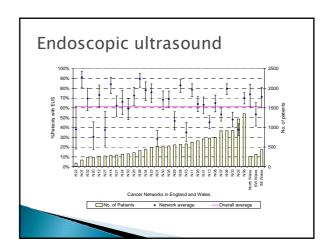




## Overview Prospective Audit includes Patients diagnosed with invasive epithelial O-G cancer in English and Welsh NHS trusts between 1 October 2007 and 30 June 2009 Participation: 152 of 154 English NHS trusts (99%) All 44 cancer centres All Welsh NHS trusts

Data submitted		
Data Record	Number of patients	Case- ascertainment
Tumour details / treatment plan	16,264 Eng	71%
	1,015 Wal	98%
Surgical details (curative intent)	3,803	82%
Post-operative pathology	3,511	
Endoscopic palliative therapy	2,782	
Oncology treatment	3,995 palliative	
	2,830 curative	

# Staging investigations • Before deciding on curative treatment: • All patients with an oesophageal / junctional tumour should have an endoscopic ultrasound

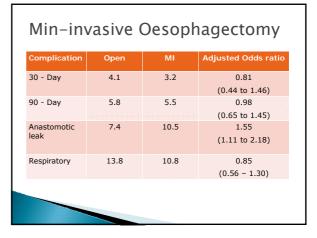


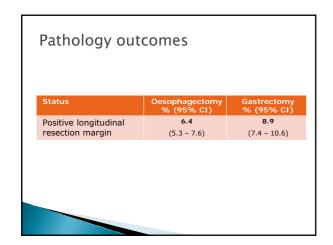
### Curative surgery

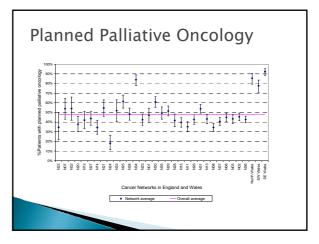
- The minimum number of lymph nodes required for staging the disease (UICC staging system).
  - Oesophagectomies = at least 6 nodes
  - Gastrectomies = at least 15 nodes
- Audit found standards met for: 96% of oesophagectomies 75% of gastrectomies

Outcomes for 2,200 procedures	Rate %	95% CI
30-day	3.8	3.1 - 4.7
90-day	5.7	4.8 - 6.8
Anastomotic leak	8.3	7.2 - 9.6
Chyle leak	3.1	2.4 - 4.0
Respiratory	12.9	11.5 - 14.4

## Outcomes: Gastrectomy Outcomes For 1412 procedures Rate % 95% CI 30-day 4.5 3.4 - 5.7 90-day 6.9 5.6 - 8.3 Anastomotic leak 5.9 4.7 - 7.2 Respiratory 7.3 6.0 - 8.8







### Planned Palliative Oncology

	Performance status				
Age group	0	1	2	3	4
Under 60	82%	78%	62%	47%	27%
60 to 70	83%	75%	57%	27%	12%
70 to 80	72%	60%	46%	16%	8%
80 plus	45%	35%	21%	8%	6%

### Issues for Networks and Trusts

- Compliance with EUS staging investigations
- Monitoring of pathology outcomes
  - · Adequate lymph node excision
  - · Low rates of positive longitudinal margins
- Cautious introduction of MI surgery
  - Follow AUGIS guidelines
- Review planning of palliative oncology

### Next National Audit

- ▶ HQIP commissioning next audit
- Audit will begin in April 2011
- Similar scope to first Audit
  - Include patients with high-grade dysplasia
  - Capture symptoms on referral
- Capture slightly more data on palliative care