

National and local care for patients with thoracic malignancy

ELCC April 2015

Dr Anna Rich

Nottingham University Hospitals, England.



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Disclosure

- Nothing to declare



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Introduction

- ERS taskforce (September 2010-12)
- Quality Management
- Aspiration; to improve the standard of care across Europe
 - Identify inequalities
 - Data collection
 - Minimum and gold standards
 - Account for social and healthcare infrastructure



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Survey of national representatives

- ERS national representatives/TOA/TF
- 37 national representatives
- Questions focussed on;
 - Infra-structure (primary and secondary care)
 - Patient pathway
 - Cost
 - Provision of care
 - Markers of Quality Management (QM)



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Healthcare infrastructure

- Payment; 'free'
 - National insurance
 - or NHS paid for via taxation on income
- Payment;
 - Per visit, up to max amount per year
 - Based on underlying diagnosis
 - Proportion paid for by individual



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Provision of specialist care

- Thoracic surgery
 - General surgeons: Italy, Netherlands
- Radiotherapy
 - Radiation oncologists
- Chemotherapy
 - Oncologists
 - Oncologists/Resp. physicians
 - Respiratory Physicians



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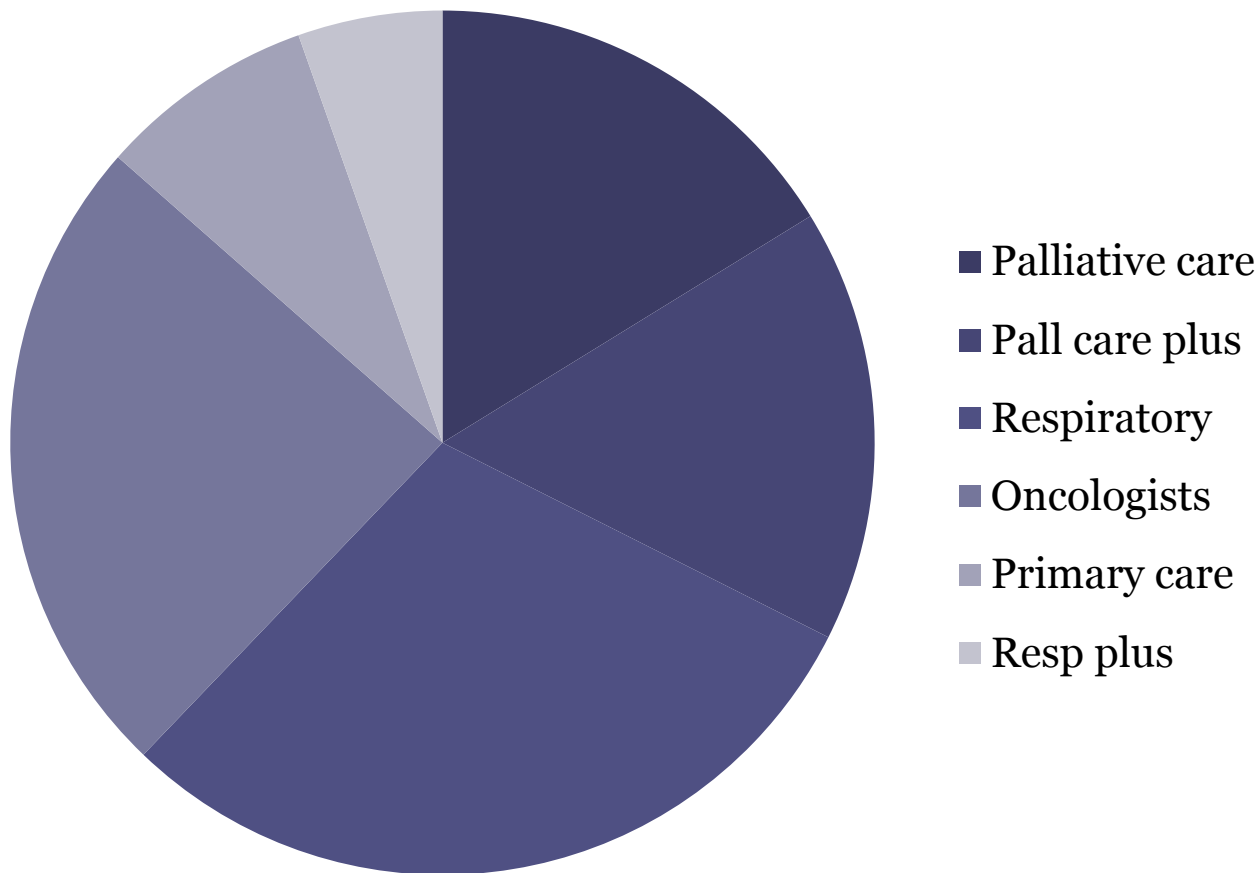
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Palliative care



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Markers of quality management

- Data collection
 - National, Registry, local, none
 - All patients vs histological/cytological only
- UICC Staging system (v7)
 - Universal use
 - Date of introduction
- Guidelines



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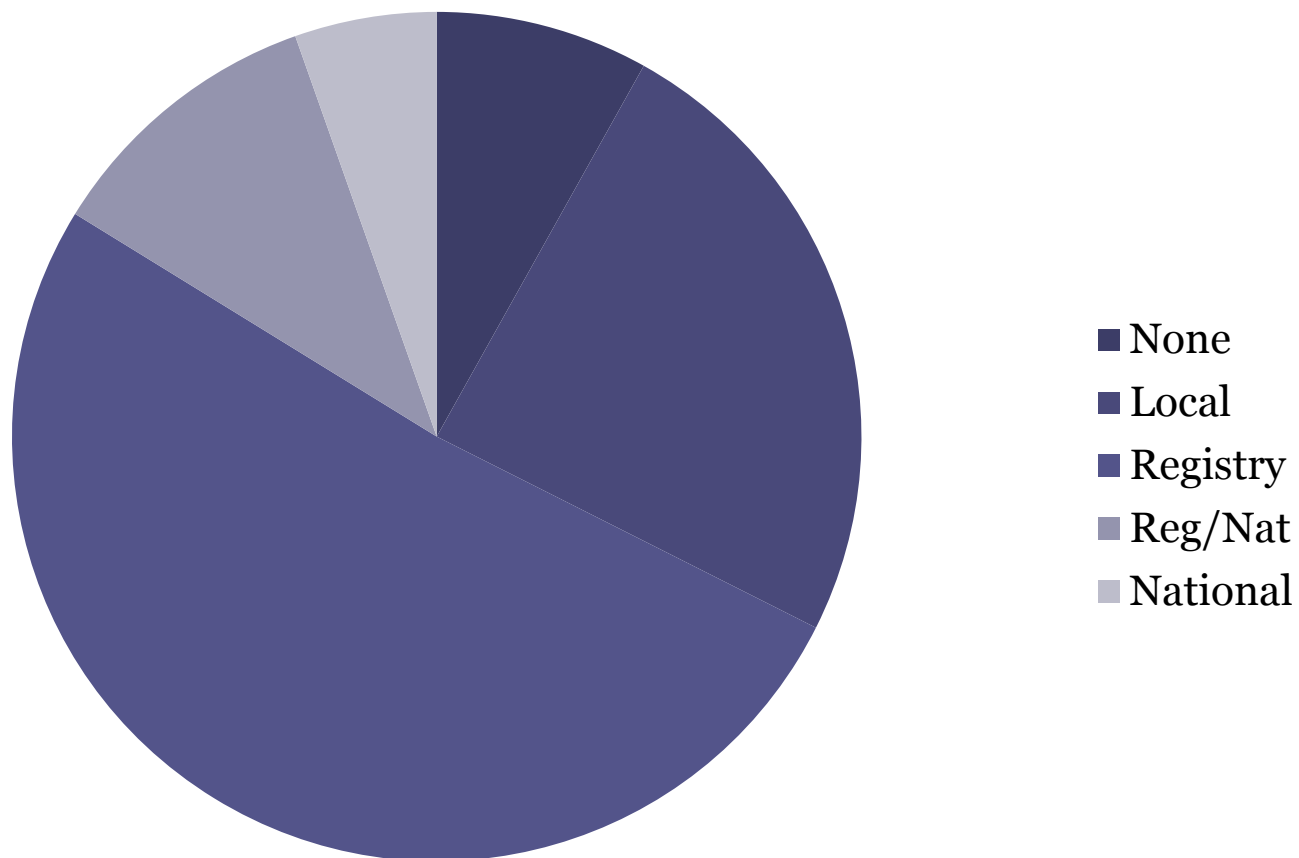
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Data collection



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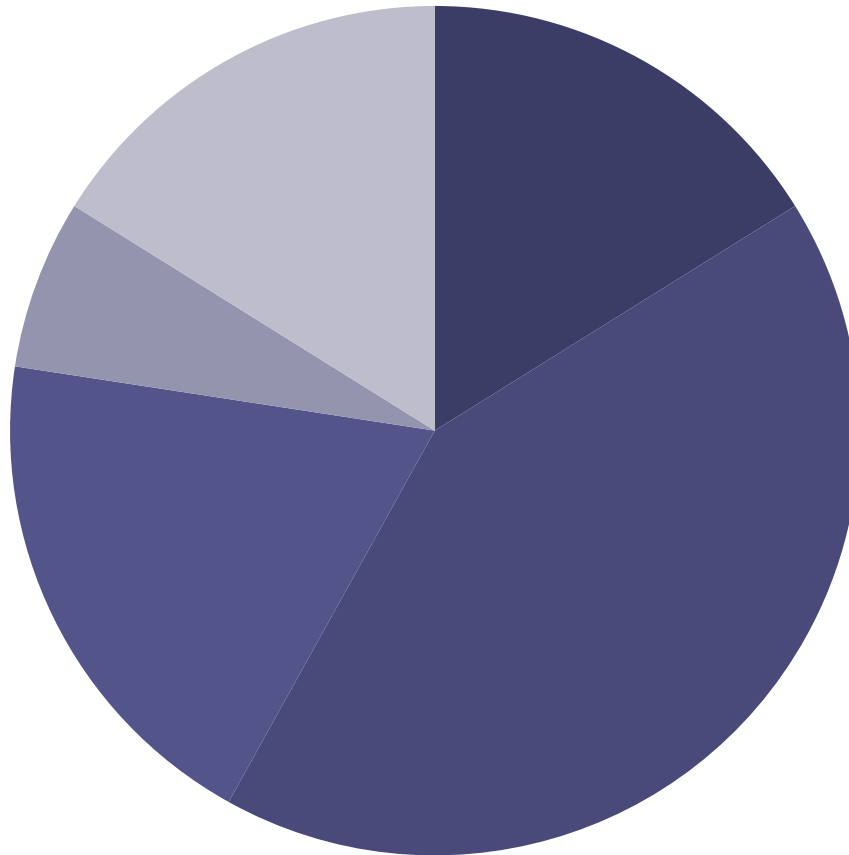
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Staging system (UICC v7)



- Early 2009 (16%)
- January 2010 (42%)
- Mid 2010 (20%)
- Late 2010 (6%)
- Early 2011 (16%)



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Survey of local services

- Based on results from national representatives
- On-line survey open to all physicians involved in the care of individuals with lung cancer
- One response per clinic/hospital
- 350 hospitals across 38 countries



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Results

- Median number new patients/hospital (2010)
 - Albania 500
 - Belarus 400
 - Bulgaria 500 (80,1000)
 - Czech Rep. 485 (210, 760)
 - Romania 400 (165, 650)
 - Slovenia 490 (365, 650)
- Smaller countries often one ‘super’ centre
 - Centralised facilities and ↑ experience

Rich AL et al, *Thorax*, 2011; 66 (12), 1078-1084



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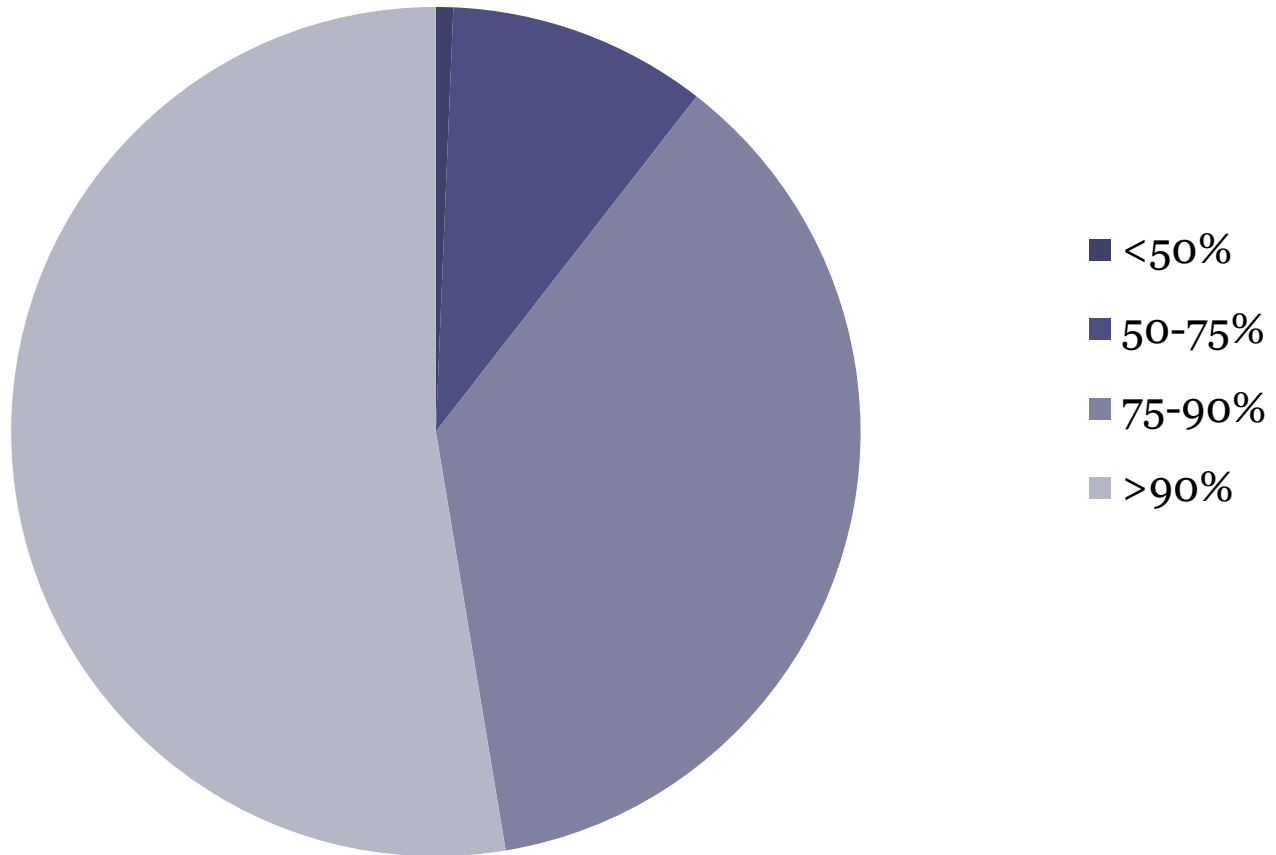
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Histological Confirmation Rate (HCR)



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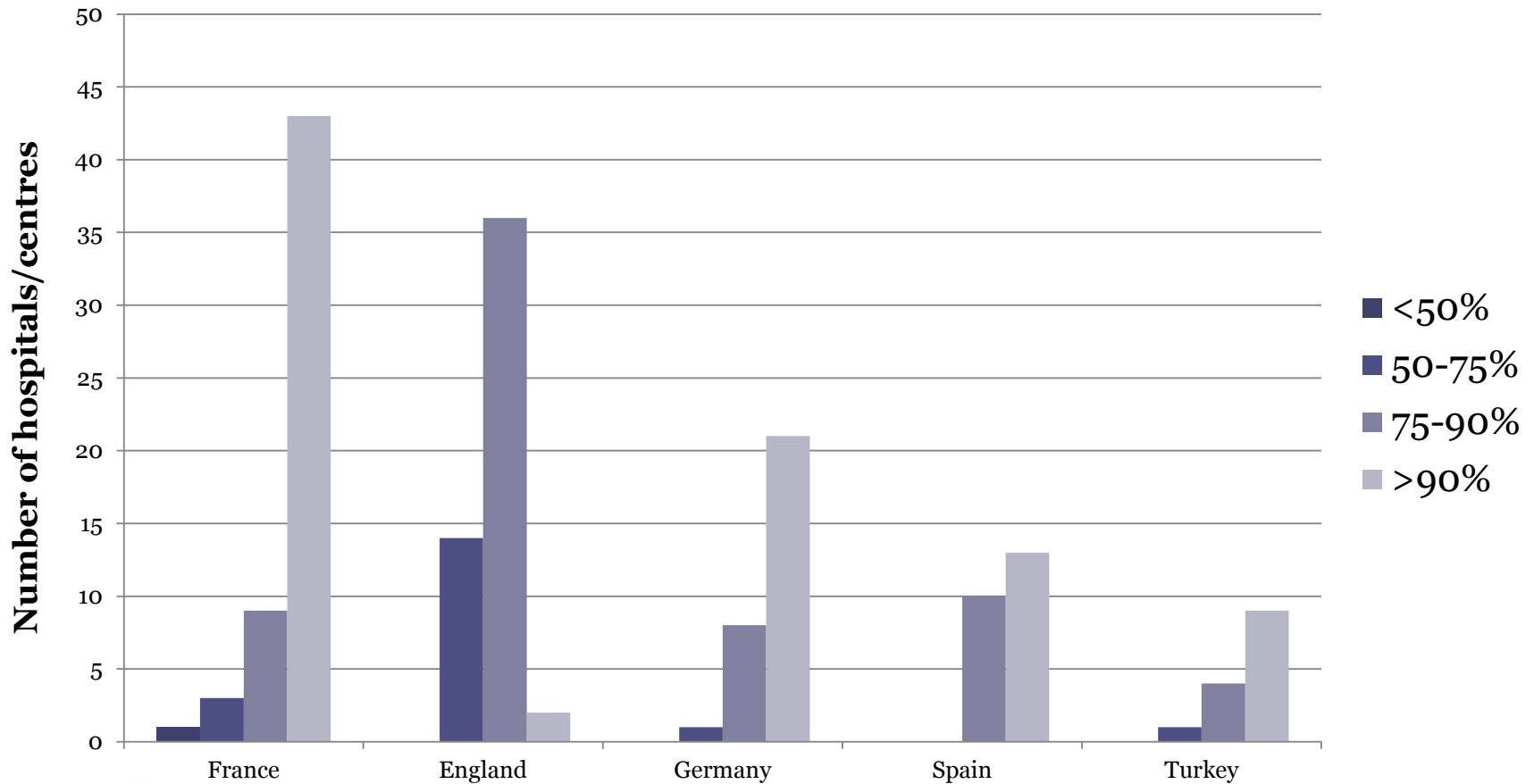
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HCR



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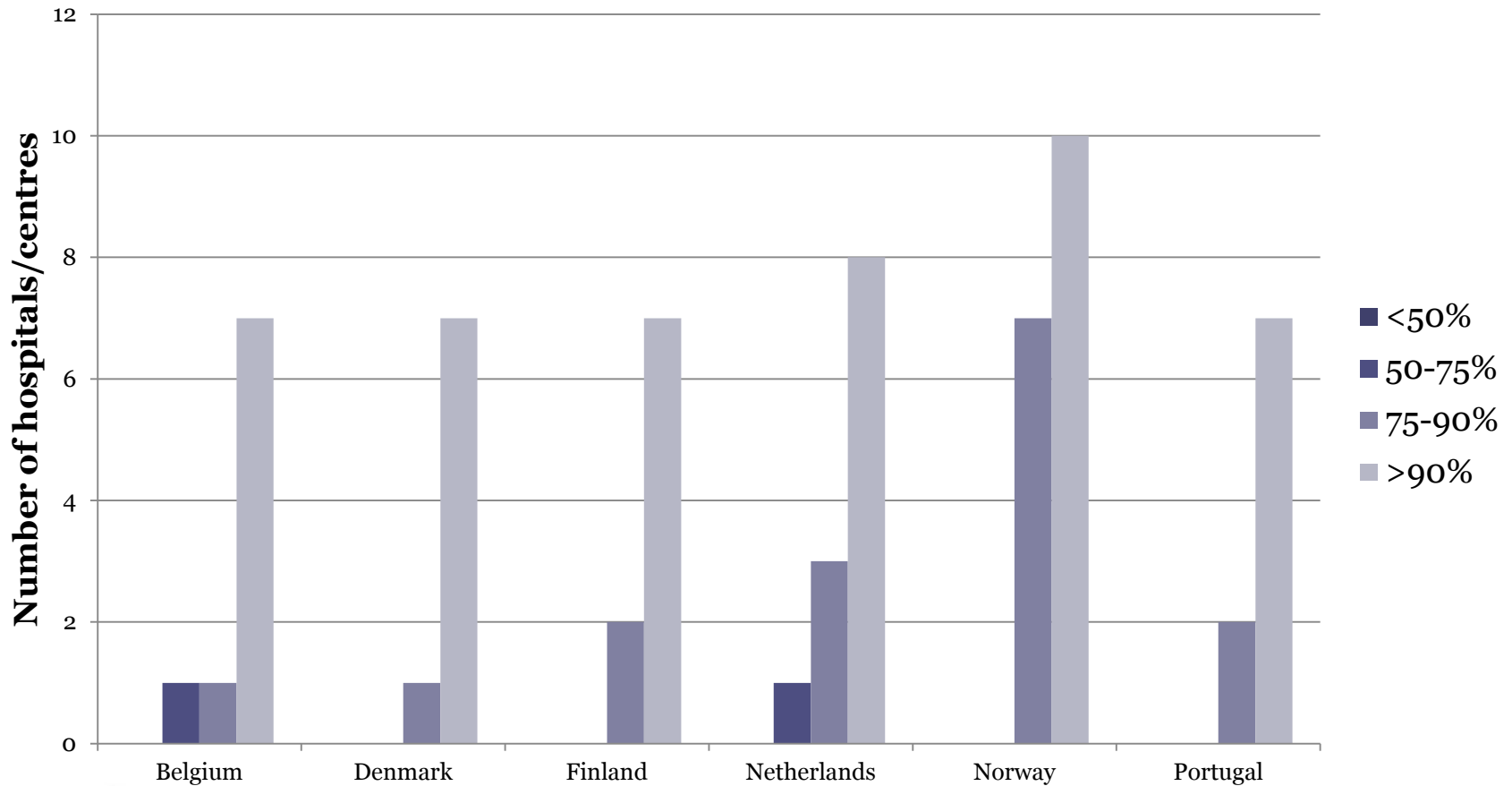
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HCR (2)



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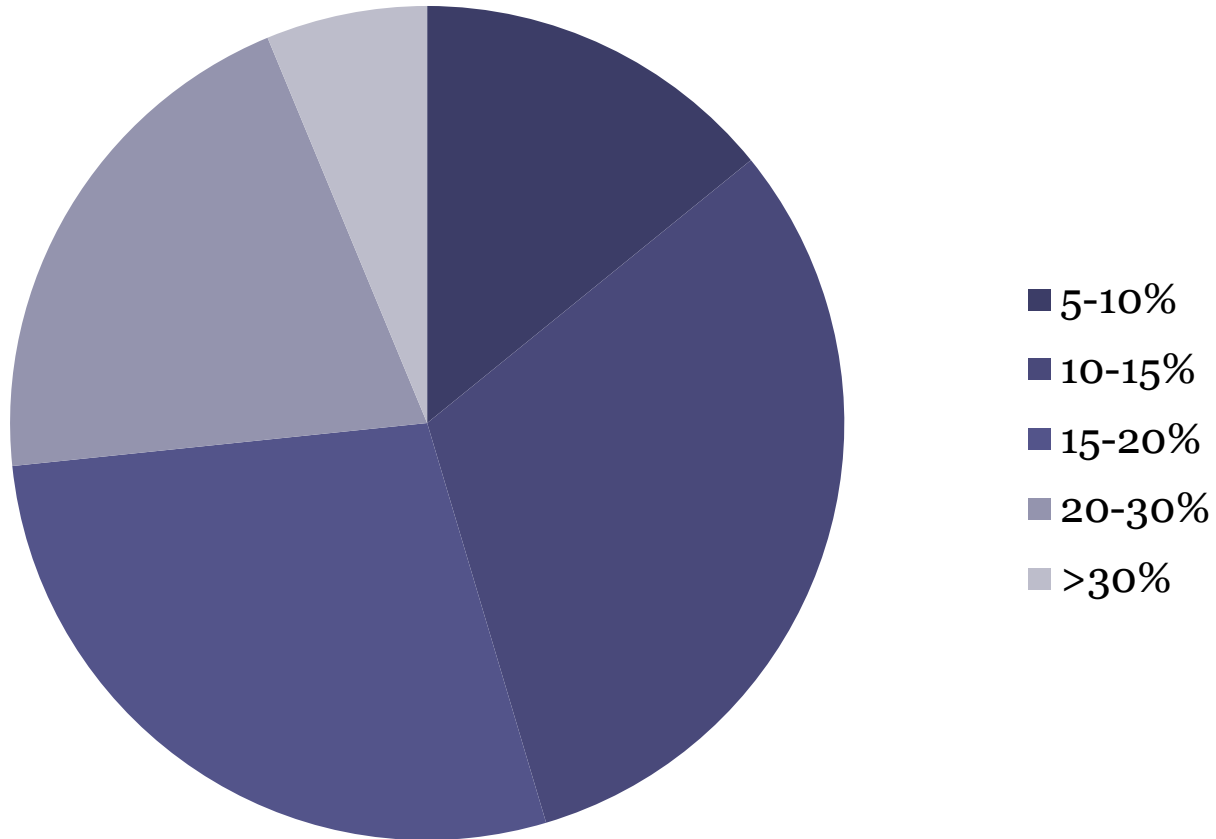
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Surgical resection rate



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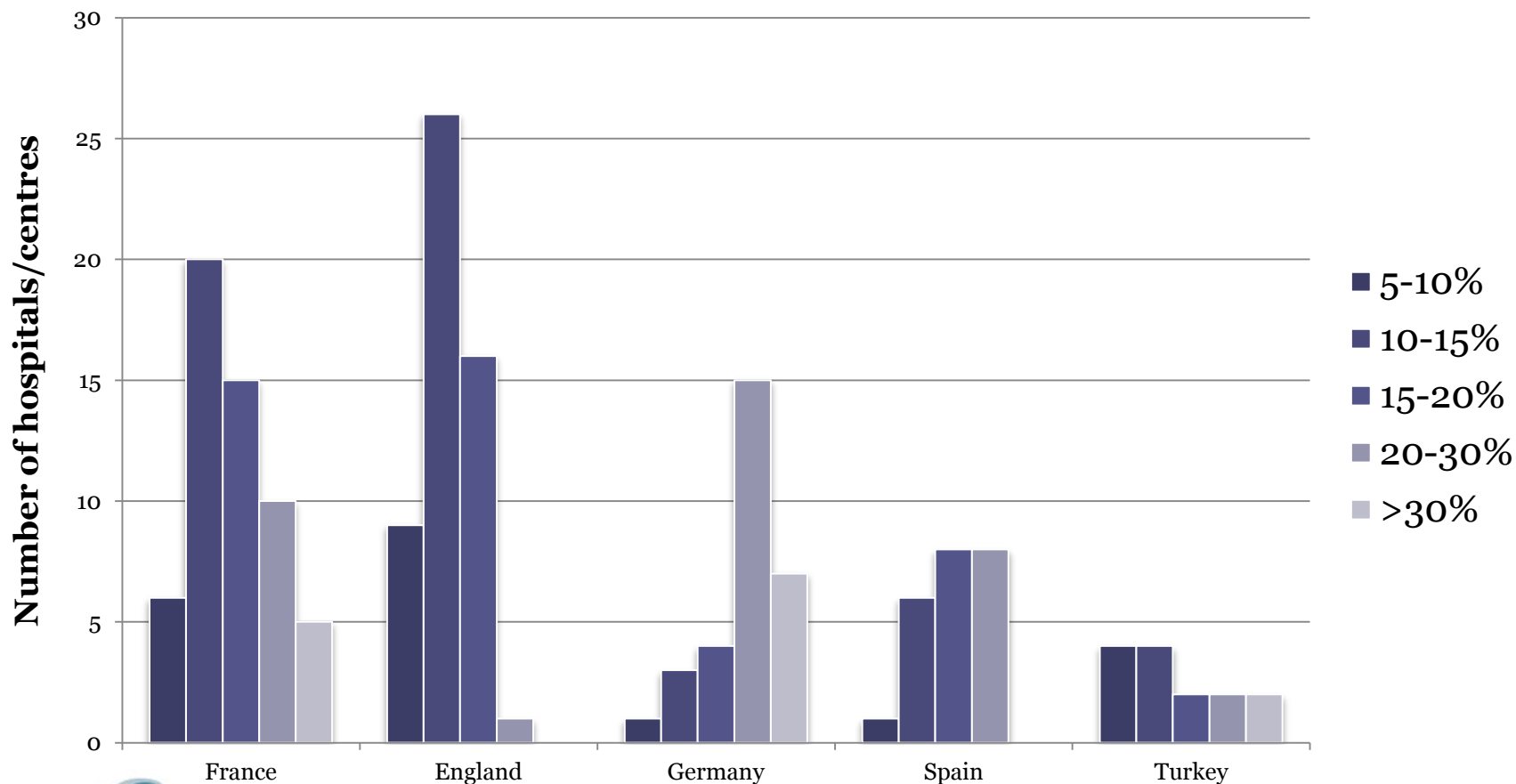
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Resection rates



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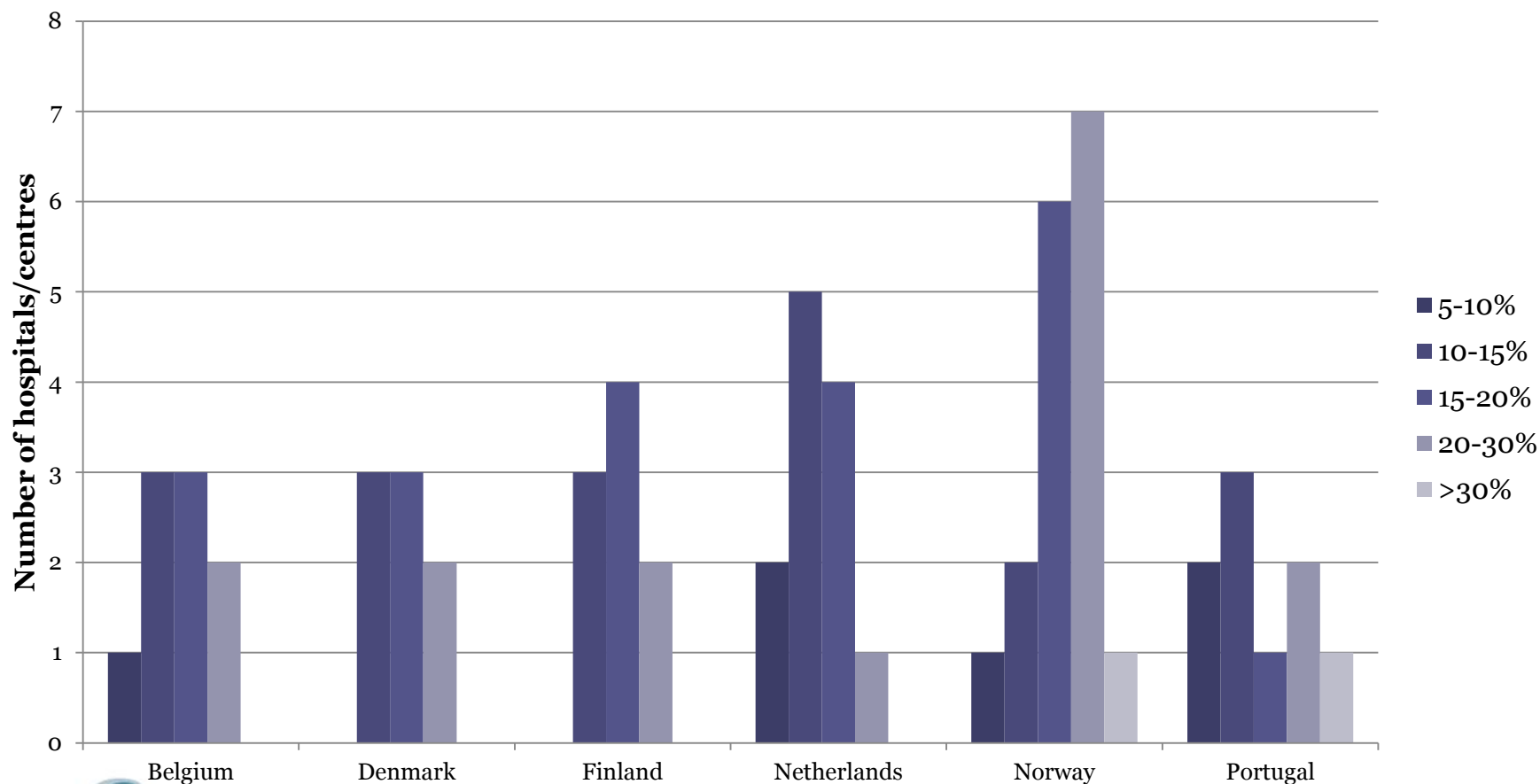
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Resection rates (2)



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Ongoing research

- TF final report
 - Blum TG, Rich A, Baldwin D, et al. The European Initiative in Quality Management in Lung Cancer Care; *Eur Respir J*. 2014. May;43(5):1254-77
 - TOA interest
 - Survey Dec 2014
- Data collection
- Data parameters
- Process



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Data collection

- Mandatory?
- Consent
- 11 of 35 countries
 - Belgium, Estonia, Germany, Luxembourg, Moldova, Netherlands, Poland, Slovakia and Turkey.
 - (Italy and Spain at regional level)
- Ethical approval
- Histological confirmed cases



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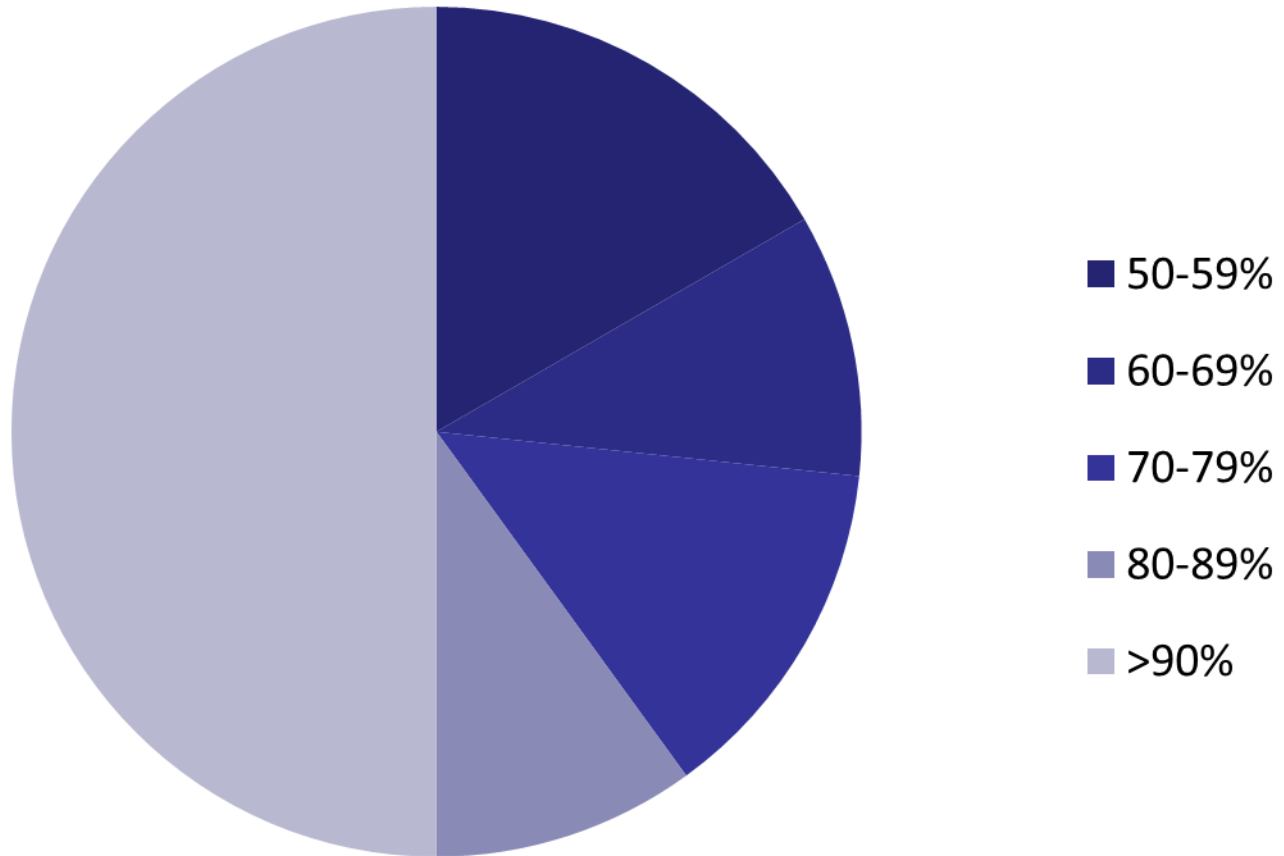
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Data completeness



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Parameters collected

- ***Variation***

Smoking status-12

Performance status-11

Socioeconomic status-7

Quality of Life-2

Lung function-4

Treatment/MDT/Survival



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