



Department
of Health



Public Health
England



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To:

Clinical Commissioning Group Leads
Be Clear On Cancer Stakeholders
Strategic Clinical Network Associate Directors
Local Authority Chief Executives
Directors of Public Health
Public Health England Centre Directors
Foundation Trust Chief Executives & Medical Directors
Trust Chief Executives & Medical Directors

Cc:

Clinical Commissioning Group Accountable Officers
Area Team Directors

6 September 2013

Dear colleague

February-March 2014 - *Be Clear on Cancer* symptom awareness campaigns

We are writing to:

- let you know about our plans for a national breast cancer in women over 70 campaign
- let you know that we will be running two regional campaigns: one for ovarian cancer and one for oesophago-gastric cancers
- update you on evaluation results from previous pilots for these campaigns
- ask you to cascade this information to your local teams and colleagues.

Background

1. The *Be Clear on Cancer (BCOC)* symptom awareness campaigns are designed to tackle late presentation of patients with possible cancer symptoms and thereby to promote earlier diagnosis of cancer, when the cancer is more treatable.
2. *BCOC* began in 2011 and has covered a number of tumour sites including lung and bowel cancers. A process of testing locally and then regionally is conducted to ensure the messages are correct for the target audience and to assess the impact on NHS services. If appropriate, campaigns are then run nationally across England.
3. The campaigns are run by Public Health England, in partnership with NHS England and the Department of Health.

National

4. The decision to run the breast cancer in women over 70 campaign at a national level is based on evaluation data from the previous local and regional pilot campaigns. The national campaign will run early February to mid-March 2014. There is considerable evidence that many older women are not aware of their increased risk of breast cancer, often incorrectly thinking that, if they are not routinely invited for screening any more, then they cannot be at risk of cancer. The key message of the campaign is:

'1 in 3 women who get breast cancer are over 70, so don't assume you're past it'

5. The scale of this national campaign will be somewhat different from the national bowel and lung campaigns as it is targeting a smaller audience and the numbers likely to respond will be lower. TV advertising will run during the daytime only and in addition there will be direct mail focussed specifically at women in the target age group.

Regional

6. Based on evidence received from local pilots, two regional campaigns, to include TV advertising, will run from early February until mid-March 2014. These will be an ovarian cancer campaign in the North West and Border TV regions and an oesophago-gastric cancers campaign in the North East TV region:

Oesophago-gastric

The local pilot campaign ran early in 2012 and targeted men and women aged 55 years and over and focussed on key symptoms of oesophageal and stomach cancers – dysphagia and dyspepsia. There were two sets of messaging for the local pilot:

'If you have difficulty swallowing your food, tell your doctor.'

'If you've had indigestion or heartburn for 3 weeks on and off, tell your doctor.'

We are currently consulting a range of experts about which messaging should be the lead for the campaign. The target group for the 2014 regional pilot will be the same although we will review the age group with the expert panel.

Ovarian

The local campaign ran early in 2013 and targeted women aged 50 years and over and focussed on the key symptom of ovarian cancer – bloating. The message for the public was:

'If you are feeling bloated most days for 3 weeks or more, tell your doctor.'

The regional campaign will target the same group and use the same key message. There will be some minor changes, eg there will be inclusion of bowel symptoms in the literature associated with the campaign and the colour used for the advertisements will change.

Evaluation

7. The individual BCOC campaigns are subject to comprehensive evaluation. Some of the headline findings to date for the chosen campaigns include:

Local/regional breast cancer in women over 70

Local Pilot (January to March 2012)

- 8% increase in 2 Week Wait (2WW) referrals for breast symptoms and suspected breast cancer in women over 70 in the pilot area compared with 5% increase in the control area
- 4% increase in the number of breast cancers diagnosed following a 2WW referral for breast symptoms in women over 70 in the pilot area compared with a 2% increase in the control area.

Regional Pilot (January to March 2013)

- Belief that one in three women who get breast cancer are aged over 70 increased significantly after the campaign from 16% to 25%
- Overall 37% of women over 70 who had been sent the direct mail pack recalled receiving it. This compares favourably to the results from the lung cancer leaflet door drop where 20% recalled receiving it. For women aged 70-79 there was a 13% increase in referrals for suspected breast cancer symptoms within the regional pilot campaign area.

We are currently working with the NHS Cancer Screening Programmes team to look at any possible impact on screening requests for women over 70.

Local ovarian (January to March 2013)

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

Local oesophago-gastric (April-July 2012)

- +20% increase in oesophageal cancers diagnosed following a 2 Week Wait referral for suspected upper GI cancer in the pilot area.

Know 4 sure

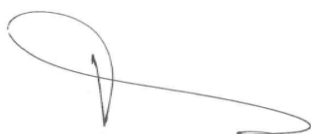
8. In order to decide which *BCOC* campaigns should be run in early 2014, we conducted a process of reviewing all the available evaluation data from the regional and local pilots; the general cancer statistics such as incidence, mortality and proportion of cancers diagnosed via emergency routes; and finally other activity that the team had been made aware of, such as cancer awareness months or training tools for GPs. As part of this process, we looked at the evidence on Know 4 sure, the local *BCOC* pilot campaign which features four common cancer symptoms.

At this time, it was felt there was not enough evidence to enable it to progress to a regional campaign: there are positives to this approach but still some areas that require further investigation (such as which communication channels are best for this more generic approach) and possibly refining the key message. Therefore, there will be no centrally planned Know 4 sure activity in January-March 2014, although materials are still available on the NAEDI website should any local teams wish to use them.

Preparations

9. As for previous campaigns, NHS Improving Quality, as part of NHS England, will be working with Strategic Clinical Networks to help ensure the NHS is prepared for the forthcoming campaigns, whilst Public Health England is working with local authorities. Briefing sheets for healthcare professionals and others, as well as campaign materials, will be developed to support the preparation and delivery of the campaigns. These will be available on the [NAEDI website](#) and cascaded in December 2013 and January 2014. We are also planning to undertake modelling work to estimate the potential impact of the national breast cancer in women over 70 campaign on local services, which will be sent out in due course. In the meantime you may want to be preparing primary and secondary care colleagues, looking at the capacity for diagnostic tests as well as treatment, and forward plan.
10. Please can you share this information with colleagues and local teams so they can start to think about how they can work together to help promote this campaign in your local community.
11. For more information, or if you have any queries, please contact the project support desk beclearoncancer@nhsiq.nhs.uk
12. Finally, we would like to thank you for your support with the *Be Clear on Cancer* campaigns to date and look forward to working with you to deliver the remainder of the 2013/14 programme.

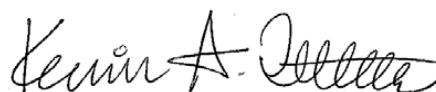
Yours sincerely



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