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**Coughing
for 3 weeks?**

**Get out of
breath easily?**

Respiratory symptoms campaign

14 July to 16 October 2016

In July 2016, [Public Health England](#) will be launching a national awareness campaign focusing on the symptoms of a persistent cough and inappropriate breathlessness, to encourage people with these symptoms to go to their GP.

Why run a respiratory symptoms awareness campaign?

A persistent cough or inappropriate breathlessness during everyday activities such as vacuuming or mowing the lawn could be symptoms of a variety of conditions, including cancer, chronic obstructive pulmonary disease (COPD) and, in the case of breathlessness, heart disease. Diagnosing lung and heart disease early makes them more treatable. This can help tackle premature mortality – for example, around 68% of lung cancer patients in England are diagnosed at a late stage¹, when curative treatment is not possible.

Earlier diagnosis can also help with the management of some conditions, such as COPD, and thereby improve the quality of life for people living with them. The high incidence of and premature mortality from lung and heart disease make it important to encourage people with relevant symptoms to seek help promptly.



Supported by the Royal College of General Practitioners

Who is the campaign aimed at?

The campaign is aimed at men and women aged 50 and over, as well as their family and friends. People over 50 are most at risk of having undiagnosed respiratory illness and make up 97% of lung cancer diagnoses².

What are the main messages of the campaign?

The key messages for the public are:

- If you get out of breath doing things you used to be able to do, it could be a sign of lung or heart disease, or even cancer. Finding it early makes it more treatable. So don't ignore it, tell your doctor.
- If you've had a cough for three weeks or more, it could be a sign of lung disease, including cancer. Finding it early makes it more treatable. So don't ignore it, tell your doctor.

When will campaign activity be running?

The campaign will run for 14 weeks from 14 July. Activity will include television, radio, press, online and out-of-home advertising, and face-to-face events in shopping centres.

Has the respiratory symptoms campaign run before?

The lung cancer campaign went national across England for the first time in 2012, with the symptom of a cough for three weeks, and has been repeated twice – in 2013 and in 2014. A breathlessness campaign as a symptom of lung and heart disease ran at a local level in 2014 and at regional level via television in 2015. Combining the two campaigns aims to achieve a greater impact by using the two related symptom messages under the already known and trusted [Be Clear on Cancer](#) brand.

¹ PHE Cancer Analysis System 'Percentage of cases diagnosed in 2013 in England, by stage'

² National Cancer Registration & Analysis Service data based on 2010-2014 annual average

Key facts:

- **Over 1 million people are diagnosed with COPD, and an estimated further 1 million people are living with undiagnosed COPD³. COPD causes around 115,000 emergency admissions and around 24,000 deaths each year. 10% of emergency admissions for COPD are in people whose condition is undiagnosed.**
- **Around 36,500 people are diagnosed with lung cancer each year and around 28,400 people die from the disease each year⁴.**
- **Over 70,000 people died from heart disease in 2014.**

Is there any evidence that Be Clear on Cancer campaigns work?

Results to date indicate that Be Clear on Cancer is changing levels of public awareness. There are also early indications that clinical outcomes are improving. These are some of the statistically significant findings following the first national lung cancer campaign in 2012, comparing figures with the same period in the previous year:

- Around 700 more people were diagnosed with lung cancer.
- Around 400 more people had their cancer diagnosed at an early stage.
- Around 300 additional patients had surgery as a first treatment of diagnosed lung cancer, giving them the best chance of prolonged survival.

Research on the breathlessness campaign showed that there were significant increases in spontaneous knowledge that breathlessness could be a sign of:

- lung disease – up from 50% pre-campaign to 60% post-campaign.
- heart disease – up from 42% pre-campaign to 52% post-campaign.

Potential impact of the campaign on the NHS

- The first national lung cancer campaign saw an increase in GP attendance. Analysis of data from 486 GP practices showed that there was around a 63% increase in the number of patients aged 50+ presenting with a cough when comparing May-June 2012 with the same period in 2011 - the equivalent of around three additional visits per practice, per week.
- The first national lung cancer campaign also saw an increase of 32% in two-week referrals for suspected lung cancer in the campaign months, compared with the same period in 2011. Two-week referrals for suspected lung cancer peaked in July, approximately two months after campaign activity started, but the number was still within the limits of what was expected – it equated to approximately 1.5 extra referrals per hospital, per week.
- The second national lung cancer campaign saw a 30% increase in referrals for suspected lung cancer in July-September 2013 compared with the same period in 2011.
- The third national lung cancer campaign saw an 8% increase in the number of referrals for suspected lung cancer from March-May 2014 compared with the same period in 2013, with trends suggesting a small peak during the campaign months in March and April.

- As the breathlessness campaign has only run at a regional level to date, we do not have national level data. However, qualitative research carried out with GPs in the regional pilot area following the campaign reported that while they were unsure whether they had seen an increase in presentations for breathlessness, when retrospectively looking at the campaign materials they could recall patients using the same language.

Things you can do:

Brief colleagues and cascade information

- This briefing sheet is being sent to a range of managers and others in primary, secondary and community health services. Please think about everyone in your area that would benefit from this information and work with them to plan how the potential impact will be managed locally.
- Encourage relevant colleagues to use the advertising as a prompt for discussions with those most at risk.

Plan for increases in demand

- Patients who have previously ignored symptoms may be prompted to visit their doctor. Share this briefing and the [campaign announcement letter](#) to ensure that services are ready to respond.
- There might be increases in urgent GP referrals, and requests for X-rays, CT scans, echocardiograms and other services. However, the impact will vary by trust and will be influenced by the size and age profile of local populations. Trusts may find it helpful to look back at their activity levels during previous Be Clear on Cancer campaigns to identify trends and anticipate the possible impact.

Make the most of available resources

- [NICE referral guideline](#) for suspected cancer and [summaries of the referral guideline](#)
- NICE guidelines for [cardiovascular conditions](#) and [respiratory conditions](#)
- [Evaluation of the NHS breathlessness pilots – NHS England report](#) and [Diagnosing breathlessness](#)
- Display public-facing respiratory symptoms materials such as leaflets, posters and symptom cards. These will be available free of charge via the [PHE Campaign Resource Centre](#) or via the orderline on 0300 123 1002.

Visit: [The Be Clear on Cancer website](#) and [PHE Campaign Resource Centre](#) for more information and resources for healthcare professionals

Email: partnerships@phe.gov.uk

³ Data calculated by PHE Knowledge and Intelligence Team East based on 2014-15 Quality and Outcomes Framework

⁴ Incidence and mortality data supplied by National Cancer Registration & Analysis Service