

# YORKSHIRE CANCER NETWORK

## Upper GI Group

Minutes of the meeting held on  
Tuesday 27<sup>th</sup> January, 6.00pm  
Arthington House, Cookridge Hospital

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Present:	Mr P Dewer	Airedale NHS Trust
	Dr R Calvert	Bradford Teaching Hospitals NHS Trust
	Mr J Gokhale	
	Ms H Hey	
	Dr C Kay (Chair)	
	Mr J May	
	Dr P Selby	Leeds North West PCT
	Dr A Cairns	Leeds Teaching Hospitals NHS Trust
	Dr A Crellin	
	Mr S Dextor	
	Ms N Hawkshaw	
	Dr D Sebag-Montefiore	
	Ms K Smith	
	Mr M Basheer	Mid Yorkshire NHS Trust
	Ms L Verity	
	Mr W Wong	York Hospitals NHS Trust
	Miss L Carroll	Yorkshire Cancer Network
	Mr P Melling	
	Ms F Stephenson	
	Mr B Tinkler	
	Ms C Sleigh	Yorkshire Cancer Research Network

### 1. Apologies for absence

Apologies were received from Prof. M Baker, Dr C Beckett, Ms J Hirst, Mrs J Love, Dr M Seymour and Mr CM White.

Dr Kay welcomed Mr Gokhale, Consultant Surgeon from Bradford Teaching Hospitals NHS Trust and Ms Verity, Upper GI Nurse Specialist at Mid Yorkshire NHS Trust.

### 2. Minutes from the last meeting

The minutes of the last meeting were confirmed as an accurate record.

### 3. Matters Arising

- **Pancreatic Cancer Subgroup**

Dr Kay explained to the group that as there was no separate Pancreatic Group it may be a possibility to discuss Pancreatic Cancer at the Upper GI meetings and invite appropriate representatives to join the group.

**ACTION: Dr Kay to discuss the possibility of discussing pancreatic cancers at the Upper GI meetings with Prof. Baker and Mr Tinkler and report back at the next meeting.**

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- **Network Guidelines Working Group**

Ms Stephenson highlighted that the 'working group' had met twice to develop clinical guidelines and referral pathways for the management of Upper GI cancers across the YCN. Ms Stephenson explained that the group had agreed to work all aspects of the pathway including Palliative and Primary care and had decided that they would initially focus on the surgical element of the pathway. The group had also done work on pathology, radiology and CNS and had a meeting planned in March to progress this further.

Dr Kay encouraged anyone wanting to join the group to contact Ms Stephenson.

Dr Crellin circulated the revised algorithm for the definitive treatment adenocarcinoma Oesophagus (please see supporting paper). Dr Crellin discussed amendments made to this algorithm and highlighted that he felt it would be useful as a Network to agree on the definition of M1A to ensure that the same group of patients were treated in the same way. Mr May emphasised that he also felt that there was a need to define M1A.

Dr Kay highlighted that there was an ongoing project to retrospectively look at those patients who had locally advanced disease (M1A) to look at their outcome.

No conclusion was reached as to whether a working definition of M1A could be produced.

#### **4. Developments in Upper GI Services**

- **Central North Yorkshire**

##### **York**

Mr Dextor reported that the third surgeon Dr Abeeza had been appointed in Leeds.

Mr Wong prompted a discussion on EUS support in York. Mr Tinkler informed the group that a Radiologist based at York was currently training in EUS techniques.

Dr Kay informed the group that there was now funding for three EUS sessions in Leeds. Dr Kay emphasised that if there were any problems with EUS support that it should be fed back either to the group or directly to him.

Dr Sebag-Montefiore gave feedback from a meeting he had attended in York. Dr Sebag-Montefiore highlighted that David Jackson, an oncologist based at York/Harrogate, had taken on the extended treatment of Upper GI cancer from David Bottomly and regularly attended the Monday morning Leeds Upper GI MDT. Dr Sebag-Montefiore highlighted that he had agreed to take on the radiotherapy aspect and would continue to regularly attend the MDT at Leeds. At this meeting they also discussed the timing of the current MDT in York. It was highlighted that David Jackson attended the MDT on a Tuesday with the surgeons. However due to the clinical oncology this day was difficult and therefore they explored the idea of video conferencing. At this meeting it was agreed that they would write to Keith Harris to clarify the EUS resource issue.

- **West Yorkshire**

Dr Kay highlighted that Bradford were now performing diagnostic EUS on site. Dr Kay announced that Mr Gokhale the second Upper GI surgeon had commenced employment that month.

Dr Kay updated the group on the proposal the small working group had made for Oesophago-gastric malignant work to be moved from Airedale and Calderdale to Bradford by April 2004 and from Huddersfield to Bradford by the start of 2005. Dr Kay said his understanding was that Mr Dewar was still supportive of the centralisation of this work from Airedale to Bradford however Calderdale had now withdrawn from this proposal pending further discussions. Dr Kay reminded the group that the centralisation of this work would take place in 2007 at the latest.

Mr May highlighted that Mr Macdonald had now stopped carrying out Upper GI Oncology surgery and therefore the majority of Oesophageal cases were now being sent to Bradford.

Dr Kay informed the group that there had been no major changes for pathology and radiology. Mr Tinkler highlighted that there was a Pathology group that Dr Dacosta Chaired and explained that the Leeds training centre had increased the number of training registrars. He also highlighted that it was his understanding that there were going to be announcements imminently on pathology modernisation.

Ms Hey announced that West West Yorkshire had been given funding for two more Nurse Specialists. She informed the group that there was a nursing proposal that was hopefully going out for comment that week. This proposal was for a team of nurses to work across West West Yorkshire and to cross cover each other so that there was always a CNS able to cover the clinical work.

Dr Sebag-Montefiore explained that Cookridge had a Chemo-radiotherapy CNS which covered GI cancer as a whole however she was unable to attend most of the MDT due to her work capacity. Dr Sebag-Montefiore felt that there was an imbalance of CNS support for non-surgical oncology and highlighted that when looking at Nurse Specialist practice the patient pathway was dramatically speeded up by CNS involvement. Dr Sebag-Montefiore questioned if it had been considered for one of the new Nurse Specialists to be based at Cookridge hospital. Ms Hey raised the issue as to whether Cookridge required a CNS or pathway administration co-ordination.

**ACTION: Ms Hawkshaw and Ms Smith to meet with Dr Sebag-Montefiore to discuss this further and identify the key issues**

## **5. Upper GI Cancer Standards Peer Review**

Mr Tinkler informed the group that the Upper GI Cancer Standards were being reviewed and re-written and due to be published in Spring 2004. Mr Tinkler explained that England had been divided into five zones and that their area was the Northern zone which covered from Sheffield to Newcastle. Mr Tinkler explained that the intention was that each of the five cancer Networks in that area would be peer-reviewed and that each area would have six months to prepare from seeing the Upper GI Cancer Standards.

Ms Stephenson informed the group that an Upper GI Audit and Standards meeting had been planned for Tuesday 10<sup>th</sup> February. The Agenda for this meeting included a presentation from West Yorkshire on their Audit of Oesophageal Surgery. Ms Stephenson highlighted that they were also going to cover Clinical Guidelines and referral pathways, data collection and look at the Network Audit programme and clinical trials.

## **6. Waiting Times**

Mr Melling reminded the group that Trusts had been collecting cancer waiting times for the National targets since September 2003 and highlighted that the data from the first quarter (July, August and September) was available although not all the cases would have been included. Mr Melling informed the group that in February the data for the second quarter (October, November and December) would be available. Mr Melling emphasised that there was still work to be done on ensuring that every case was recorded.

## **7. Cancer Datasets**

Current data collection methods and agreeing the same minimum dataset were items on the Agenda for discussion at the meeting on Tuesday 10<sup>th</sup> February.

**ACTION: All to ensure there is appropriate representation at the meeting on the 10<sup>th</sup> February.**

## **8. Any Other Business**

Mr Tinkler said that there had been a meeting with the Lead Managers about the audit of cancer standards and at this meeting it was agreed that they would all share good practice and this information would be uploaded on the YCN website.

The Upper GI Cancer non-surgical-oncology forum minutes for 21<sup>st</sup> January were circulated.

Ms Sleigh circulated a hand out on the YCRN Upper GI trials taking place in the Network to increase people's awareness. Dr Kay said that they would discuss the number of patients the Network has entered into these trials in future meetings.

## **9. Date and time of next meeting**

**\*\*Please note revised date\*\***

**Educational Event Thursday 20<sup>th</sup> May 2004, Pavilions of Harrogate (Time to be confirmed)**