

Role of Multidisciplinary meeting in the treatment decision making of patients with Gastro-Intestinal Cancer: Results of prospective Study

Libérale G, Hendlisz A, Van Den Eynde M, Flamen P, Mahin C, Bouazza F, Gomez M, De Becker D, Van de Stadt J, El Nakadi I.
Jules Bordet Institute, ULB, Brussels

OBJECTIVE :

- Evaluate the proportion of cases, in which the MDM change the decision-making process for patients presenting gastro-intestinal cancer.

INTRODUCTION :

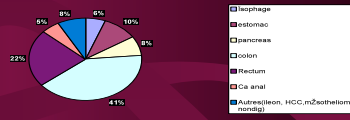
- Medical and surgical treatment of gastrointestinal cancer is complex and related to various oncological factors (tumour size, tumour localisation, clinical stage, ...). International guidelines based on large reported trials, are on continuous modifications. Furthermore, in the majority of cases, different treatment modalities may be proposed. Actually, multidisciplinary meetings (MDM) are recommended worldwide and are considered as a standard of care for the decision making and management of cancer patients.

METHODS & PATIENTS :

- Between January 2007 and October 2007, all patients with GIC presented at the MDM were included in this study. The MDM included a medical-, radiation-, and surgical oncologist, a radiologist and a pathologist.
- Each patient was presented by the oncologist or surgeon responsible for the case. They were asked to suggest the most appropriate treatment to apply to their patient. Those propositions were collected before and/or during the meeting and compared to the decision taken after the multidisciplinary discussion.
- The proportion of decision modification related to the multidisciplinary approach has been recorded.

RESULTS :

- 210 patients (120 F/ 90M) were presented to the MDM for management and/or therapeutic decision making.
- Mean age was 59.9 years (range 24-88 y).



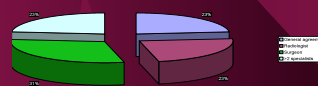
- 65% of cases were presented by oncologists and 35% by surgeons.

- Decision modification:
 - 69% Similar decision (SD)
 - 18% Optional decision (OD)
 - 13% Different decision (DD)

Modification of initial decision:

Change in medical option	6 (20%)
Medical to surgical	6 (20%)
Surgical to medical	18 (60%)

Specialist responsible for decision modification:



CONCLUSION :

MDM have a key role in the management and therapeutic approach of patients with gastro-intestinal cancer. They allow a modification of the decision in about 31% of the cases, with a different decision taken in 13% of patients enhancing the proportion of guidelines directed decisions.