

Gateway Ref - 18484

4 December 2012

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To:

All Trust Chief Executives
All Primary Care Cluster Chief Executives

Copied to:
NHS Foundation Trust Chief Executives
Cancer Network Directors
Strategic Health Authority Cancer Leads
Strategic Health Authority Directors of Performance

Dear Colleague

Be Clear on Cancer – looking ahead to 2013

Following my letter of <u>29 August</u>, which provided an update on the cancer early diagnosis campaigns programme, I am writing now to keep you informed on progress with the Department's plans for early 2013.

National 'reminder' bowel cancer campaign – 28 August to September 2012

First, I would like to thank everyone who helped to support the delivery of this campaign. We are expecting to publish more results from the evaluation shortly.

Regional pilot campaigns - 14 January to mid-March 2013

The Department is piloting two new regional campaigns that will use TV, radio, press and poster advertising, PR and public events:

- blood in urine (blood in pee) symptom awareness campaign will run in the North of England cancer network and target men and women over 50, with the aim of encouraging patients with possible kidney and bladder cancers to present earlier. The campaign message is If you notice blood in your pee, even if it's 'just the once', tell your doctor.
- breast cancer over 70 symptom awareness campaign will run in Arden, 3 Counties, Pan Birmingham and Greater Midlands cancer networks. In Anglia, people will receive direct mail so DH can test this approach. The campaign message is One in three women who get breast cancer are over 70, so don't assume you're past it. The campaign message will be that women should see their doctor if there are any changes in their breasts.

Implications for secondary care in the areas for the regional pilots

One of the reasons for piloting at regional level before we consider scaling up to national campaigns is to assess the impact on services, particularly of a TV campaign, and so at this stage we do not have a clear idea about the implications for secondary

care. We have however looked at the results of the local pilots and done some modelling work to assess the impact on urgent GP (two week wait) referrals for suspected cancer and diagnostic activity:

Breast cancer over 70 campaign: in the PCT areas where the local pilots ran earlier this year there was an increase of about 6% in both urgent referrals for breast symptoms and urgent GP referrals for suspected breast cancer in women over 70, compared with a 4% increase in the non-pilot PCT areas. This increase was over a 5 month period. Given the current age profile of women being referred to hospital with breast problems (suspected cancer or breast symptoms), they are likely to constitute a relatively small proportion of all referrals (though they represent about one third of all cancers). If this is the case, a 6% or even a 12% increase in this age group is not expected to impact hugely on workloads. Using TV advertising means that there is likely to be a larger increase, but we would not expect more than additional 5 patients per average trust over the period.

<u>Blood in urine campaign:</u> in the local pilots, there was a 23% increase in urgent GP referrals for suspected urological cancer over a period of five months (November 2011 to March 2012). For a period of one month (February to March 2012), the range in increase in urgent GP referrals was between 15% and 30% in trusts in the pilot areas of the local campaign. Even though the use of TV advertising is likely to increase impact at regional level, the fact that blood in urine is a fairly targeted symptom means that we would not expect a much larger increase in urgent referrals.

An analysis of diagnostic activity shows that from January 2012 to date there has been an increase of around 6% in cystoscopy activity in the PCTs areas where the local pilots ran compared with the previous year. In comparison, there was a 2% increase in the non-pilot PCT areas.

Local (cancer network level) pilot campaigns - 14 January to mid March 2013

DH is piloting two new campaigns, both targeted at over 50s (with no TV advertising in either):

Ovarian cancer has been chosen because analyses show that around 500 deaths
from ovarian cancer could be avoided each year if survival rates matched the best
in Europe. Persistent bloating was agreed to be the most important predictor of
ovarian cancer, so the campaign message is Feeling bloated, most days for 3
weeks or more, could be a sign of ovarian cancer.

Press and radio advertising and PR will run in Anglia and Essex cancer networks. Thames Valley, Yorkshire and NE Yorkshire and Humber cancer networks will also have paid for media and PR. They will also be running additional community engagement activities.

• Cancer symptoms campaign - Know 4 Sure will aim to raise awareness of key signs for a range of cancers, including rarer cancers. The rationale behind this approach is that we cannot run symptom campaigns for all different cancer types and so, having run campaigns for a range of the most common cancers, we want to see what scope there is to run campaigns for a broad range of cancers. Using the strap line "Know 4 Sure", this campaign will highlight four symptoms: unexplained bleeding, weight loss, pain and a lump. These are four of the most common reported symptoms for a number of cancer diagnoses.

North East and North Central London will use radio and press advertising and PR activity. Lancashire and South Cumbria, Greater Manchester and Cheshire and

Central South Coast will also use media advertising together with community engagement activities led locally.

Annex A includes poster advertisements that will be used for these campaigns.

Support for the NHS

Cancer networks teams are already working with primary and secondary care providers to help them prepare for the campaigns running in their areas. Briefings for the regional campaigns have been produced for GPs, practice teams and pharmacy teams and are available on the NAEDI website. Similar materials are being produced for the local pilots and will be available from mid-December.

Funding for additional tests and treatment as a result of encouraging earlier presentation has been put into PCT baselines over the course of the current spending review period. Further details are set out in the Impact Assessment for the Cancer Outcomes Strategy.

Activity for 2013/14

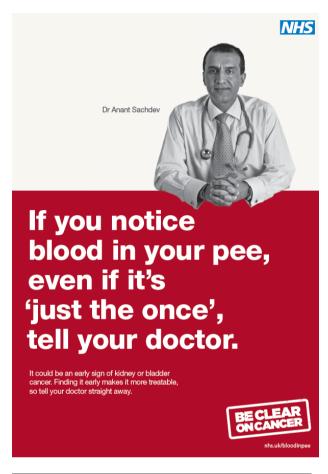
We are beginning to plan the Be Clear on Cancer campaigns programme for the 2013/14. We will update you on this in 2013 once we have agreement on plans from Ministers and the Cabinet Office.

If you have any queries about any aspect of the Be Clear on Cancer campaigns please contact Karen Iles in the DH Cancer Policy Team (<u>karen.iles@dh.qsi.gov.uk</u>).

Yours sincerely

Professor Sir Mike Richards National Cancer Director

ADVERTISING POSTERS FOR BE CLEAR ON CANCER CAMPAGINS IN 2012/13



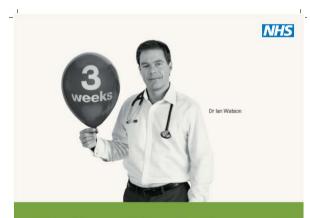




Know 4 sure

- 1. Unexplained blood that doesn't come from an obvious injury
- 2. An unexplained lump
- 3. Unexplained weight loss, which feels significant to you 4. Any type of unexplained pain that doesn't go away





Feeling bloated, most days, for 3 weeks could be a sign of ovarian cancer.

Chances are it's nothing to worry about, but finding it early makes it more treatable. So if you can't get rid of that bloated feeling, tell your doctor.

