



The Royal College of Surgeons of England

Update on National Bowel Cancer Audit

Clinical Effectiveness Unit

Royal College of Surgeons of England

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Outline



- 1. Strengths and weaknesses of NBOCAP**
- 2. Changes over time**
- 3. New for 2013 Annual Report**

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Strengths and weaknesses



Strengths

- Most complete source of clinical information on bowel cancer patients in E&W
 - e.g. Cancer stage
 - ASA grade
 - surgical urgency
 - surgical access
- Case-ascertainment high
 - 86% and improving
- Data completeness of risk-adjustment items high in patients resected
 - but varies between trusts

Strengths and weaknesses



Strengths (cont)

- Linked to HES and PEDW for patient follow-up
 - e.g. stoma reversal
 - unplanned readmissions
- Provides national picture of care and outcomes in E&W
- Provides feedback to trusts & networks
 - quality improvement

Strengths and weaknesses

Weaknesses & future solutions

Weaknesses	Future solutions
Little info on non-surgical treatment e.g. chemo /radiotherapy	Future linkage to the Radiotherapy and Chemotherapy Datasets
Non-resected patients not well described	Redesign Audit dataset & link to existing data
No information collected on patient experience	
End of life care not described	
Data upload is laborious and not clinician-led	Development of Clinician Entry Platform

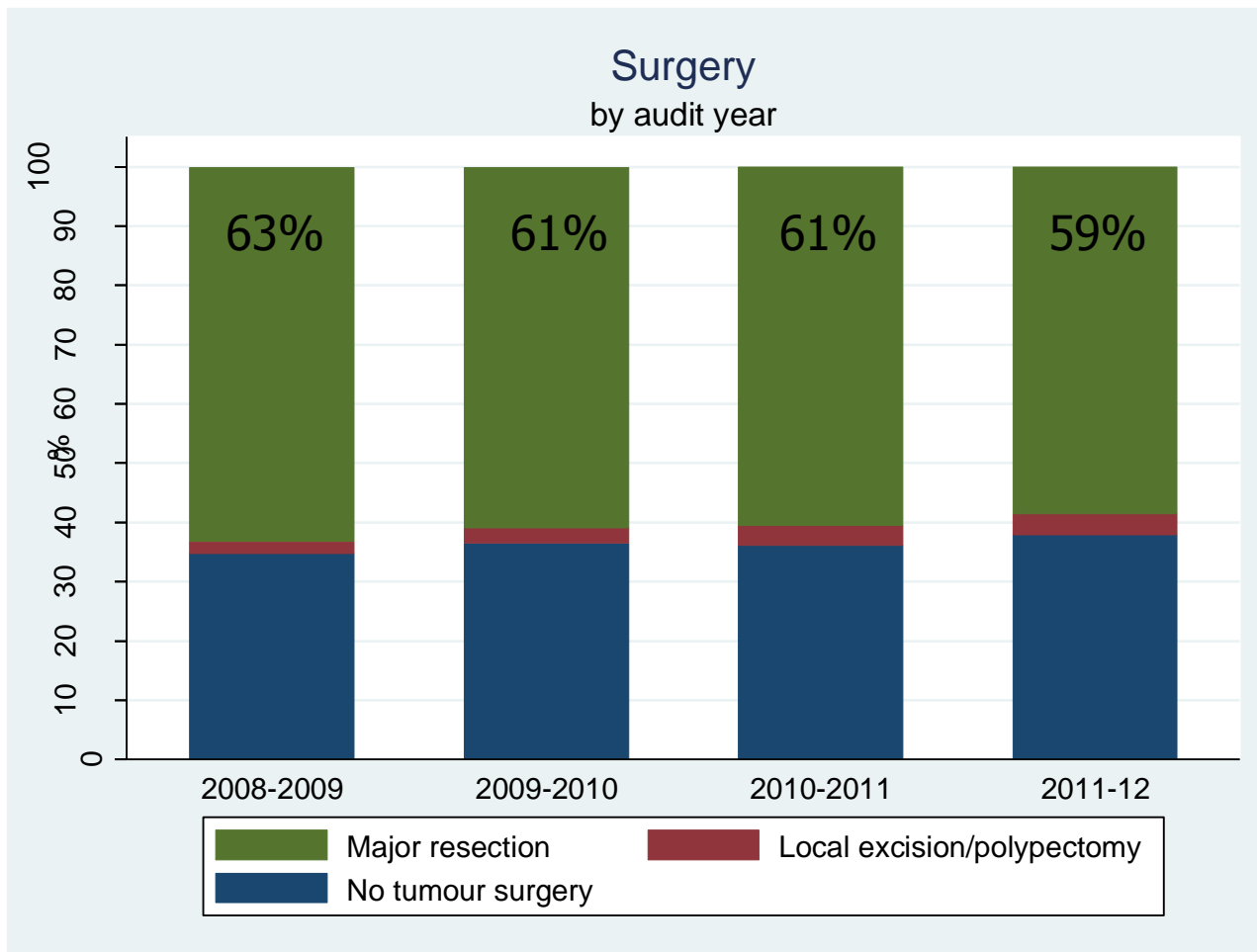
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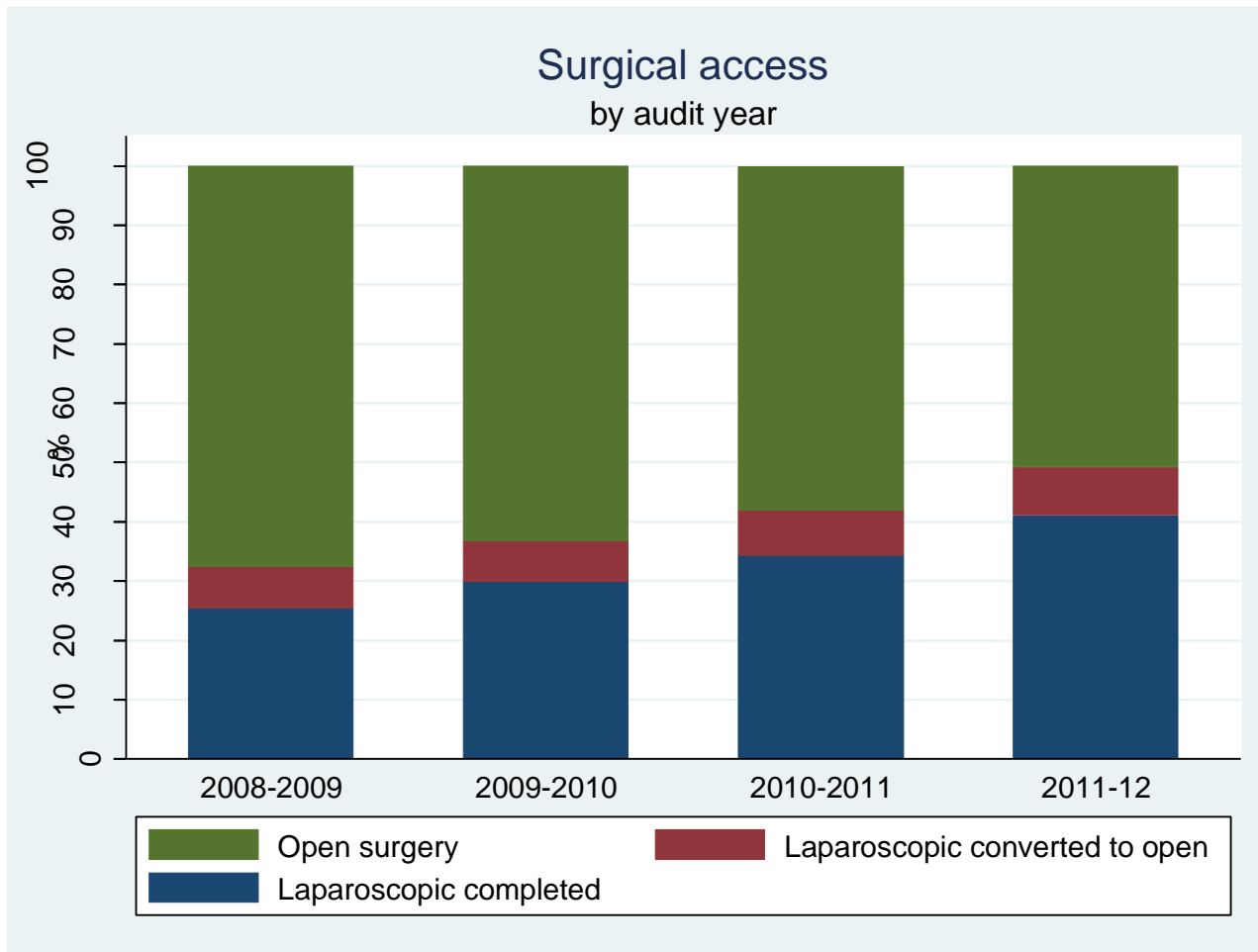
Changes over time

% getting major resection has decreased slightly



Changes over time

Laparoscopic surgery has increased



Changes over time

Postoperative mortality has decreased

	2008-09	2009-10	2010-11	2011-12
Patients undergoing major resection	22,972	27,344	28,422	29,445
Died within 90 days of surgery	876	959	901	784
%	6.1	5.8	5.3	4.5

Changes over time



Postoperative mortality has decreased

- Better selection of patients for major resection?
 - but wider use of local excision / polypectomy
- Wider use of laparoscopic surgery?
- Better perioperative care?
- Something else???

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New for 2013 Annual Report

- Due to be published 1 July 2013
 - More focussed report
 - More feedback to trusts
 - 2-year mortality
 - unplanned readmissions
 - 18-month stoma rate
 - 90-day mortality
 - % getting major resection
 - % getting laparoscopic attempted
 - Also coming this year - surgeon-level outcomes
Separate from annual report
- outlier feedback**

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New for 2013 Annual Report

18-month stoma rate

- Overall 18-month stoma rate **51%**

Rectal cancer patients having major resection 1 Apr 09 – 31 Mar 2011

Audit data linked to HES/PEDW

Procedure	% patients	% getting stoma	% stomas reversed	% with stoma at 18 months
APER	23	100	0	100
Hartmann's	6	100	4	96
AR	68	77	61	30

New for 2013 Annual Report

18-month stoma rate

- Overall 18-month stoma rate **51%**

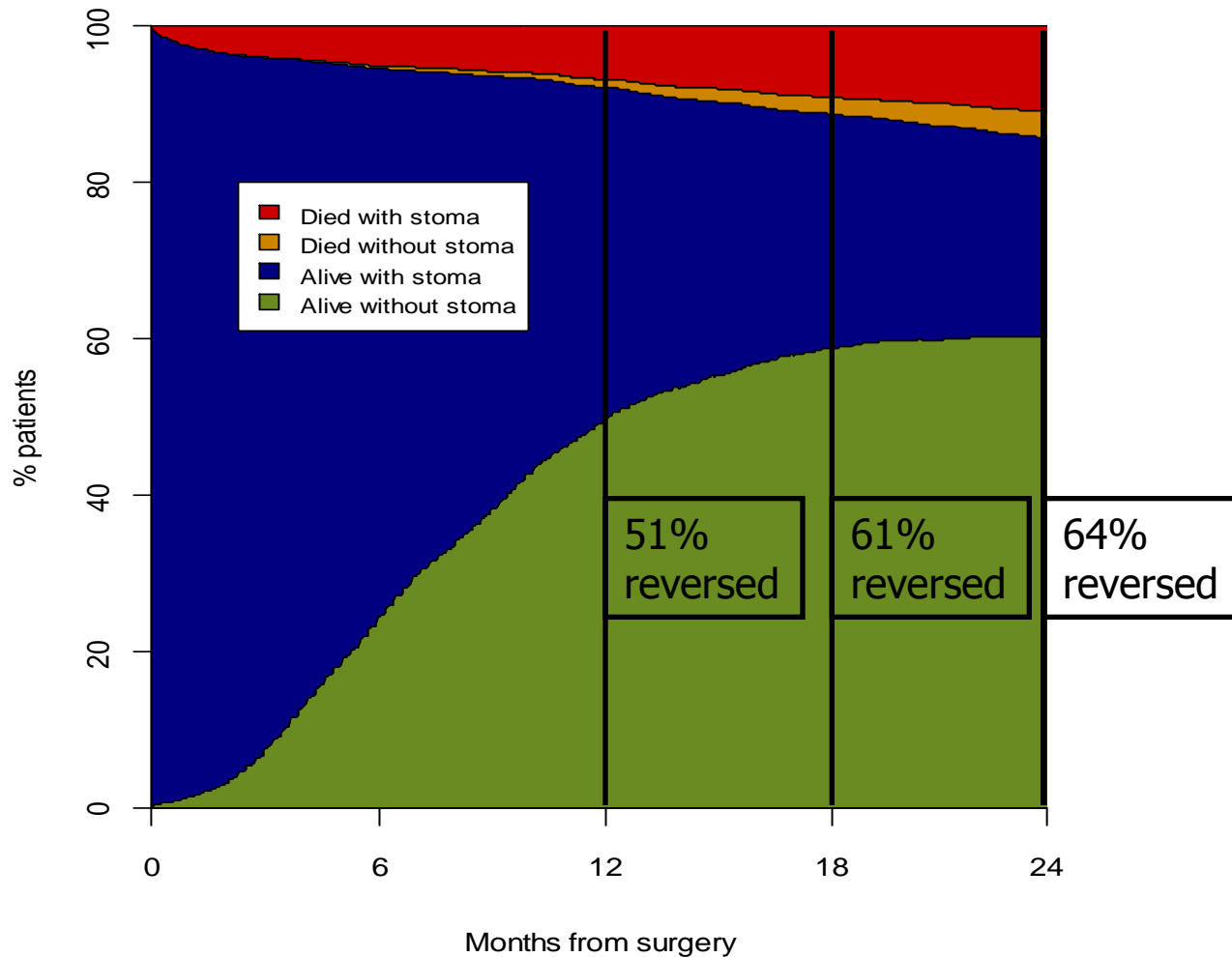
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Stoma reversal / death after AR



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Comments welcomed