Correspondence

Television soap opera and the NHS cervical screening programme: follow-up data

Sirs,

We would like to report follow-up data from our published study, evaluating the impact of a television soap opera on the NHS Cervical Screening Programme in the North West of England, and some national data.

As part of a long-term follow-up, we examined the medium-term effect of the story-line. We performed a further analysis of women resident in Manchester Health Authority. One hypothesis was that, because we had seen an increase in those women coming ‘on time’ (between 3 and 5 years in line with national recommendations), there would be a decrease in the number of smears over the following year (i.e. women had just brought forward their attendance). We extracted data from the ‘Exeter’ system over a 3 year time period (16 August 1999–5 August 2002) using the same technique as described in the original paper. The story appeared during the year August 2000–August 2001. There was a large increase in smears taken during the year in which the story ran (almost 1700). There was a small decrease (less than 300) when comparing the number of smears in the year before the story (August 1999–August 2000) with the number in the year following the story (August 2001–August 2002) (Table).

However, there have been several local initiatives running concurrently to decrease the rate of unscheduled smears and increase uptake in hard-to-reach groups. We have observed a decrease in unscheduled smears and overdue smears together with an increase in women attending ‘on time’. This would suggest that these initiatives have been effective and their success has masked the fall in the number of smears. This analysis tends to confirm the findings that many women came earlier within the ‘on time’ window and that, as a result, we will see fewer coming from this cohort over the next 3–5 years. There may be a further ‘bulge’ in 3–5 years time as these women re-attend for scheduled smears (and services may choose to plan for this).

Although we expect no overall health benefit in this group of women, the increase we previously reported in women who attended for their first ever smear or after a delay continues to represent a positive long-term benefit of the story-line.

We also wanted to estimate the effect nationally by examining data from one health authority in each TV viewing region. We selected the health authority with the largest eligible screening population in each local TV viewing area. We asked each health authority to provide us with the total number of smears performed over the time period of the story-line (3 April–13 August 2001) and for the comparable period the year previously. We asked Granada for viewing figures.

The median increase in smears nationally was 13 per cent. The proportion of women aged 16–64 who watched Coronation Street varied between 18 per cent in London and 33 per cent in Tyne Tees.

We observed no correlation between viewing figures and increase in smears.

These follow-up data reinforce the potential for soap operas to influence peoples’ behaviour, at least in the short term. The effect on the cervical screening programme highlights the often complex effects of a soap opera story-line. We are looking to work more closely with programme makers to maximize population benefit.

References


Yours faithfully

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Table Total number of smears in each year period August 1999–August 2002

<table>
<thead>
<tr>
<th>Year (August–August)</th>
<th>Number of smears</th>
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<tbody>
<tr>
<td>1999–2000</td>
<td>13 415</td>
</tr>
<tr>
<td>2000–2001</td>
<td>15 108</td>
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<td>2001–2002</td>
<td>13 145</td>
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