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Summary

Raising the bar: Measuring quality in pancreatic adenocarcinoma management

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Surgery | Pancreas | Digestive Oncology

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A UEG-EPC collaboration developed quality indicators for pancreatic cancer care through systematic methodology involving guideline review, expert consensus, and patient representation to enable measurement and improvement of healthcare delivery across Europe.

KEY POINTS

- The speaker reported that pancreatic cancer five-year overall survival increased from 7% to 13% over the past ten years but remains one of the worst prognoses among GI cancers.
- The project involved a steering group, seven working groups with physicians, nurses, and patient representatives, and a hired methodologist to create quality indicators from strong guideline recommendations.
- The speaker stated that literature review identified 35 guidelines, of which 20 high-quality guidelines were included after AGREE II assessment based on rigour of development and editorial independence.
- Quality indicators were developed to include numerator, denominator, and target, and were assessed using QUALIFY criteria requiring patient outcome relevance, unambiguous definition, and modifiability.
- The speaker noted that very few or almost no evidence-based tested quality indicators for pancreatic cancer currently exist.
- Two papers will be published: one presenting the quality indicators for pancreatic cancer care and one methodology paper to provide a framework for future quality indicator projects in gastrointestinal diseases.

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