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# Lung cancer: How GPs can support the national 'reminder' campaign

**A national campaign will be raising awareness of the symptoms of lung cancer again this summer. We need your ongoing help with earlier diagnosis of cancer.**

## What is Be Clear on Cancer?

Be Clear on Cancer aims to improve early diagnosis of cancer by raising awareness of symptoms and encouraging people to see their GP earlier.

### What activities will be taking place and when?

Adverts will run on TV, radio and in the press from 2 July until mid-August 2013, highlighting the symptom of a **persistent three-week cough** in line with NICE guidelines.

## Who is it aimed at?

Men and women from lower socioeconomic groups **over the age of 50** and their key influencers, such as friends and family.

## Why does the campaign focus on the cough symptom?

Lung cancer has one of the lowest survival rates of any cancer because over two-thirds of patients are diagnosed at a late stage when curative treatment is not possible. An estimated 1,300 deaths from lung cancer could be avoided each year if survival rates matched the best in Europe.

More than 90% of patients with lung cancer are symptomatic at diagnosis, with cough being the most common presenting symptom. NICE guidelines state that a persistent three-week cough is a potential symptom which requires urgent referral for a chest X-ray.

## Is the campaign improving detection and survival rates?

Initial findings following the first national lung campaign in 2012 have been positive:

- Statistically significant increases in unprompted awareness of cough/hoarseness (41% to 50%) and

- persistent/prolonged cough (12% to 15%);
- An increase of approximately 30% in two week wait referrals for suspected lung cancer in the campaign months, compared with the same period in the previous year, with the majority of additional referrals in the over 50s.

Findings from the regional lung pilot in 2011 also show encouraging results:

- Trusts within the campaign area saw a 14.0% increase in lung cancer cases (excluding mesothelioma) diagnosed between the periods Oct – Dec 2010 and Oct – Dec 2011 compared with a 4.7% increase in trusts outside the pilot area;
- Statistically significant increase in small cell lung cancers staged as "limited" and positive trend towards earlier stage of diagnosis of non-small cell lung cancers in pilot trusts. Neither of these findings were seen in controls;
- Campaign trusts also saw a statistically significant increase in surgical resections which was not replicated in the non-campaign trusts.

(Source: National Lung Cancer Audit)

## Why repeat the lung cancer campaign?

We need to sustain this campaign to continue to drive behaviour change. Sean Duffy, National Clinical Director for Cancer at NHS England, explains: 'The results we have to date from the campaigns are really positive – Be Clear on Cancer, alongside continued work to improve access to diagnostics and treatments, is helping to move things in the right direction; but awareness levels of a persistent cough as a symptom of lung cancer are still low.'

'Initial findings from the national bowel cancer 'reminder' campaign evaluation show that repeating a campaign can grow cancer symptom awareness. By running the lung campaign again, the aim is to continue increasing awareness of the key symptoms and achieve a higher level of early presentation in primary care.'

[naedi.org/beclearoncancer/lung](http://naedi.org/beclearoncancer/lung)

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**39% of lung cancer patients present as emergencies, compared to 24% across all cancers**

**Around 70% of lung cancer patients in England are diagnosed at a late stage**

## Lung cancer reminders

**You might find it helpful to keep these reminders easily accessible throughout the Be Clear on Cancer campaign.**

### Lung cancer risk factors

Lung cancer is more common in older age, with 97% of people diagnosed in England aged over 50. Tobacco is by far the biggest cause of lung cancer – 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.

But it's important to remember that an estimated 17% of lung cancers in the UK are caused by factors other than being a current or past smoker.

### Lung cancer symptoms

**NICE guidelines highlight haemoptysis and the following symptoms when 'unexplained or persistent (that is, lasting more than 3 weeks)':**

- Cough
- Chest/shoulder pain
- Dyspnoea
- Weight loss
- Chest signs
- Hoarseness

### Assessment and referral

If a patient presents with any of these symptoms, NICE guidelines recommend making an urgent referral for a chest X-ray as a first step. Chest X-ray is a key diagnostic test for the detection of lung cancer – the average cost for a plain film X-ray is £30 and radiation exposure is equivalent to three days of normal background radiation. If the chest X-ray is suggestive of lung cancer, refer the patient urgently under the two week wait referral system.

Continue to use your clinical judgement and remember, if the chest X-ray is normal but you have good reason to suspect lung cancer, you can still make an urgent two week referral. An urgent two week referral is also recommended for smokers and ex-smokers older than 40 years with persistent haemoptysis.

**'This 'reminder' campaign is an ideal opportunity to start conversations with patients about a symptom that some may think isn't worth mentioning to us. As GPs, we know that while a persistent cough could be a sign of cancer, it could also be a symptom of something else, like COPD. Reassuring people they're not wasting our time is vital. I want my patients to know that, even if their chest X-ray comes back normal, I want to help them get to the bottom of what is causing their symptoms and get them the treatment they need as soon as possible.'**

Dr Russell Thorpe, GP from Lancashire

### What to expect

GP attendance data for the first national lung campaign will be available later this year, but during the regional pilot in October/November 2011 on average an additional 2.4 patients presented with relevant symptoms per practice per week. The national bowel campaign in January–March 2012 equated to approximately one additional patient with relevant symptoms per practice every two weeks.

Looking at the impact of the first national lung campaign on chest X-ray referrals, NHS England anticipates an increase of around one extra referral per week for an average GP practice.

### Three things you can do:

**1 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.

**2 Make the most of available support.** There is a wealth of additional information to support you, including:

- NICE guidelines for lung cancer
- Cancer decision support tools, including lung cancer risk assessment tools (RATs) and Qcancer;
- BMJ Learning online education tools – 'Suspected lung cancer: when you should refer' and 'Tackling late diagnosis of cancer';
- 'Direct access to diagnostic tests for cancer: best practice referral pathways for general practitioners';
- Your CCG may have a GP cancer lead who can give you further information relating to your area.

**3 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 – there are separate briefing sheets for nurses and for practice teams. Prepare for more patients coming to your practice as a result of the campaign.

### Find out more

- Visit [naedi.org/beclearoncancer/lung](http://naedi.org/beclearoncancer/lung) for more information for health professionals
- The public-facing website for Be Clear on Cancer is [nhs.uk/lungcancer](http://nhs.uk/lungcancer)