

Patient Follow Up After Oesophagogastric Cancer Surgery

12 November 2014

Introduction

- Early follow up
 - Wound check
 - Discuss histology
 - Refer for adjuvant treatment
 - Longer-term follow up
 - postsurgical complications
 - nutritional status
 - psychological support
 - assess for disease recurrence
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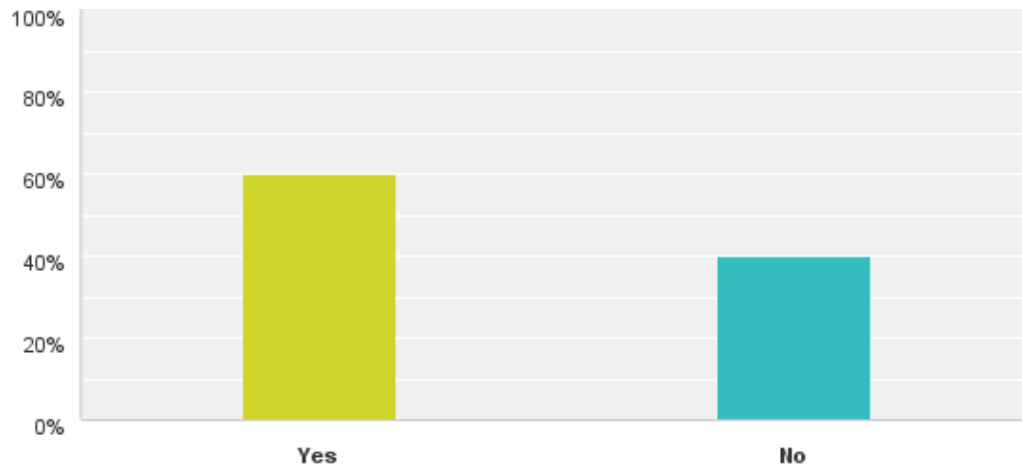
Introduction & Aim

- Most recurrences occur within 2-3 years Dresner & Griffin 2000, Wayman et al 2002, Mariette 2003, de Manzoni 2003, Blom et al 2013
- No national or international consensus about follow up protocols Allum et al 2011, Waddell et al 2013, (ESMO), D'Ugo et al 2013, Baoichhi et al 2014, Moyes et al 2010
 - Imaging
 - Lead-time bias v survival advantage
 - NECN: “routine tests for disease recurrence will not be conducted”
- Planned annual CTs no advantage Antonowicz et al 2014
- Patients preference for imaging during follow up Blom et al 2012

Aim: to assess follow up policies across the cancer network

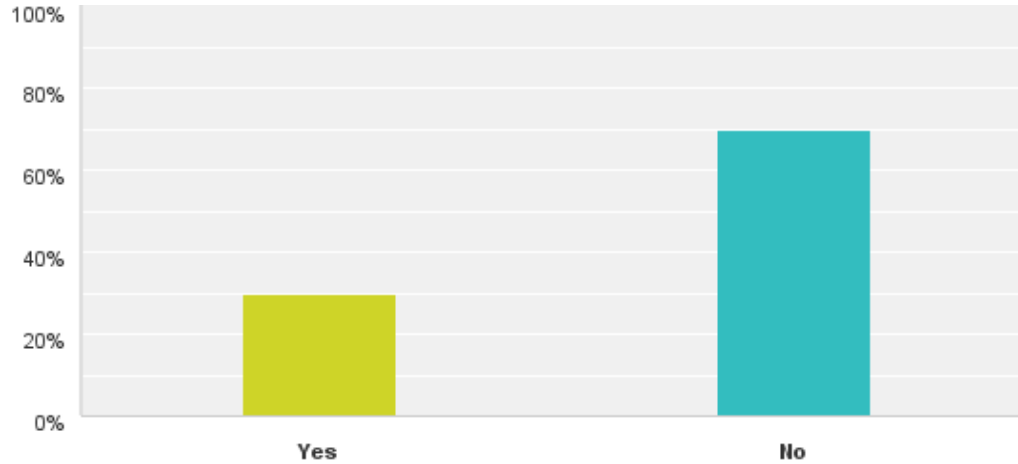
Q1: Does your unit have a standardised follow up protocol for all patients following oesophageal or gastric cancer resection with curative intent?

Answered: 10 Skipped: 0



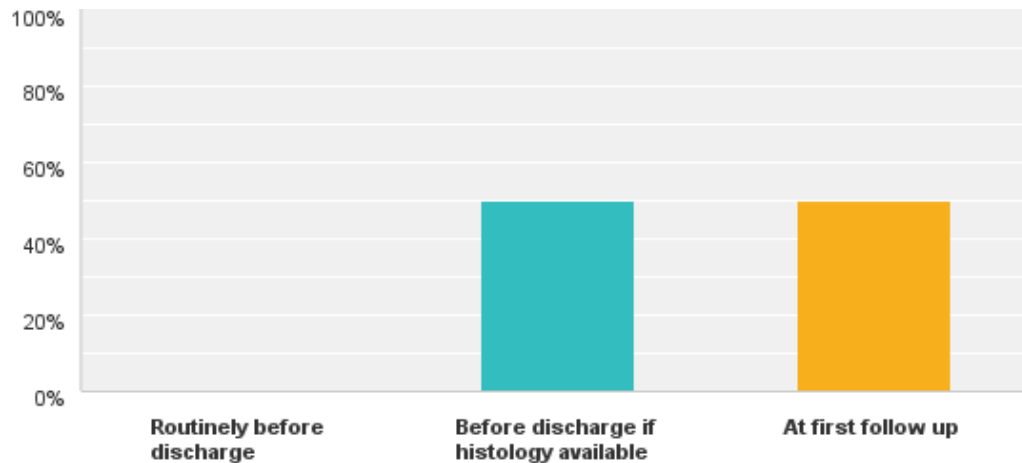
Q2: Is follow up tailored according to postoperative histology?

Answered: 10 Skipped: 0



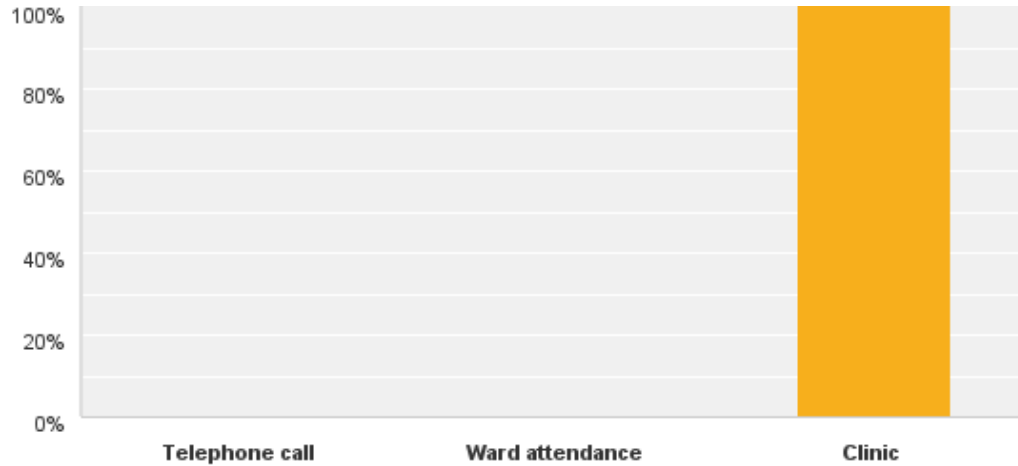
Q3: Is postoperative histology discussed with patients before discharge or at first follow up?

Answered: 10 Skipped: 0



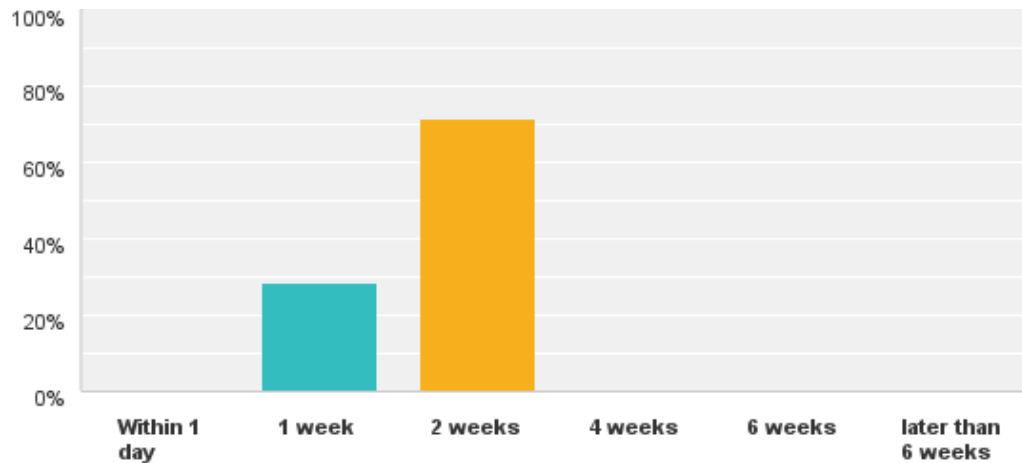
Q4: What is the usual first contact with a patient after discharge?

Answered: 10 Skipped: 0



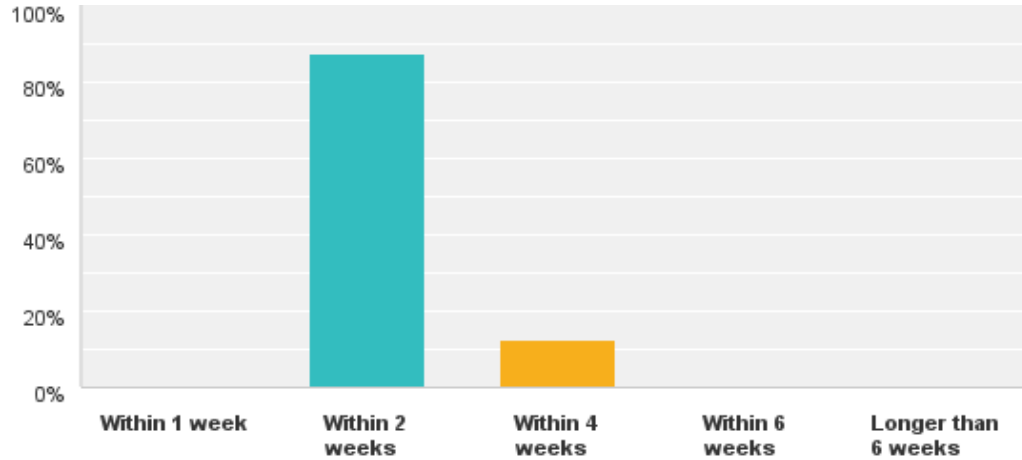
Q5: How soon after discharge will the patient first be contacted if applicable?

Answered: 7 Skipped: 3



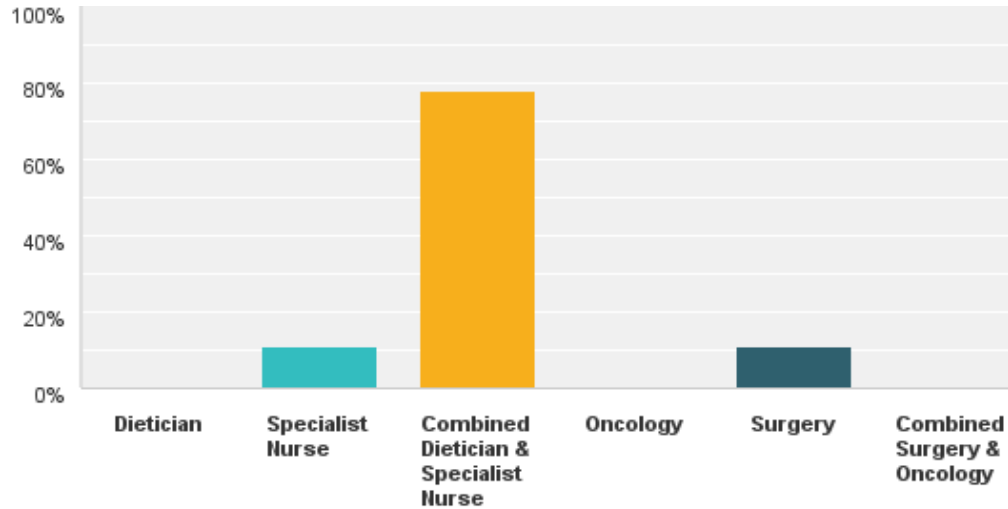
Q6: How soon after discharge will the patient first be reviewed in person?

Answered: 8 Skipped: 2



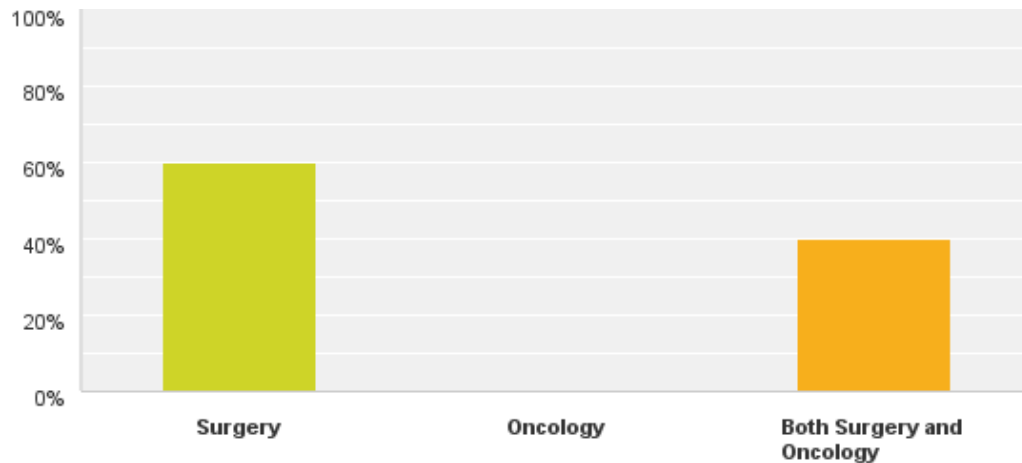
Q7: In what type of outpatient clinic will a patient first be reviewed?

Answered: 9 Skipped: 1



Q8: If a patient received neoadjuvant or adjuvant chemotherapy, long-term follow up is in which type of clinic?

Answered: 10 Skipped: 0



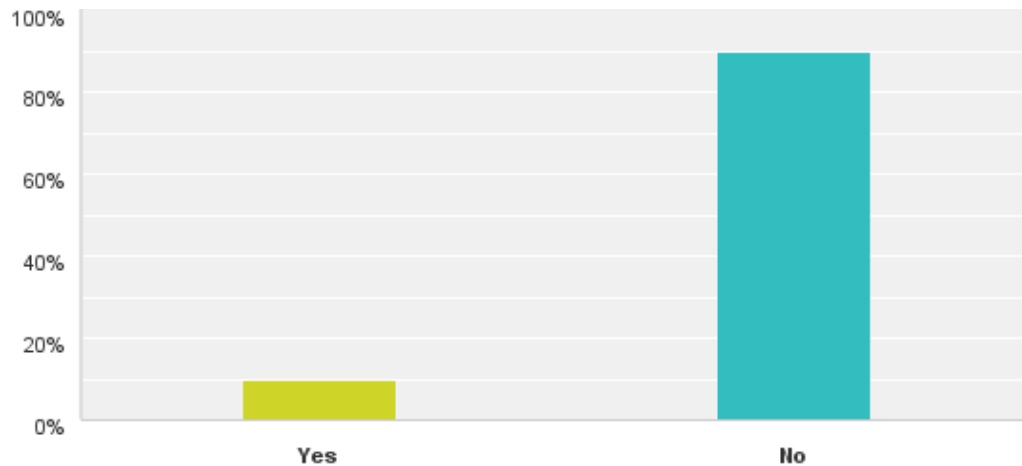
Q9: Do patients routinely have a CT scan during postoperative follow up?

Answered: 10 Skipped: 0



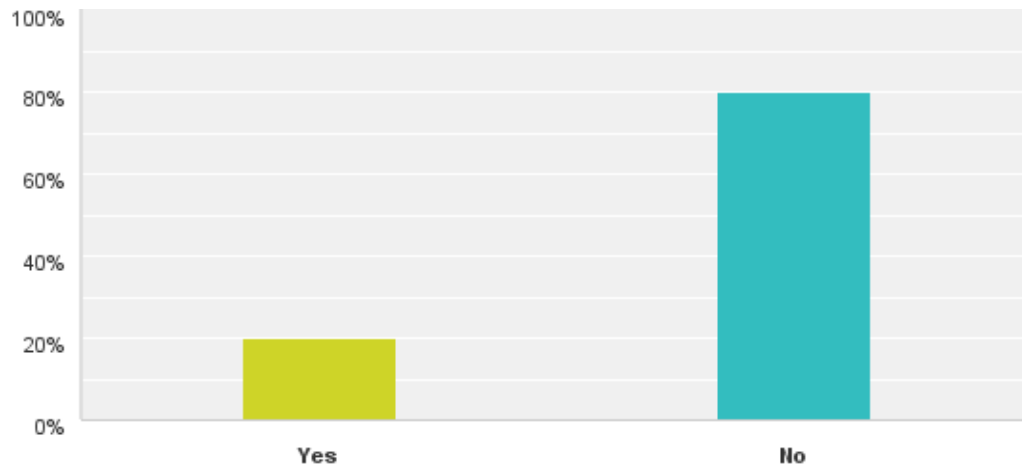
Q10: Do patients routinely have an endoscopy during postoperative follow up?

Answered: 10 Skipped: 0



Q11: Do patients routinely have blood tests during postoperative follow up?

Answered: 10 Skipped: 0



Q12: Are patients asked to complete quality of life questionnaires at follow up visits?

Answered: 10 Skipped: 0



Q13: How frequently are patients reviewed in the outpatient clinic?

Year 1:

- 4 (5)
- 4-5
- if on post op chemo; 3 weekly until last cycle - then once more at 6 weeks, then back to surgery

Year 2:

- 3-4
- 2 (3)
- 3 (2)

Year 3:

- 1 (3)
- 2 (3)
- 2-3

Year 4:

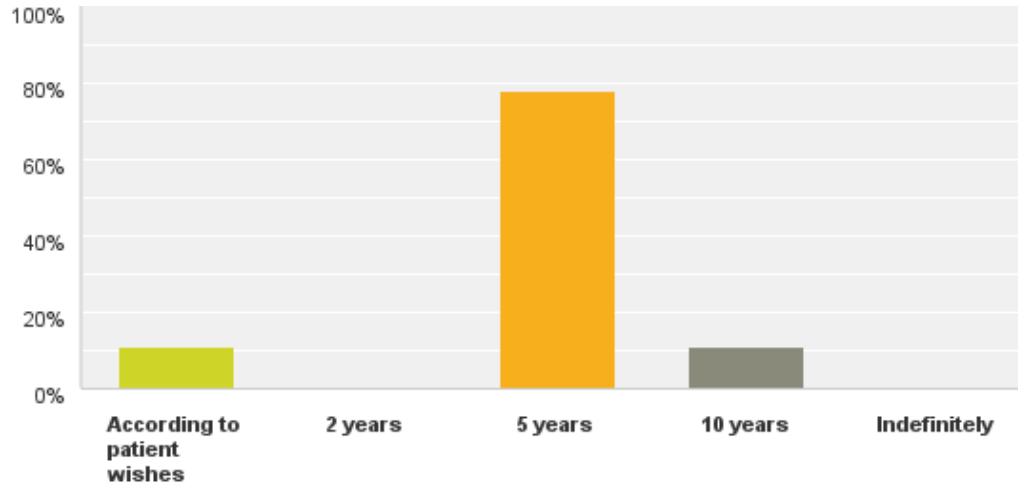
- 1 (6)
- 1-2

Year 5:

- 1 (all)
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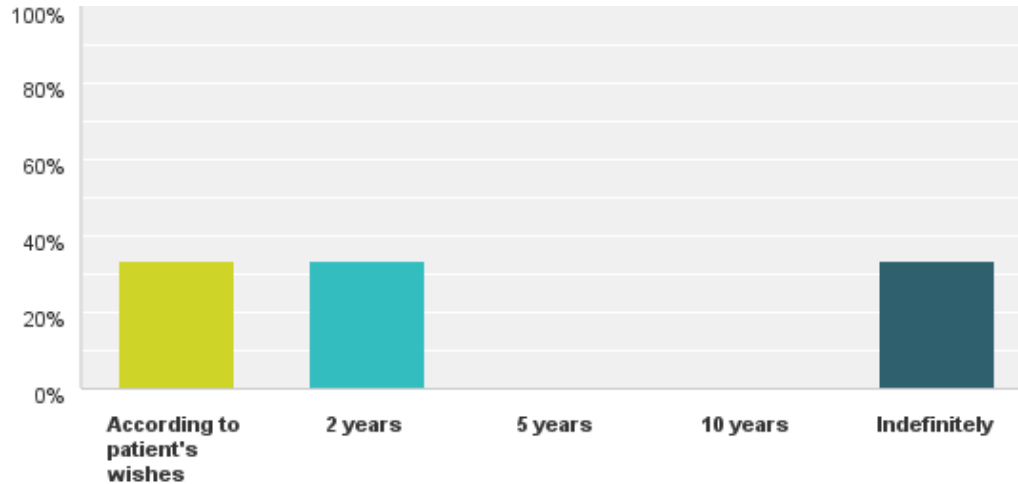
Q14: How long are patients routinely followed up in the surgical clinic?

Answered: 9 Skipped: 1



Q15: If applicable, how long are patients routinely followed up in the oncology clinic?

Answered: 3 Skipped: 7



Q15: If applicable, how long are patients routinely followed up in the oncology clinic?

Answered: 3 Skipped: 7

Less than 1 year after adjuvant chemo (if any)

Usually discharged to be followed up either by surgeon or nurse follow up clinic

Until treatment is complete

As needed

Q16: How long are patients routinely followed up in the dietician's clinic?

1 year and as and when necessary

6 months

Up to 6 months

Unknown

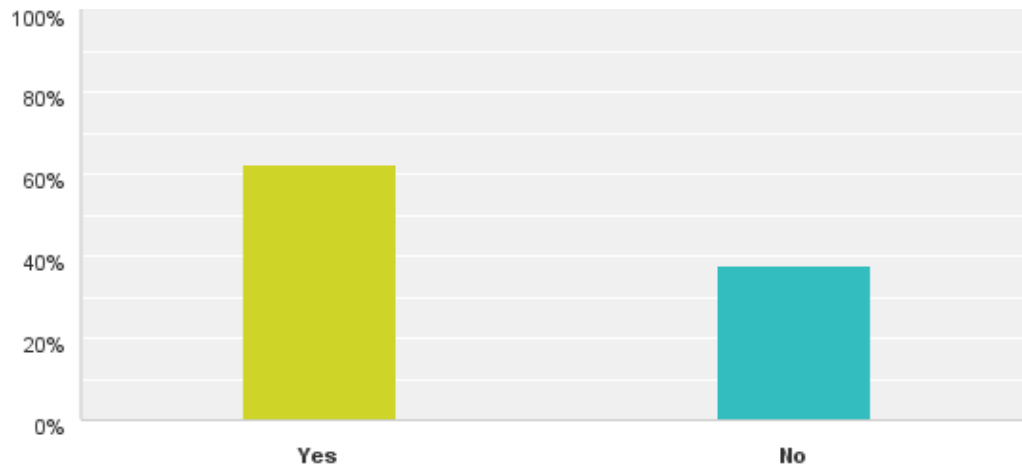
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No routine after the 2 week check

As needed

Q17: Is the follow up of patients who have surgical resection of a GIST different to the above?

Answered: 8 Skipped: 2



Q17: Is the follow up of patients who have surgical resection of a GIST different to the above?

Answered: 8 Skipped: 2

6 monthly and then annually (pending the risk of recurrence based on histology)

If low grade GIST and and less volume surgical resection then less intervention required. If high risk GIST then GIST guidelines followed in CT Scan surveillance

Unknown

CT yearly for high risk GIST

If deemed high risk, routine CT is conducted according to guidelines

USS at 12 months

Discussion

- Surgical follow up
 - Year 1: 6 weeks, 3 months, 6 months, 9 months, 12 months
 - Year 2: 4 monthly
 - Year 3: 6 monthly
 - Year 4: annual
 - Year 5 annual
 - Oncology follow up
 - ?6 weeks after any adjuvant treatment completion
 - Dietician follow up
 - No role for routine imaging/endoscopy currently
 - GIST follow up as per guidelines
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