Welcome to the October Public Health Information Briefing.

The purpose of our monthly Briefings is to provide healthcare commissioners and planners with intelligence about population health in the City.

Bowel Cancer Screening in Southampton

About one in 20 people in the UK will develop bowel cancer during their lifetime. Bowel cancer is the second biggest cause of cancer deaths in the UK with more than 16,000 people dying from the disease every year. In Southampton bowel cancer accounts for an average of 57 deaths per year.

Crucially, spotting the disease at an early stage means treatment is more likely to be successful – more than nine in 10 people survive the disease for more than five years if it is diagnosed at the earliest stage.

The NHS Bowel Cancer Screening Program started being rolled out in July 2006 and achieved nationwide coverage by 2010. In Southampton, bowel cancer screening commenced in 2008 for men and women aged 60 to 69 years with an extension in age to 74 years in 2010. By 2025, it’s estimated that bowel cancer screening could save more than 2,000 lives each year in the UK.

The chart shows how uptake rates in Southampton compare against the authorities considered most similar1 according to their socio-demographic characteristics.

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1 Office for National Statistics 2001 Classification of Areas see www.nchod.nhs.uk for further details
GPs are not directly involved in the delivery of the NHS Bowel Cancer Screening Program but they are notified when invitations for bowel cancer screening are being sent out and on their patients that fail to take up the offer of screening. They also receive a copy of the results letters sent to their patients. However, looking at uptake rates for bowel cancer screening by GP practice is one way of assessing how well the program is working amongst different populations across the City. Uptake rates vary from 65% in the highest practice in the City to 33% in the lowest. The chart below shows that uptake rates are related to deprivation; practices with higher deprivation scores tend to experience lower uptake rates (the $R^2$ value of 0.22 indicates that 22% of the variation in uptake is explained by deprivation).

If GPs are interested in knowing the uptake rates amongst their practice population please contact us using the details at the end of the newsletter.

A social marketing campaign has been carried out in some of the most deprived communities across Southampton, Hampshire, Isle of Wight and Portsmouth (SHIP) to raise awareness of bowel cancer screening and increase uptake. An early evaluation of the campaign has shown that among those who had seen the campaign, knowledge and understanding of the disease and support available improved. It is still too early to tell from routine data whether the campaign has improved screening uptake and earlier presentation to primary care, due to the time lag in reporting. This data will become available over the coming months.

During 2010/11 nearly 11% of those with a positive screening result were subsequently detected as having bowel cancer and a further 31% were found to have high or intermediate risk polyps (which may develop into cancer over time) – that is 74 Southampton residents who may not have been diagnosed so early without the screening programme in place. Nationally, the rate of diagnosis of bowel cancer rose by more than 12% in the 60-69 age group between 2006 and 2008\(^2\).

Implications for provision of care in the City

A recent report by the Men’s Health Forum[^1] gave recommendations for improving uptake of bowel cancer screening amongst men. The main one of these was centred around the high value placed on the GP and primary care staff in informing personal decision-making in health matters. The Forum therefore recommends the development of interventions in which the patient’s GP is involved in the invitation to participate in the screening program. They do acknowledge that this approach does have its problems. For obvious reasons of informed choice, GPs and other primary care staff cannot simply “tell” men to take part and of course primary care services are often limited for time and resources. However, there are some simple steps that GPs could take such as downloading posters encouraging uptake from the screening program website [http://www.cancerscreening.nhs.uk/bowel/publications/nhsbcsposters.html](http://www.cancerscreening.nhs.uk/bowel/publications/nhsbcs-posters.html)

Additionally, Bowel Cancer UK and the Royal College of General Practitioners (RCGP) have developed a new bowel cancer resource pack for GPs to raise awareness of bowel cancer symptoms. The pack also includes urgent and non-urgent referral guidelines. Packs with tailored regional data for all SHAs are available to direct from Bowel Cancer UK – telephone 020 7381 9711 or email Grant Imlach grant.imlach@bowelcanceruk.org.uk

The importance of GP endorsement has been confirmed by a recent study in the British Journal of Cancer which found at least 10 per cent more people who are sent bowel screening kits through the post are likely to do the test if sent a doctor’s letter and leaflet – for more details see [http://info.cancerresearchuk.org/news/archive/pressrelease/2011-10-08-gp-letter-screening-kit-improves-uptake](http://info.cancerresearchuk.org/news/archive/pressrelease/2011-10-08-gp-letter-screening-kit-improves-uptake)

At the end of January 2012 a national campaign around the early detection of bowel cancer will be launched. The campaign aims to make people more aware of the early signs of cancer and to give them more confidence to discuss it with their GP. It will target people aged over 55 years through television, national press, magazines and local radio. Two pilot programmes showed the following:

- 48% increase in attendance to GP practices from patients with relevant symptoms
- 32% increase over a 6 month period in 2 week waits/urgent referrals
- 28.5% increase in colonoscopies

Nationally the colonoscopy growth rate is 10% per year and it is estimated by the Department of Health (DH) that the campaign will add 15,000 additional colonoscopies. For a large Trust this equates to around 220 colonoscopies a year or 4 sessions a week. University Hospital Southampton Foundation Trust has been alerted.


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**implications for provision of care in the City**

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For further information visit [www.southamptonhealth.nhs.uk/aboutus/publichealth/hi](http://www.southamptonhealth.nhs.uk/aboutus/publichealth/hi) or contact the team:

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