013). Use this data, alongside the results of the local pilots and DH information about the likely impact of the regional campaign on referrals and primary and secondary services, to estimate what this might look like for your trust.

Make the most of available support. Work with your local Strategic Clinical Network and Clinical Commissioning Groups to plan for the potential impact of the campaign. A <u>letter</u> about the campaign, with more information about its aims and background, was cascaded to trusts in September 2013. You can get further campaign information and resources on the NAEDI website.

Find out more

- Visit <u>naedi.org/beclearoncancer/ovarian</u> for more information for health professionals
- Direct members of the public to nhs.uk/persistentbloating

