



Great Britain: symptom awareness and attitudes to lung cancer Findings from a global study

Overview

Lung cancer is the most common cancer in the world. Around 1.8 million people are diagnosed with lung cancer each year, and around 1.6 million people die from it.¹ In the UK, there were an estimated 40,382 lung cancer cases and an estimated 35,581 lung cancer deaths in 2012.² The Global Lung Cancer Coalition (GLCC) is an alliance of patient organisations committed to increasing awareness and understanding of lung cancer and campaigning to improve lung cancer outcomes for all.

The GLCC's Patient Charter asserts the right of all lung cancer patients to: be treated with dignity and respect; be free of blame and stigma for having the disease and to have their disease de-stigmatised; have access to quality health care; informed self-determination; physical and mental integrity; and confidentiality and privacy.

In 2017, the GLCC commissioned a multi-national study to understand attitudes towards lung cancer and levels of symptom awareness among the public. The study was undertaken in 25 countries: Argentina, Australia, Brazil, Bulgaria, Canada, Denmark, Egypt, France, Germany, Great Britain, Republic of Ireland, Israel, Italy, Japan, Mexico, Netherlands, Norway, Portugal, Russia, Slovenia, Spain, Sweden, Switzerland, Turkey and the USA. This data pack also sets out the key findings of two previous multi-national studies carried out by Ipsos Mori on behalf of the GLCC in 2010 on perceptions of lung cancer and in 2013 on symptom awareness.

Key findings

Symptom recognition

- One in five people (21%) in UK were unable to name any symptoms of lung cancer. Globally, four out of ten people (42%) were unable to name any symptoms of lung cancer
- On average, people in the UK could only name two symptoms of lung cancer
- The three most commonly named symptoms were a cough (62%), shortness of breath (55%) and coughing up more spit or phlegm (21%)
- In 2013 the three most frequently mentioned symptoms of lung cancer in the UK were breathlessness (46%), a cough (43%) and coughing blood (23%)

Attitudes towards lung cancer

- One in four (25%) people in the UK agreed that they have less sympathy for people with lung cancer than other forms of cancer. Globally, one in five (21%) people agreed that they have less sympathy for people with lung cancer than other forms of cancer
- This figure is unchanged since 2010 when one in five (25%) of people agreed that they have less sympathy for people with lung cancer than other forms of cancer
- Men in the UK are generally less sympathetic than women towards people with lung cancer, and younger people are less sympathetic than older people

The GLCC is calling for global action to:

- Increase recognition of lung cancer symptoms through public awareness campaigns
- Improve public education and understanding around lung cancer and its causes
- Reduce stigma around lung cancer so that people are not discouraged from reporting symptoms early



Methodology

The GLCC commissioned market research agency Populus to undertake an online survey of adults across 25 countries. The survey samples included at least 1,000 adults (per country) and data was weighted using age, gender and region to produce a representative sample in each country. Respondents were told that: “Lung cancer is mainly caused by smoking cigarettes and other tobacco products” and asked to what extent they agreed with the statement: “I have less sympathy for people with lung cancer than for other types of cancer. They were then also asked to name as many lung cancer symptoms as they could think of unprompted.

Awareness of lung cancer symptoms

Raising awareness of lung cancer symptoms is vital because treatment is more likely to be successful if lung cancer is diagnosed early. Respondents to the survey were asked to name as many symptoms of lung cancer as they could think of.

The study found that symptom awareness could be improved. Almost one in five people (21%) were unable to name any symptoms at all. The most commonly named symptom of lung cancer was a cough (62%), followed by shortness of breath (55%) and coughing up more spit or phlegm (21%). In 2013 the three most frequently mentioned symptoms of lung cancer in the UK were breathlessness (46%), a cough (43%) and coughing blood (23%).

Table 1. Most commonly named lung cancer symptoms, 2017

	Total	Male	Female	18-24	25-34	35-44	45-54	55+
Cough	62%	54%	70%	57%	50%	57%	61%	71%
Shortness of breath	55%	53%	56%	54%	50%	44%	55%	63%
Coughing up more spit or phlegm	21%	21%	22%	28%	26%	18%	16%	21%
Chest pain	12%	12%	12%	14%	10%	11%	10%	15%
Tiredness	10%	9%	11%	8%	10%	3%	10%	14%
Weight loss/loss of appetite	10%	8%	12%	5%	5%	5%	11%	16%
Repeated chest infections	1%	2%	1%	1%	1%	2%	3%	1%
Loss of voice without sore throat	1%	1%	2%	1%	-	1%	1%	2%
Other symptoms	14%	12%	16%	21%	9%	15%	15%	14%
Not a symptom	7%	7%	6%	10%	7%	6%	5%	7%
Don't know/ I am not aware of any symptoms	21%	24%	16%	21%	30%	22%	20%	15%

On average, people could only name two symptoms of lung cancer. Women were, on average, slightly better than men at naming symptoms, as shown in the chart below:

Table 2. Average number of lung cancer symptoms named by age and gender, 2017

	Total	Male	Female	18-24	25-34	35-44	45-54	55+
Average number of symptoms mentioned (all respondents)	1.99	1.83	2.15	2.11	1.72	1.66	1.92	2.26



Attitudes to lung cancer

More than eight out of ten cases of lung cancer are linked to smoking³, creating stigma around the disease. This is a problem not only because thousands of people develop lung cancer who have never smoked, but also because people who have smoked may feel guilty and delay talking to their doctor about potential symptoms.

The GLCC believes that everyone - no matter what the cause of their cancer - deserves to have high quality treatment and care. No one deserves to have lung cancer. If lung cancer can be picked up early then it improves people's chance of successful treatment and survival.

To understand attitudes to lung cancer, participants were told that: *“Lung cancer is mainly caused by smoking cigarettes and other tobacco products”*. They were then asked whether or not, bearing this in mind, they have less sympathy for people with lung cancer than other types of cancer.

In all the countries surveyed, the majority of adults rejected the idea that they are less sympathetic to people with lung cancer than other cancers. However, on average across the globe, one in five (21%) people agreed that they have less sympathy for people with lung cancer than other forms of cancer. In the UK, one in four (25%) people agreed that they have less sympathy for people with lung cancer than other forms of cancer, the same proportion as in 2010.

Table 3. Lung cancer is mainly caused by smoking cigarettes and other tobacco products. Bearing this in mind, to what extent do you agree or disagree with the following statement: “I have less sympathy for people with lung cancer than for people with other types of cancer”.

Great Britain	2010	2017
Net: Agree	25%	25%
Net: Disagree	54%	48%
Strongly agree	6%	6%
Tend to agree	19%	18%
Tend to disagree	32%	22%
Strongly disagree	22%	23%

Men in the UK are generally less sympathetic than women towards people with lung cancer, and younger people are less sympathetic than older people.

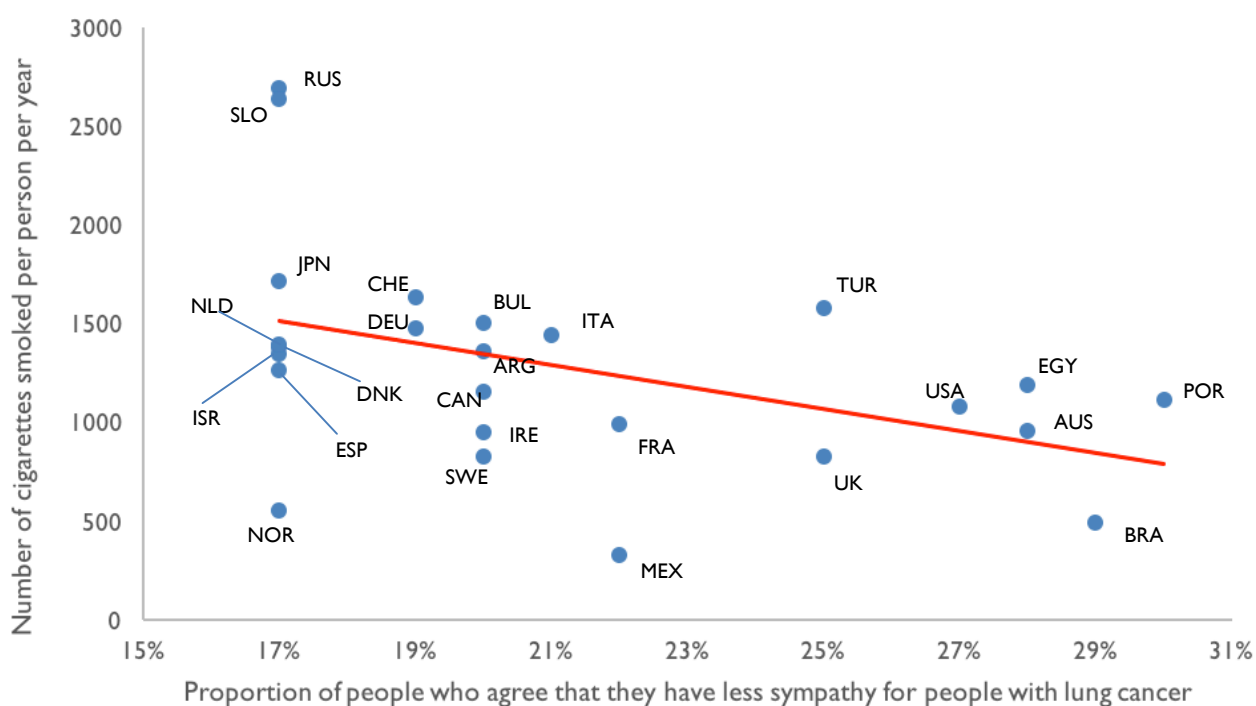


Table 4. Attitudes to lung cancer by age and gender, 2017

	Total	Men	Women	18 – 24	25 – 34	35 - 44	45 - 54	55+
Net: Agree	25%	30%	20%	36%	26%	24%	24%	22%
Net: Disagree	48%	43%	54%	47%	45%	47%	54%	48%
Strongly agree	6%	8%	5%	8%	6%	6%	7%	6%
Tend to agree	18%	22%	15%	28%	20%	17%	17%	16%
Neither agree nor disagree	27%	27%	27%	17%	29%	29%	22%	30%
Tend to disagree	23%	21%	25%	21%	25%	20%	25%	23%
Strongly disagree	26%	22%	29%	25%	21%	27%	29%	25%

There is a statistically significant correlation between those countries with lower cigarette consumption⁴ and higher proportions of people agreeing that they have less sympathy for people with lung cancer.

Chart 1. Number of cigarettes smoked versus sympathy for people with lung cancer, 2017



More information

Established in 2001, the GLCC comprises 37 non-government patient organisations from Argentina, Australia, Brazil, Bulgaria, Canada, Denmark, Egypt, France, Germany, Ireland, Israel, Italy, Japan, Mexico, Netherlands, Norway, Peru, Portugal, Russia, Slovenia, Spain, Sweden, Switzerland, Turkey, UK and US.

The UK members of the GLCC are the British Lung Foundation, the National Lung Cancer Forum for Nurses and the Roy Castle Lung Cancer Foundation.



GLOBAL LUNG CANCER
COALITION

The GLCC promotes global understanding of lung cancer and the right of patients to effective early detection, better treatment and supportive care. By serving as the international voice of lung cancer patients, the GLCC is committed to improving disease outcomes for all.

For more information about this study and the work of the GLCC please visit: www.lungcancercoalition.org or email our secretariat at: glcc@roycastle.org

Populus is a founder member of the British Polling Council and abides by its rules. Further information at www.populus.co.uk.

REFERENCES

- ¹ World Health Organization, Cancer Fact sheet, February 2017
- ² Global Lung Cancer Coalition, Atlas, October 2017
- ³ The Tobacco Atlas, Smoking's death toll, accessed September 2017
- ⁴ Euromonitor, International Global Market Information, 2014