

SOUTH EAST SCOTLAND CANCER NETWORK PROSPECTIVE CANCER AUDIT

OESOPHAGO-GASTRIC CANCER 2021

COMPARATIVE AUDIT REPORT

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Patients diagnosed 1st January 2021 – 31st December 2021

Contents

DOCUMENT HISTORY	3
COMMENT BY CHAIR OF THE SCAN UPPER GI GROUP.....	4
Actions 2021.....	5
INTRODUCTION AND METHODS	8
ESTIMATE OF CASE ASCERTAINMENT	11
DIAGNOSIS AND STAGING	12
QPI 1 – Endoscopy	12
QPI 3 – Multi-Disciplinary Team (MDT) Meeting.....	15
QPI 4i – Staging (TNM).....	18
QPI 4ii – Treatment Intent	20
QPI 5ii – Nutritional Assessment: Assessed by a dietician for patients with a high risk of malnutrition (MUST score \geq 2).....	24
SURGICAL OUTCOMES.....	27
QPI 6 – Appropriate Selection of Surgical Patients.....	27
QPI 8 – Lymph Node Yield.....	32
QPI 9 – Length of Hospital Stay Following Surgery	34
QPI 10i – Circumferential Resection Margins	37
QPI 10ii – Longitudinal Resection Margin.....	38
QPI 11 – Curative Treatment Rates	40
QPI 12 – 30 Day Mortality Following Oncological Treatment for Oesophageal or Gastric Cancer	43
QPI 13 – HER2 for Decision Making in Advanced Gastric and Gastro-oesophageal Junction Cancer	44
Key Categories.....	46
Number of Cases By Site of Origin of Tumour.....	46
Breakdown of Site of Origin of Tumour.....	46
Age and Gender Distribution	47
OG Attainment Summary 2020.....	50

DOCUMENT HISTORY

Version	Circulation	Date	Comments
Version 1	SCAN Upper GI Group meeting	2/09/2022	Comments and actions added at sign-off meeting. Format changes.
Version 2	Lead Clinician for commentary and comments	26/10/2022	Draft 2 of report sent to sign off group. Comments added and modified.
Version 3	Final draft report circulated to SCAN Upper GI Group	01/11/2022	Draft 3 of report Lead commentary added. .
Version 4	Final report and action plans circulated to SCAN Upper GI Group and Clinical Governance Groups	22/11/2022	Comments updated for final circulation.
Version 4w	Final report added to the SCAN website	11/01/2023	

OESOPHAGO-GASTRIC CANCER 2021 COMPARATIVE AUDIT REPORT

COMMENT BY CHAIR OF THE SCAN UPPER GI GROUP

The introduction of oesophago-gastric cancer QPIs has led to improvement in the level and quality of audit data with the aim of driving good practice and equity of care. The SCAN audit team have worked very hard to provide complete and accurate data for the 2021 report during a difficult year for all.

In many QPIs there has been good performance and ongoing improvements in some areas despite the COVID pandemic. This is a tribute to the hard work of all members of the multidisciplinary teams throughout the SCAN region. Some QPIs represent an ongoing challenge for SCAN and at a national level. In particular the low levels of patients undergoing curative treatment requires further work at a national level focused on earlier diagnosis.

Pete Lamb
SCAN Lead Clinician for OG Cancers
October 2022

Actions 2020

QPI	Action	Lead	Date for update
1	Review patients with non-diagnostic biopsies at first endoscopy to identify any common factors (e.g. Number of biopsies, transnasal endoscopy)	PL	February 2023

Actions 2021

No Actions identified from 2021 results.

OG QPI Attainment Summary – 2021, Year 9			Target %	Borders	D&G	Fife	Lothian	SCAN				
QPI 1: Endoscopy - Histological diagnosis made within 6 weeks of initial endoscopy and biopsy	Oesophageal	95	N 21 D 22	95.5%	N 35 D 39	89.7%	N 60 D 65	92.3%	N 154 D 168	91.7%	N 270 D 294	91.8%
	Gastric	95	N 3 D 3	100%	N 9 D 10	90%	N 12 D 15	80.0%	N 43 D 45	95.6%	N 67 D 73	91.8%
QPI 3: MDT before definitive treatment	Oesophageal	95	N 21 D 22	95.5%	N 40 D 41	97.6%	N 63 D 65	96.9%	N 159 D 168	94.6%	N 283 D 296	95.6%
	Gastric	95	N 3 D 3	100%	N 11 D 11	100%	N 18 D 19	94.7%	N 45 D 45	100%	N 77 D 78	98.7%
QPI 4i: TNM Staging recorded at MDT prior to treatment	Oesophageal	90	N 20 D 23	87.0%	N 39 D 41	95.1%	N 64 D 65	98.5%	N 157 D 173	90.8%	N 280 D 302	92.7%
	Gastric	90	N 2 D 3	66.7%	N 10 D 11	90.9%	N 17 D 20	85.0%	N 45 D 47	95.7%	N 74 D 81	91.4%
QPI 4ii: TNM Treatment Intent recorded at MDT prior to treatment	Oesophageal	95	N 22 D 23	95.7%	N 38 D 41	92.7%	N 65 D 65	100%	N 151 D 173	87.3%	N 276 D 302	91.4%
	Gastric	95	N 3 D 3	100%	N 11 D 11	100%	N 18 D 20	90.0%	N 42 D 47	89.4%	N 74 D 81	91.4%
QPI 5i: Nutritional Assessment: Undergo screening with the Malnutrition Universal Screening Tool (MUST) before first treatment.	Oesophageal	95	N 20 D 22	90.9%	N 40 D 41	97.6%	N 63 D 65	96.9%	N 122 D 173	70.5%	N 245 D 301	81.4%
	Gastric	95	N 1 D 1	100%	N 11 D 11	100%	N 19 D 20	95.0%	N 35 D 47	74.5%	N 66 D 79	83.5%
QPI 5ii: Nutritional Assessment: are at high risk of malnutrition (MUST score >2) referred to dietician	Oesophageal	90	N 12 D 13	92.3%	N 14 D 14	100%	N 18 D 18	100%	N 80 D 90	88.9%	N 124 D 135	91.9%
	Gastric	90	N 1 D 1	100%	N 4 D 4	100%	N 2 D 2	100%	N 27 D 32	84.4%	N 34 D 39	87.2%
QPI 6: Appropriate Selection: Neo-Adjuvant chemotherapy followed by surgical resection	Oesophageal	80	N 3 D 3	100%	N 2 D 2	100%	N 11 D 12	91.7%	N 26 D 30	86.7%	N 42 D 47	89.4%
	Gastric	80	N 0 D 0	-	N 0 D 0	-	N 1 D 3	33.3%	N 5 D 7	71.4%	N 6 D 10	60.0%
QPI 7i: 30 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<5	Board of Surgery					N 0 D 46	0.0%	N 0 D 46	0.0%	
	Gastric	<5	Board of Surgery					N 0 D 14	0.0%	N 0 D 14	0.0%	

QPI 7ii: 90 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<7.5	Board of Surgery			N 0 D 45	0.0%	N 0 D 45	0.0%			
	Gastric	<7.5	Board of Surgery			N 0 D 14	0.0%	N 0 D 14	0.0%			
QPI 8: Lymph Node Yield – Curative resection where >15 lymph nodes are resected and examined (Presented by Board of Surgery)	Oesophageal	90	Board of Surgery			N 46 D 46	100%	N 46 D 46	100%			
	Gastric	80	Board of Surgery			N 11 D 14	78.6%	N 11 D 14	78.6%			
QPI 9: Hospital of Stay: Discharge within 14 days of surgical procedure (presented by Board of Surgery)	Oesophageal	60	Board Of Surgery			N 26 D 47	55.3%	N 26 D 47	55.3%			
	Gastric	60	Board of Surgery			N 11 D 14	78.6%	N 11 D 14	78.6%			
QPI 10i: Oesophageal clear circumferential resection margins (presented by Board of Surgery)	Oesophageal	70	Board of Surgery			N 39 D 47	83.0%	N 39 D 47	83.0%			
QPI 10ii: Longitudinal margins clear (presented by Board of Surgery)	Oesophageal	90	Board of Surgery			N 46 D 47	97.9%	N 46 D 47	97.9%			
	Gastric	95	Board of Surgery			N 11 D 14	78.6%	N 11 D 14	78.6%			
QPI 11: Curative Treatment Rates	Oesophageal	35	N 3 D 18	16.7%	N 3 D 41	7.3%	N 18 D 65	27.7%	N 48 D 172	27.9%	N 72 D 296	24.3%
	Gastric	35	N 0 D 2	0.0%	N 3 D 11	27.3%	N 7 D 20	35.0%	N 9 D 47	19.1%	N 19 D 80	23.8%
QPI 12: 30 day Mortality after Oncological Treatment	Oesophageal curative Chemoradiotherapy		<5	Not yet reported - Awaiting Chemocare guidelines								
	Gastric Curative Chemoradiotherapy											
QPI 13 HER2 Status in Advanced Oesophageal/Gastric Adenocarcinoma		90%	N 3 D 3	100%	N 6 D 6	100%	N 7 D 7	100%	N 19 D 19	100%	N 35 D 35	100%
Clinical Trial QPI NB: N= patients consented to trial/study on SCRN database, D = 5 year average Cancer Registry patients		15%	N 5 D 35	14.3%	N 0 D 46	0.0%	N 6 D 99	6.0%	N 62 D 178	34.8%	N 71 D 358	20.3%

INTRODUCTION AND METHODS

Cohort

This report covers patients diagnosed with an Oesophageal or Gastric cancer from 01/01/2021 to 31/12/2021. The results contained within this report are presented by NHS board of diagnosis, where the QPI relates to surgical outcomes the results are presented by hospital of surgery.

Dataset and Definitions

The QPIs have been developed collaboratively with the three Regional Cancer Networks, Public Health Scotland and Healthcare Improvement Scotland. QPIs will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

The overarching aim of the cancer quality work programme is to ensure that activity at NHS board level is focussed on areas most important in terms of improving survival and patient experience whilst reducing variance and ensuring safe, effective and person-centred cancer care.

Following a period of development, public engagement and finalisation, each set of QPIs is published by Healthcare Improvement Scotland.

Accompanying datasets and measurability criteria for QPIs are published on the PHS website¹. NHS boards are required to report against QPIs as part of a mandatory, publicly reported, programme at a national level.

The QPI dataset for Upper GI was implemented from 01/01/2013. A first formal 3 year review of the Upper GI Cancer QPIs was undertaken and published on the HIS website in April 2017. The revised QPIs were used to report year 4, 2016 data with the existing data fields and using the new measurability. Where new data fields were required, collection and reporting started in year 5, 2017.

The second 3 year formal review for the Upper GI cancer QPIs commenced in autumn 2019. Due to Covid-19 there was a delay in publication of the review. The revised QPIs are used to report Year 9, 2021 data.

The following QPIs have been updated:

QPI	Change	Year for reporting
4i	New data item: TNM recorded at MDT (TNM) (Yes/No)	2021
5ii	QPI amended to patients being "assessed by" dietetics rather than "referred to" dietetics. New data items added: Dietetic assessment (ASSESSDIET), Date of dietetic assessment (DATEDIET).	2021
9	QPI to now be measured using audit data rather than SMR01 data New data item: Date of discharge (DDISCHARGE)	2021
12 (SACT)	New standardised 30 day SACT Mortality QPI across all tumour types replacing audit data with data from Chemocare to provide results for all OG cancer patients undergoing chemotherapy in 1 year. A further target of <15% has been added for patients undergoing palliative treatment New data items added: Location code of SACT treatment (HOSPSACT), Location code of Radiotherapy Treatment (HOSPRADIO).	TBC
13	HER2 testing measurability to include all patients with adenocarcinoma of gastric and gastro-oesophageal cancers.	2020

No QPIs were archived in the 2020 Formal Review. QPI 2 was archived in the 2016 Formal Review.

¹ Datasets and measurability documents are available at www.isdscotland.org

The standard QPI format is shown below:

QPI Title:	Short title of Quality Performance Indicator (for use in reports etc.)	
Description:	Full and clear description of the Quality Performance Indicator.	
Rationale and Evidence:	Description of the evidence base and rationale which underpins this indicator.	
Specifications:	Numerator:	Of all the patients included in the denominator those who meet the criteria set out in the indicator.
	Denominator:	All patients to be included in the measurement of this indicator.
	Exclusions:	Patients who should be excluded from measurement of this indicator.
	Not recorded for numerator:	Include in the denominator for measurement against the target. Present as not recorded only if the patient cannot otherwise be identified as having met/not met the target.
	Not recorded for exclusion:	Include in the denominator for measurement against the target unless there is other definitive evidence that the record should be excluded. Present as not recorded only where the record cannot otherwise be definitively identified as an inclusion/exclusion for this standard.
	Not recorded for denominator:	Exclude from the denominator for measurement against the target. Present as not recorded only where the patient cannot otherwise be definitively identified as an inclusion/exclusion for this standard.
Target:	Statement of the level of performance to be achieved.	

Audit Processes

Data was analysed by the audit facilitators in each NHS board according to the measurability document provided by PHS. SCAN data was collated by Kirsty Martin, SCAN Audit Facilitator for Upper GI cancer.

Patients were mainly identified through registration at weekly multidisciplinary meetings, and through checks made against pathology listings and GRO death listings. Data capture was dependent on audit of the patient record and review of various hospitals electronic records systems.

Surgical and Oncology data is obtained either from the clinical records (electronic systems and case notes)

SCAN data was recorded in eCase for Lothian, Borders, Dumfries & Galloway and Fife.

Lead Clinicians and Audit Personnel

SCAN Region	Hospital	Lead Clinician	Audit Support
NHS Borders	Borders General Hospital	Mr Jonathon Fletcher	Suzanne Tunmore
NHS Dumfries & Galloway	Dumfries & Galloway Royal Infirmary	Mr Jeyakumar Apollos	Jenny Bruce / Campbell Wallis
NHS Fife	Queen Margaret Hospital Victoria Hospital	Mr Andreas Luhmann	Maureen Lamb
SCAN & NHS Lothian	St John's Hospital Royal Infirmary Edinburgh Western General Hospital	Mr Peter Lamb	Kirsty Martin
	Edinburgh Cancer Centre	Dr Lucy Wall	

Data Quality Assurance

All hospitals in mainland Scotland participate in a Quality Assurance (QA) programme provided by Public Health Scotland (PHS). QA of the Oesophago-Gastric data was carried out in February 2020 and this showed an average of 98.1% data accuracy for SCAN and the average accuracy for Scotland was 97.5%.

Clinical Sign-off

To ensure the quality of the data and the results presented, the process was as follows:

- Individual health board results were reviewed and signed-off locally.
- Collated results were presented and discussed at the Upper GI SCAN Group Meeting on 2nd September 2022.
- The final draft of the regional report was circulated to members of the SCAN Upper GI Group and Clinical Governance Framework on 22nd November 2022.

ESTIMATE OF CASE ASCERTAINMENT

Estimated Case Ascertainment

An estimate of case ascertainment (the percentage of the population with oesophageal or gastric cancer recorded in the audit) is made by comparison with the Scottish Cancer Registry five-year average data from 2016 to 2020. High levels of case ascertainment provide confidence in the completeness of the audit recording and contribute to the reliability of results presented. Levels greater than 100% may be attributable to an increase in incidence. Allowance should be made when reviewing results where numbers are small and variation may be due to chance.

Number of cases recorded in audit: patients diagnosed 01/01/2021 – 31/12/2021

	Borders	D&G	Fife	Lothian	SCAN
Oesophageal Cancer	23	41	65	173	302
Gastric Cancer	3	11	20	47	81
Total OG Cancers	26	52	85	220	383

Estimate of case ascertainment: calculated using the average of the most recent available five years of Cancer Registry Data

Case Ascertainment	Borders	D&G	Fife	Lothian	SCAN
Number of cases from audit	26	52	85	220	383
Cases from Cancer Registry	35	46	99	178	358
Case Ascertainment %	74.3	113.0	85.9	123.6	107.0

Source: Scottish Cancer Registry, PHS. Data extracted from ACaDMe 01/08/2022.

Note: Case ascertainment is reported by board of diagnosis and has been estimated using a denominator based on the latest (2015-2019) five-year annual average available from the Scottish Cancer Registry.

Death certificate only cases have been excluded. Cases that have been diagnosed in the private sector but received any treatment in NHS hospitals have been included.

Comment:

Overall good case ascertainment and good results particularly considering the challenges of COVID. Thanks for all your hard work. There are no critical / major red flags.

DIAGNOSIS AND STAGING

QPI 1 – Endoscopy

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer who undergo endoscopy and who have a histological diagnosis made within 6 weeks of initial endoscopy and biopsy

Denominator = All patients with oesophageal or gastric cancer who undergo endoscopy

Exclusions = No exclusions

Oesophageal cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	173	302
Ineligible for this QPI	1	2	0	5	8
Numerator	21	35	60	154	270
Not recorded for numerator	0	0	0	0	0
Denominator	22	39	65	168	294
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	95.5	89.7	92.3	91.7	91.8

Comments where QPI was not met

D&G: The QPI target was not met showing a shortfall of 4 cases (5.3%). 4 patients were clinically diagnosed without pathology - all were discussed at MDT. 1 patient endoscopy unable to pass tumour treated palliatively, 1 patient first endoscopy unable to pass due to stricture given EUS biopsy diagnosed cancer, 1 patient no pathological diagnoses also had concurrent head and neck cancer and 1 patient endoscopy showed cancer in-situ.

Fife: The QPI target was not met showing a shortfall of 5 cases (2.7%). 3 patients were clinically diagnosed without pathology - all were discussed at MDT and thought to have cancer but too frail for further endoscopy. 1 patient with negative pathology at endoscopy underwent EMR which diagnosed and treated the cancer. One patient underwent an Oesophagoscopy under ENT which pathologically diagnosed UGI cancer.

Lothian: The QPI target was not met showing a shortfall of 14 cases (3.3%). 14 patients were clinically diagnosed without pathology - 11 showed high grade dysplasia of which 5 received a Stent, 4 EMR diagnosed and treated the cancer, 3 underwent radical resection, 2 received palliative chemotherapy of which 1 had a second primary cancer. 1 patient was diagnosed on the second endoscopy 7 weeks after the first and received a stent and 1 patient was frail endoscopy showed high suspicion of cancer and received a stent.

Gastric cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	0	1	5	2	8
Numerator	3	9	12	43	67
Not recorded for numerator	0	0	0	0	0
Denominator	3	10	15	45	73
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	100.0	90.0	80.0	95.6	91.8

Comments where QPI was not met

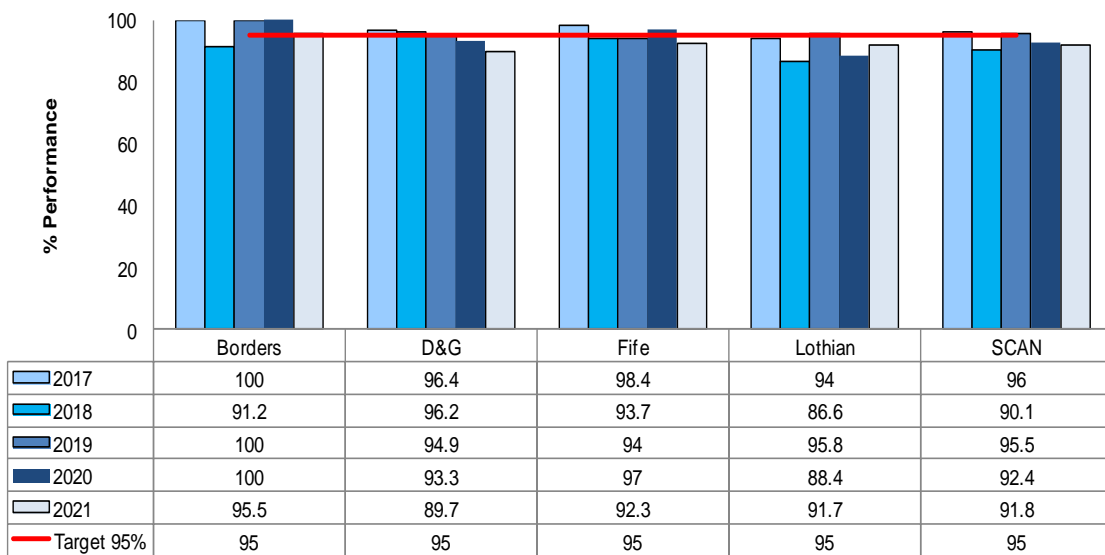
D&G: The QPI target was not met showing a shortfall of 1 case (5%). 1 patient was clinically diagnosed with cancer as the endoscopy was not diagnostic.

Fife: The QPI target was not met showing a shortfall of 3 cases (15%). 3 patients found to have High Grade Dysplasia - 1 patient cancer diagnosed on gastroscopy, 1 patient underwent surgery where the cancer was diagnosed and 1 frail patient was discussed at MDT received a Stent and was not for further endoscopy.

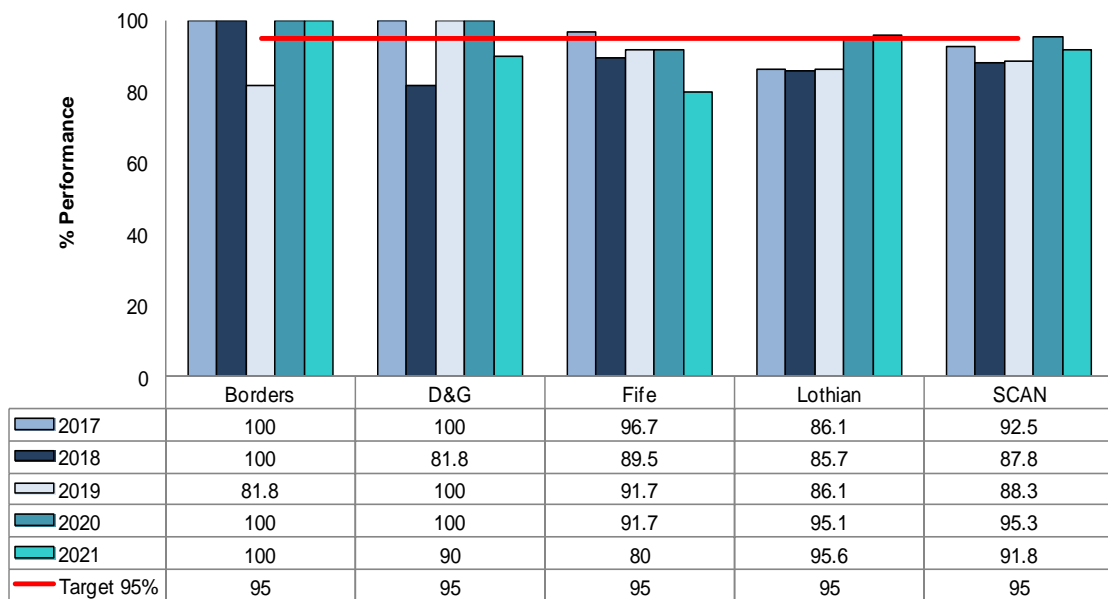
Comment:

Main area were patients had 'high suspicion' or cancer in-situ pathology rather than invasive cancer (treatment proceeded without delay as malignancy based on the result and imaging through MDT). Small number of patients with High Grade Dysplasia that had cancer diagnosed on EMR – the correct treatment. Review of biopsy not yet complete but I think GI have also recently done similar work on key QPIs for good endoscopic practice.

QPI 1 - Endoscopy (Oesophageal)

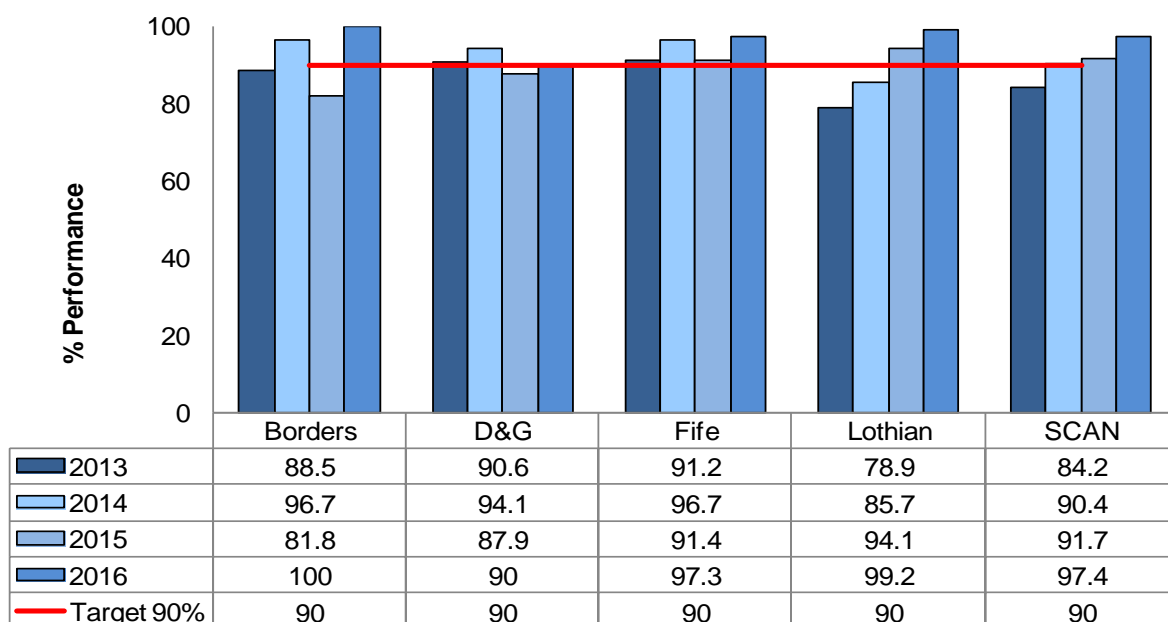


QPI 1 - Endoscopy (Gastric)

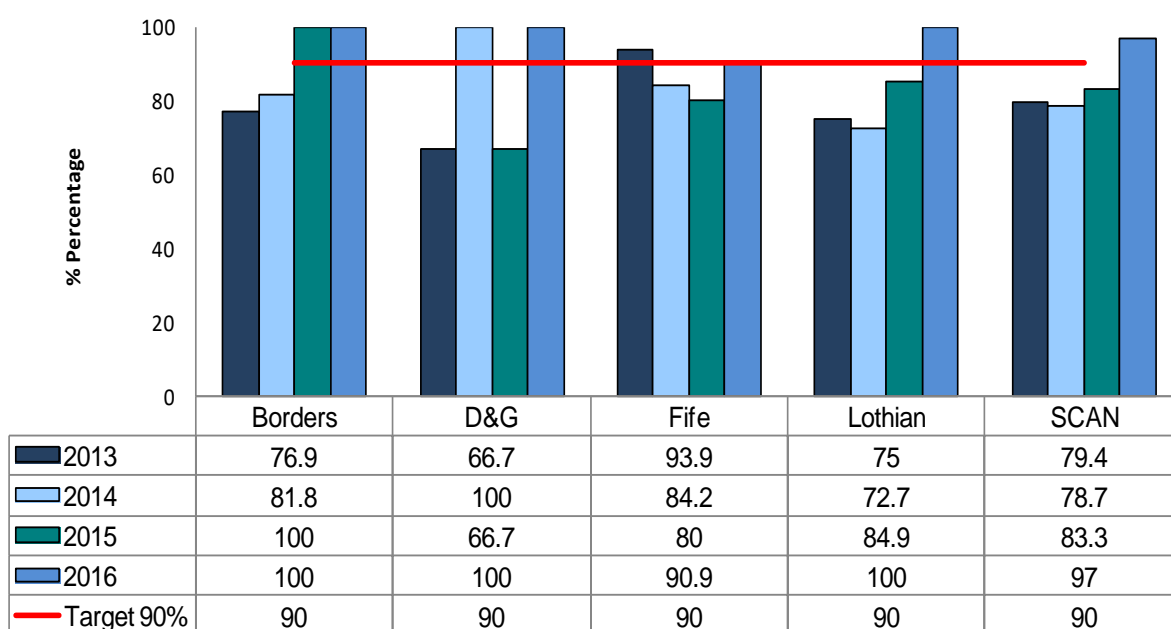


Following the formal review after 3 years of data collection, the measurability for QPI 1 was changed for year 4 (2016), when a 6 week timeframe was introduced and the target was increased to 95%. Below are QPI 1 details from the first 3 years.

QPI 1 - Endoscopy (Oesophageal) 2013 - 2016



QPI 1 - Endoscopy (Gastric) 2013 - 2016



QPI 3 – Multi-Disciplinary Team (MDT) Meeting

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer discussed at the MDT meeting (MDM) before definitive treatment

Denominator = All patients with oesophageal or gastric cancer

Exclusions = Patients who died before first treatment

Oesophageal cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	173	302
Ineligible for this QPI	1	0	0	5	6
Numerator	21	40	63	159	283
Not recorded for numerator	0	0	0	0	0
Denominator	22	41	65	168	296
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	95.5	97.6	96.9	94.6	95.6

Comments where QPI was not met

Lothian: The QPI target was not met showing a shortfall of 9 cases (0.4%): 6 patients received a Stent prior to MDT, 3 patients underwent EMR which diagnosed and treated the cancer.

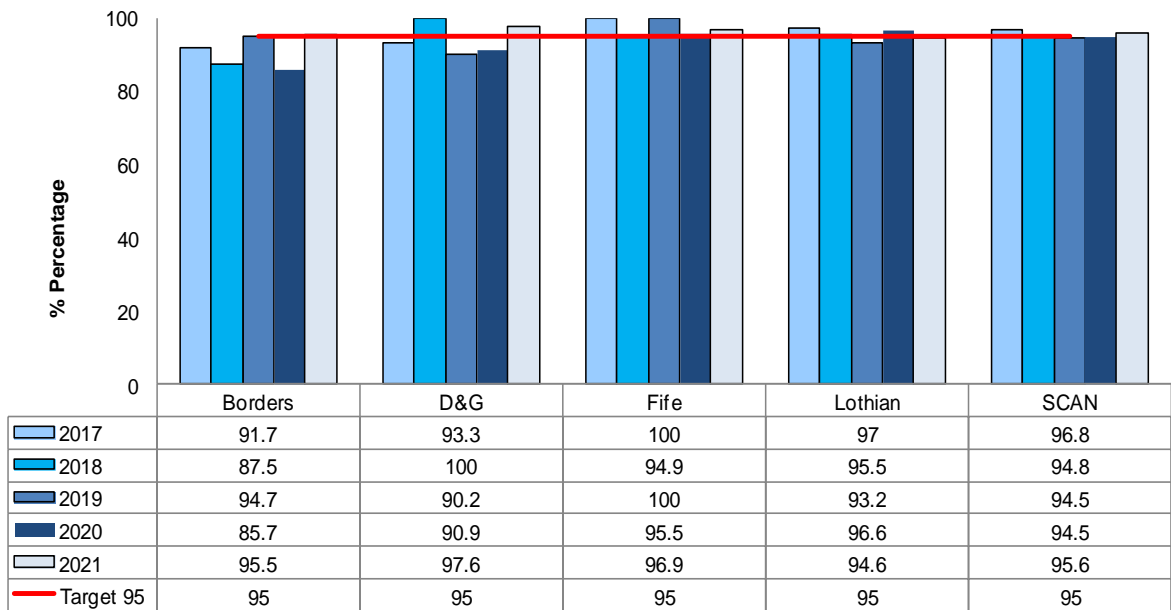
Gastric cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	0	0	1	2	3
Numerator	3	11	18	45	77
Not recorded for numerator	0	0	0	0	0
Denominator	3	11	19	45	78
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	100.0	100.0	94.7	100.0	98.7

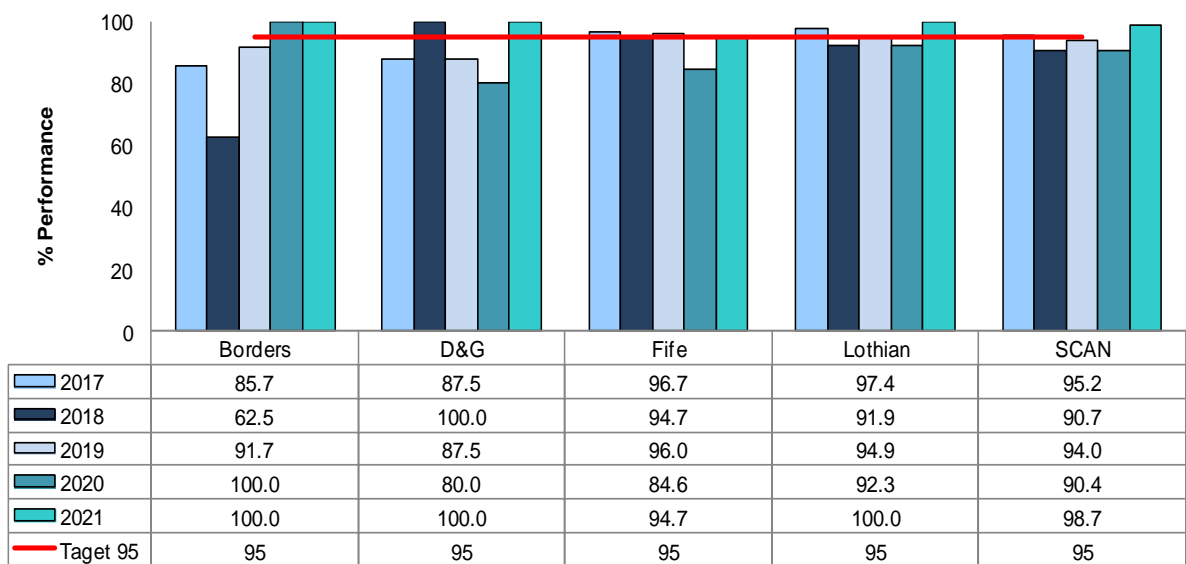
Comments where QPI was not met

Fife: The QPI target was not met showing a shortfall of 1 case (0.3%). 1 patient for Best Supportive Care decision made on the ward due to extensive disease and not discussed at MDT.

QPI 3 - Multi-Disciplinary Team (Oesophageal)

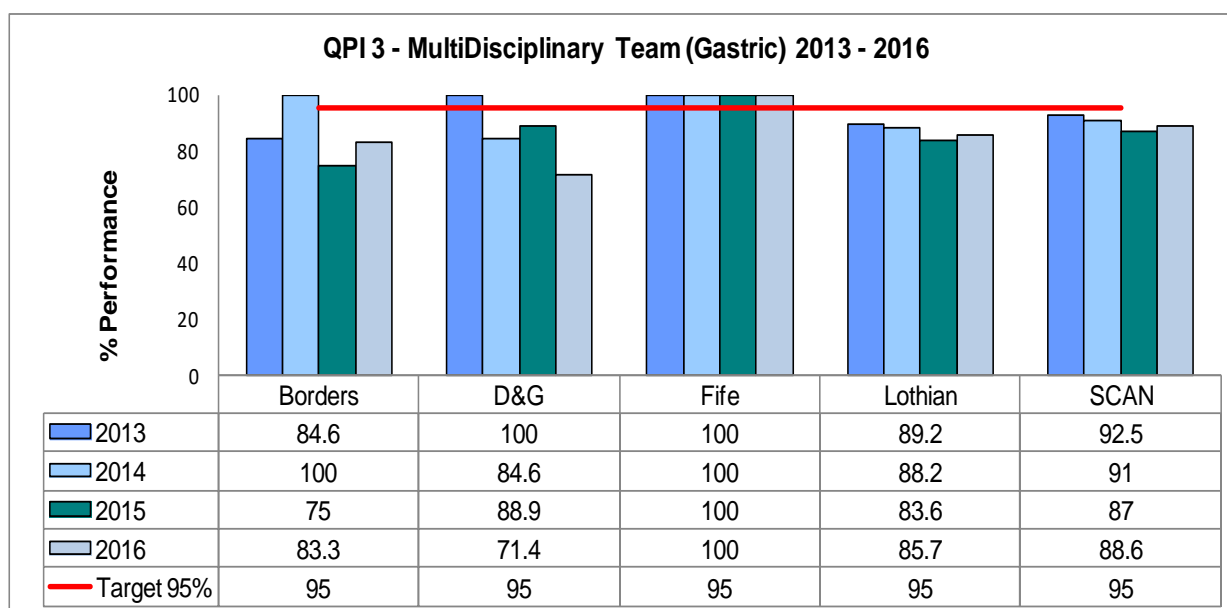
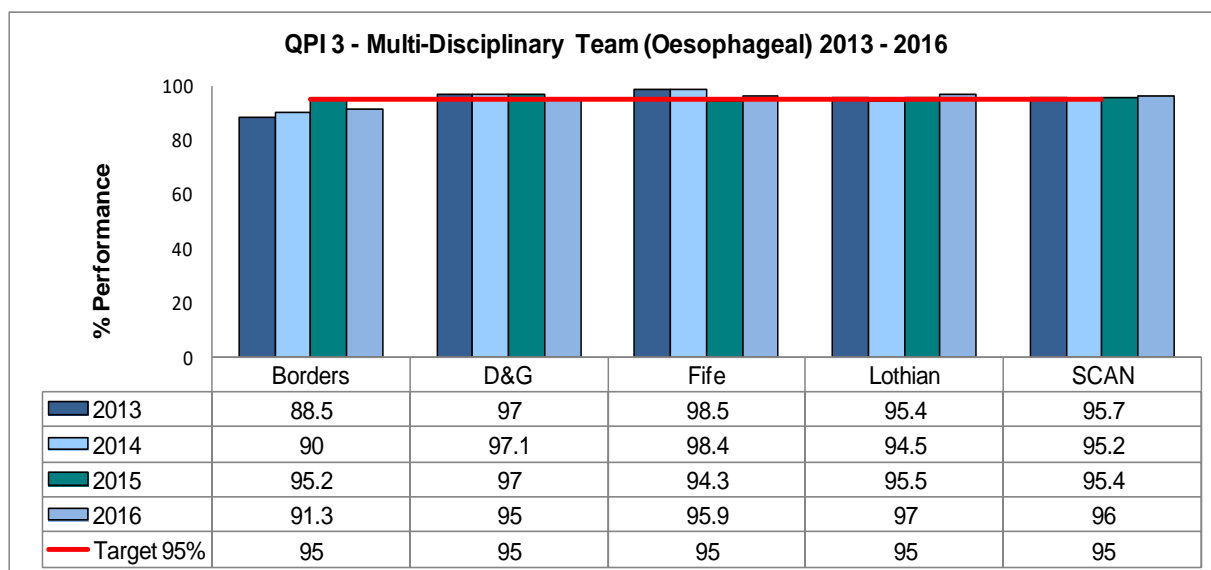


QPI 3 - Multi-Disciplinary Team (Gastric)



Comment: No issues identified.

After the formal 3 year review the measurability for QPI 3 changed for year 4 (2016). The QPI was previously more complex and included whether TNM and treatment intent were recorded at MDM. Below are the details from the first 4 years of QPI3 results with those requirements.



QPI 4i – Staging (TNM)

Staging Target = 90%

Numerator = Number of patients with oesophageal or gastric cancer who have TNM stage recorded at the MDT meeting (MDM) prior to treatment

Denominator = All patients with an oesophageal or gastric cancer diagnosis

Exclusions = No exclusions

Oesophageal cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	173	302
Ineligible for this QPI	0	0	0	0	0
Numerator	20	39	64	157	280
Not recorded for numerator	0	0	0	0	0
Denominator	23	41	65	173	302
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	87.0	95.1	98.5	90.8	92.7

Comments where QPI was not met

Borders: The QPI target was not met showing a shortfall of 3 cases (3.0%). 2 patients had pathological diagnoses with no CT undertaken (both were frail with co-morbidities), 1 patient was diagnosed and treated with EMR with no TNM recorded.

Gastric cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	0	0	0	0	0
Numerator	2	10	17	45	74
Not recorded for numerator	0	0	0	0	0
Denominator	3	11	20	47	81
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	66.7	90.9	85.0	95.7	91.4

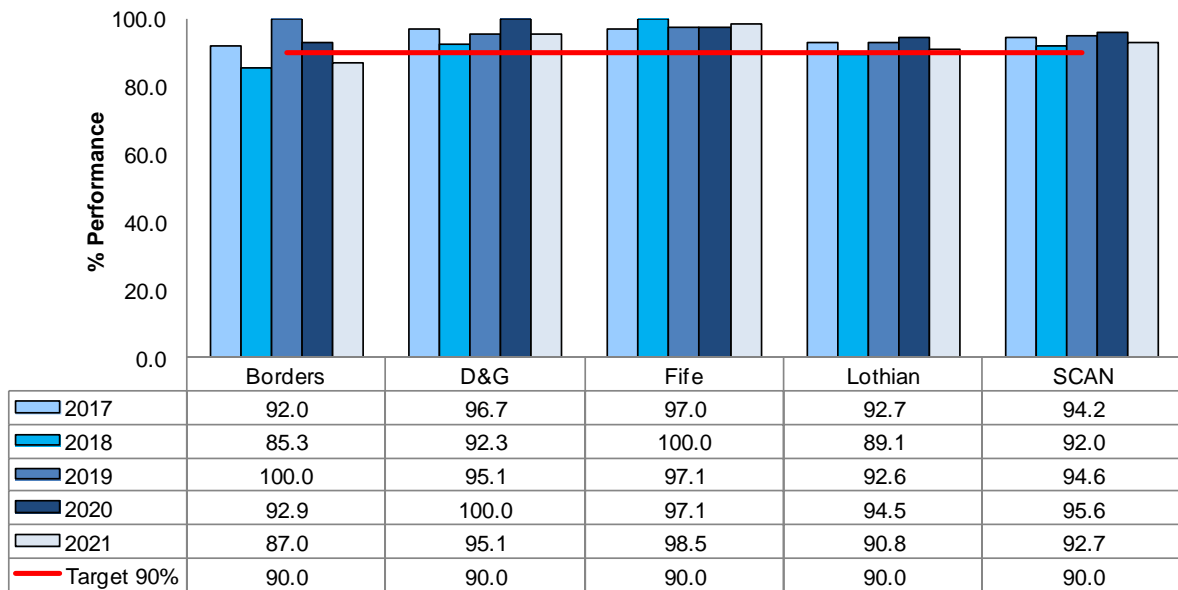
Comments where QPI was not met

Borders: The QPI target was not met showing a shortfall of 1 case (23.3%). This patient had advanced disease at pathology with no CT undertaken due to age and frailty.

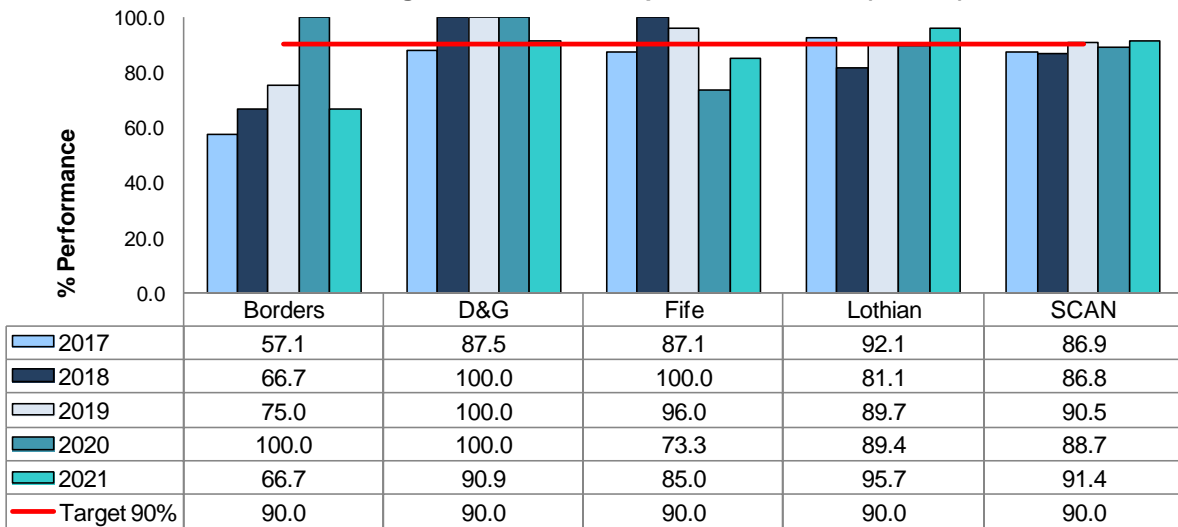
Fife: The QPI target was not met showing a shortfall of 3 cases (5%). 3 patients did not have TNM recorded, 1 patient had no CT undertaken as too frail, 1 patient died before MDT discussion and 1 patient was not discussed at MDT.

Following the second 3 year formal review a new data item was added TNM recorded at MDT (Yes/No) for year 9 (2021).

QPI 4 - TNM Stage recorded at MDT prior to treatment (Oesophageal)



QPI 4 - TNM Stage recorded at MDT prior to treatment (Gastric)



Comment: No issues identified.

QPI 4ii – Treatment Intent

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer who have treatment intent recorded at the MDT meeting prior to treatment.

Denominator = All patients with an oesophageal or gastric cancer diagnosis (no exclusions)

Oesophageal Cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	173	302
Ineligible for this QPI	0	0	0	0	0
Numerator	22	38	65	151	276
Not recorded for numerator	0	0	0	0	0
Denominator	23	41	65	173	302
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	95.7	92.7	100.0	87.3	91.4

Comments where QPI was not met

D&G: The QPI target was not met showing a shortfall of 3 cases (2.3%). 1 patient suffered a stroke midway through staging and did not recover (BSC). 1 patient had rapid progression of metastatic cancer and died before MDT discussion and 1 patient discussed at Head and Neck MDT only where no treatment intent was recorded.

Lothian: The QPI target was not met showing a shortfall of 22 cases (7.7%): 22 cases – 16 patients were discussed at MDT and 6 were not discussed.

Of the 16 discussed, 5 were to be reviewed at clinic to check fitness prior to treatment (4 of these were not fit at clinic (2 received a stent and 2 received radiotherapy) 1 declined treatment)). 4 were diagnosed and treated with EMR, so intent was not recorded prior to treatment. 3 were discussed at other Cancer MDTs (1 head and neck patient was given chemotherapy, 1 colorectal patient was given chemotherapy and 1 CUP patient received a Stent). 2 patients received a Stent. 2 were discussed at an Interim MDT and declined all treatments.

For the 6 patients not discussed 3 patients died before MDT discussion. 2 were not referred to the MDT and 1 patient received EMR which diagnosed and treated cancer.

Gastric Cancer

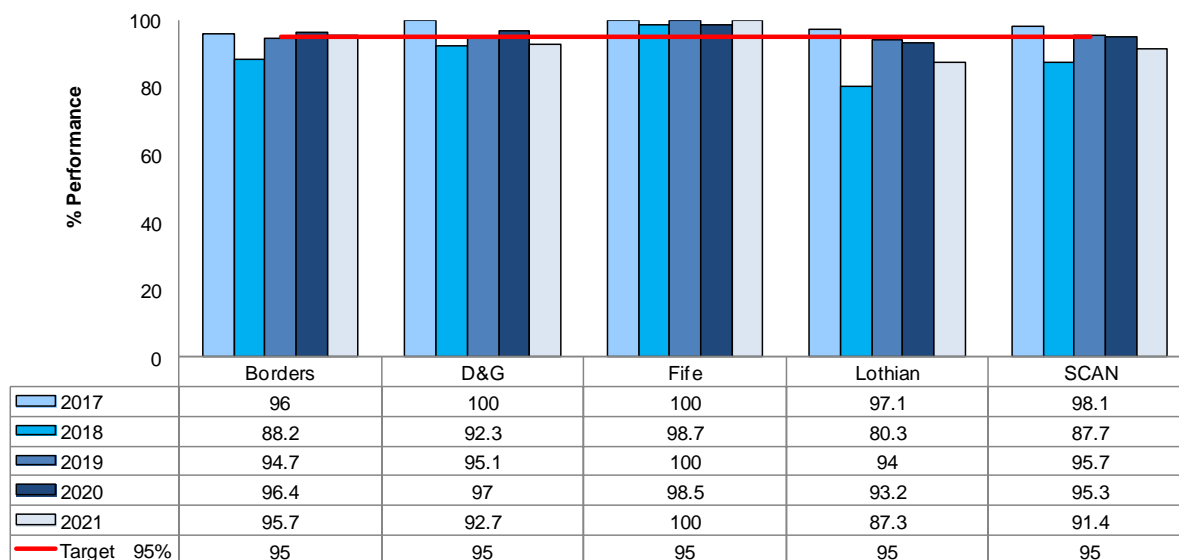
Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	0	0	0	0	0
Numerator	3	11	18	42	74
Not recorded for numerator	0	0	0	0	0
Denominator	3	11	20	47	81
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	100.0	100.0	90.0	89.4	91.4

Comments where QPI was not met

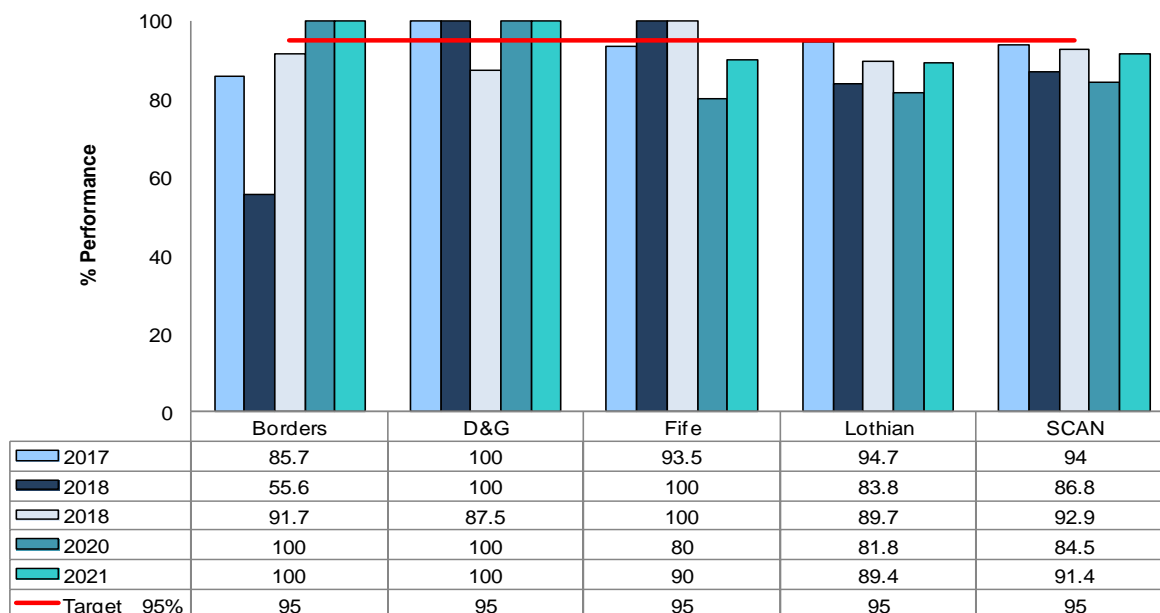
Fife: The QPI target was not met showing a shortfall of 2 cases (5%). 2 patients were not discussed at MDT - 1 patient died before MDT discussion and 1 patient Best Supportive Care decision was made on Ward not discussed at MDT.

Lothian: The QPI target was not met showing a shortfall of 5 cases (5.6%): 4 were discussed at MDT and 1 was not. Of the 4 discussed, 3 were to be reviewed at clinic to assess fitness for treatment (1 received argon treatment, 1 was for BSC and 1 patient died before first treatment). The 4th frail patient received a stent. 1 patient was not discussed and died before MDT.

QPI 4 - Treatment Intent recorded at MDT (Oesophageal)



QPI 4 - Treatment Intent recorded at MDT (Gastric)



TNM stage and treatment intent were previously part of QPI 3 so comparable data are not available prior to 2016.

Comment

These patients were either not diagnosed until EMR / not discussed before appropriate palliative treatment or had clear plans, but no final treatment intent as the patients were being assessed for fitness post MDT to determine which two treatments were correct. I think this relates more to the QPI rather than an issue with clinical practice.

**QPI 5i – Nutritional Assessment: Malnutrition Universal Screening Tool (MUST)
Target = 95%**

Numerator = Number of patients with oesophageal or gastric cancer who undergo nutritional screening with the Malnutrition Universal Screening Tool (MUST) before first treatment.

Denominator = All patients with an oesophageal or gastric cancer diagnosis

Exclusions = No exclusions

Oesophageal cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	173	302
Ineligible for this QPI	1	0	0	0	1
Numerator	20	40	63	122	245
Not recorded for numerator	0	0	0	2	0
Denominator	22	41	65	173	301
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	90.9	97.6	96.9	70.5	81.4

Comments where QPI was not met

Borders: The QPI target was not met showing a shortfall of 2 cases (4.1%). One patient had MUST score 2 months post EMR and one patient 3 months post first treatment.

Lothian: The QPI target was not met showing a shortfall of 49 cases (24.5%): 23 patients received MUST screening within two weeks of the first treatment. 7 patients received screening within two weeks to three months. 3 patients received screening greater than 3 months. 16 patients had no MUST score recorded.

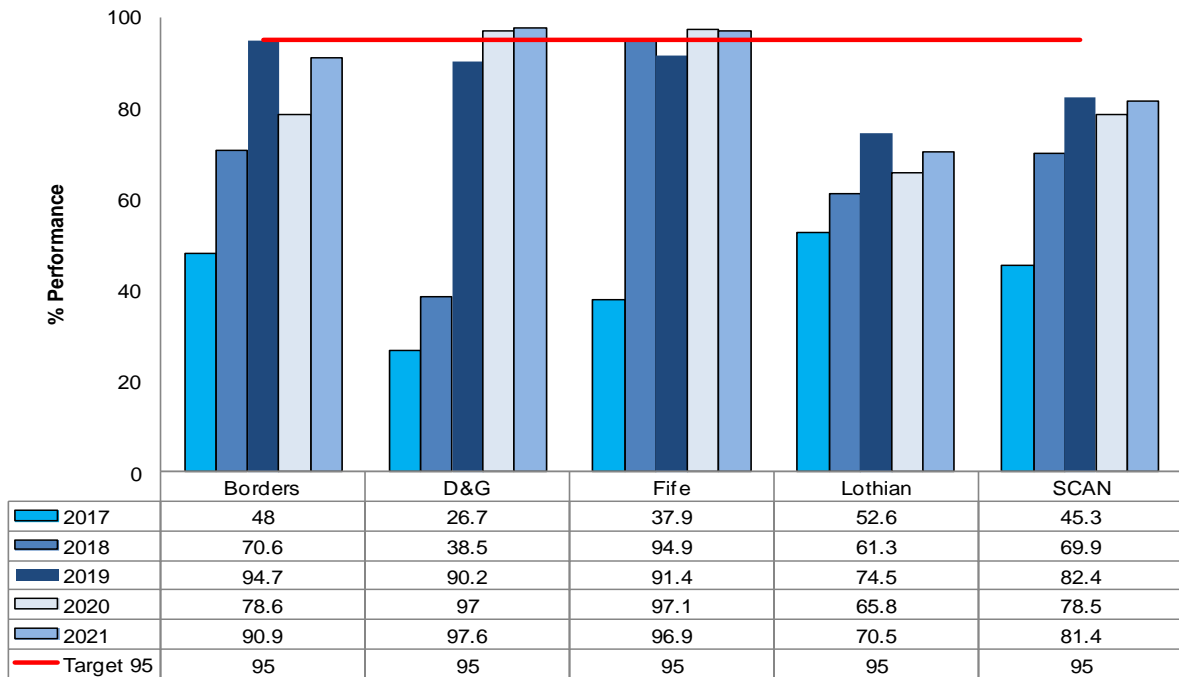
Gastric cancer

Target 95%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	2	0	0	0	2
Numerator	1	11	19	35	66
Not recorded for numerator	0	0	0	0	0
Denominator	1	11	20	47	79
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	100.0	100.0	95.0	74.5	83.5

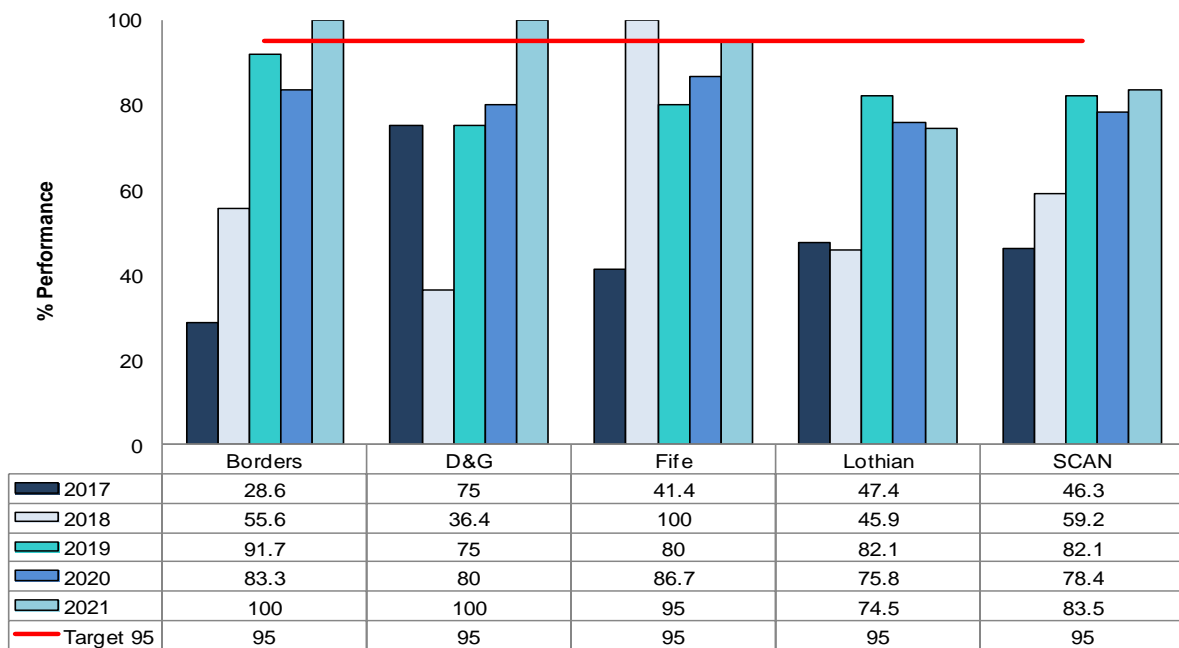
Comments where QPI was not met

Lothian: The QPI target was not met showing a shortfall of 12 cases (20.5%): 4 patients received a MUST screening within two weeks of the first treatment. 3 patients received screening within two weeks to three months. 1 patient received screening greater than 3 months. 4 patients had no MUST score recorded.

QPI 5i Nutritional Assessment: MUST (Oesophageal)



QPI 5i Nutritional Assessment: MUST (Gastric)



Comment

Generally, there has been some improvement in the nutritional QPI but still some work for Lothian in getting initial MUST scores (about half of those who fail do get a Score within 2 weeks of treatment rather than before).

Action: New dietician appointed on the Ward. The dietician attends MDT meeting and MUST score has been added to the referral form. No further action required.

QPI 5ii – Nutritional Assessment: Assessed by a dietician for patients with a high risk of malnutrition (MUST score ≥ 2)

Target = 90%

Numerator: Patients with high risk of malnutrition (MUST Score ≥ 2) who are assessed by a dietician.

Denominator: All patients with MUST Score ≥ 2

No exclusions

Oesophageal cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	173	302
Ineligible for this QPI	10	27	40	83	160
Numerator	12	14	18	80	124
Not recorded for numerator	0	0	0	0	0
Denominator	13	14	18	90	135
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	2	14	0
% Performance	92.3	100.0	100.0	88.9	91.9

Comments where QPI was not met

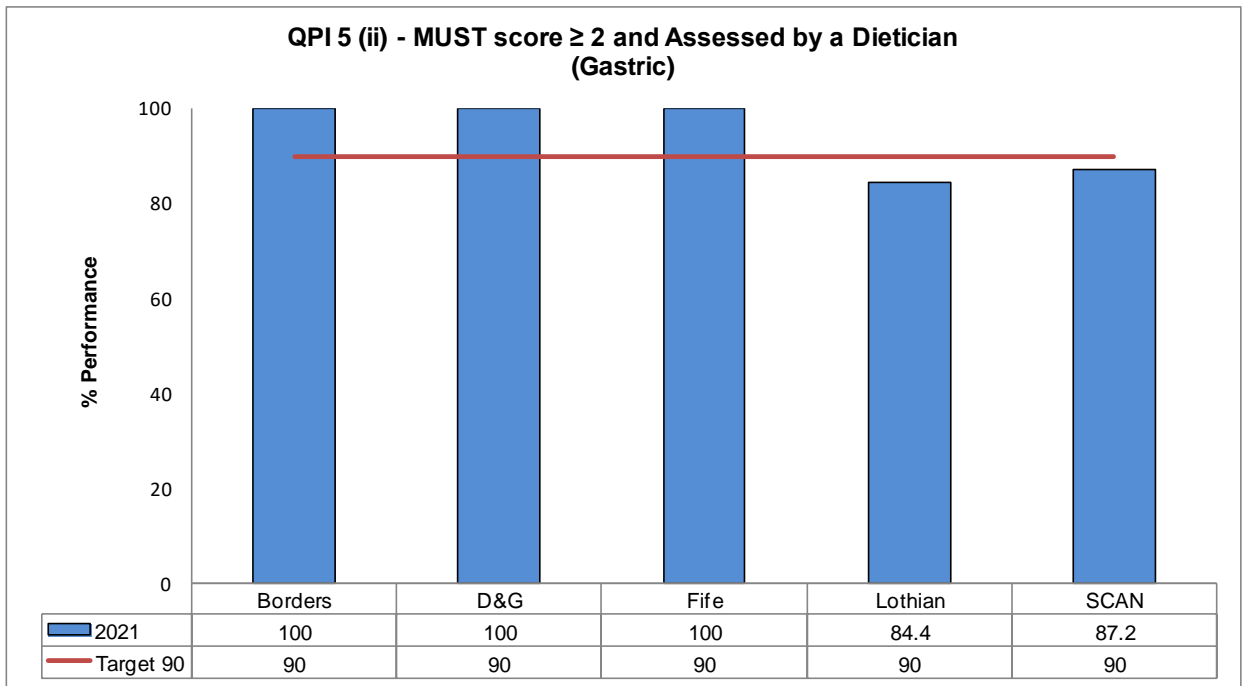
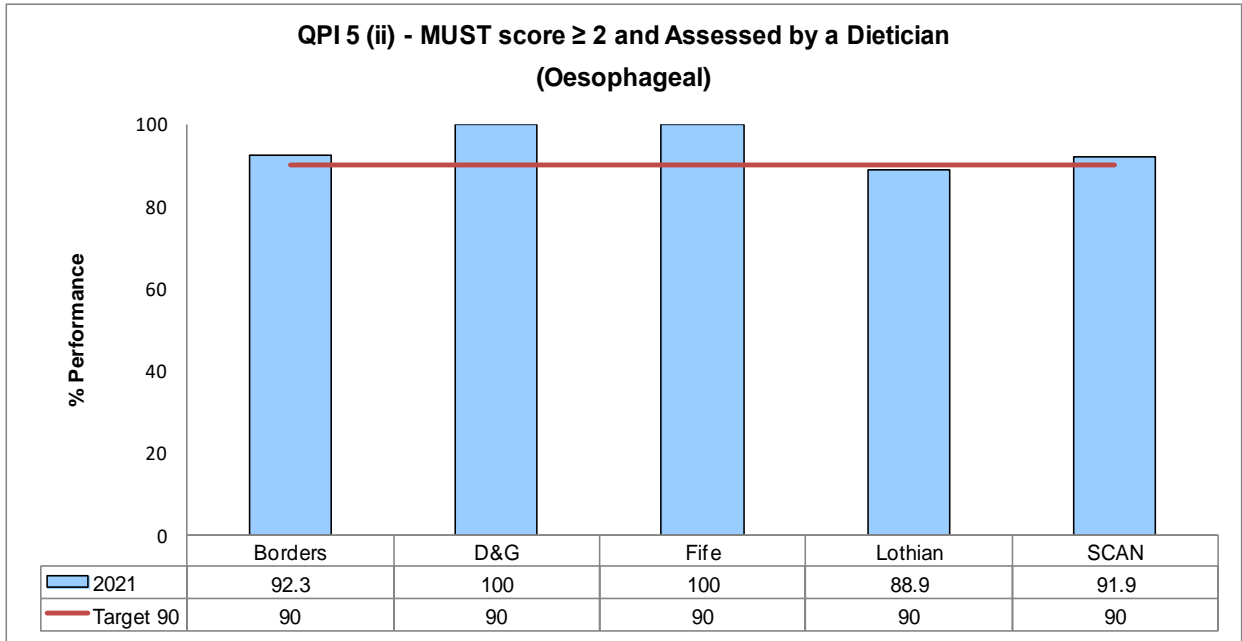
Lothian: The QPI target was not met showing a shortfall of 10 cases (1.1%): 6 patients not seen were for BSC, 2 patients received palliative chemotherapy, 1 patient palliative radiotherapy and 1 patient refused treatment.

Gastric cancer

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	2	0	13	15	30
Numerator	1	4	2	27	34
Not recorded for numerator	0	0	0	0	0
Denominator	1	4	2	32	39
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	100.0	100.0	100.0	84.4	87.2

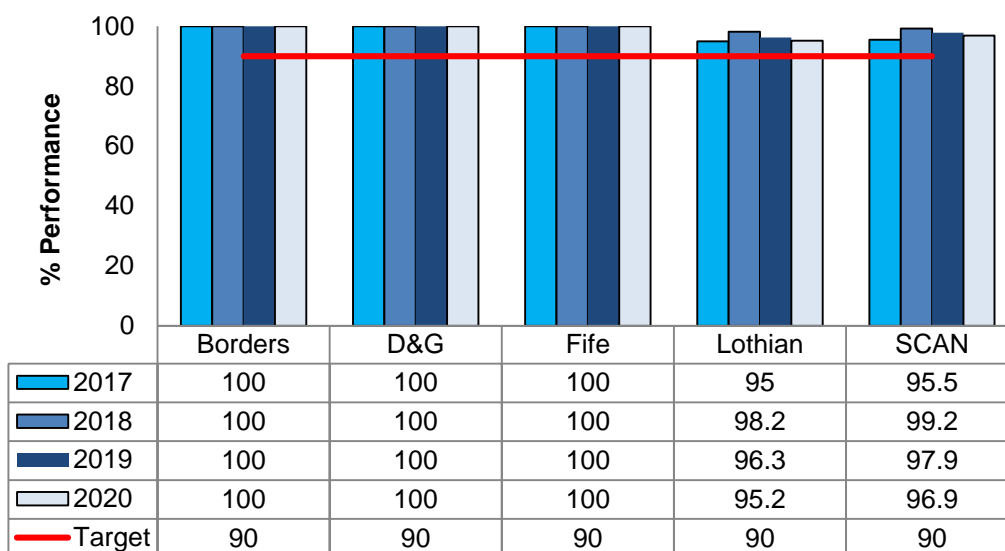
Comments where QPI was not met

Lothian: The QPI target was not met showing a shortfall of 5 cases (5.6%): 2 patients not seen were for BSC, 1 patient for palliative chemotherapy, 1 patient refused treatment and 1 patient died before first treatment.

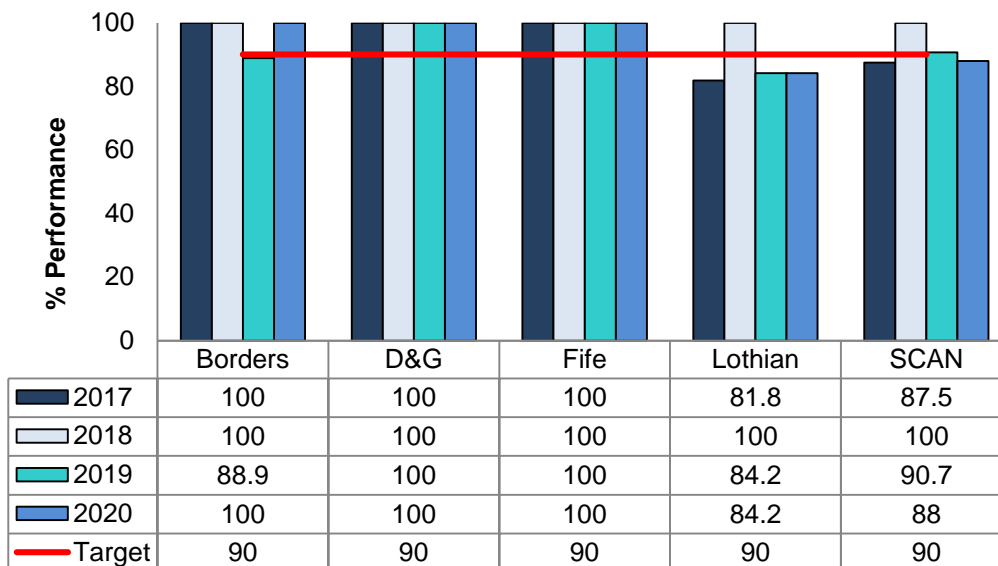


Following the second 3 year formal review the QPI 5ii was amended to patients who were assessed by a dietician from year 9, (2021). Below shows QPI 5ii Patients who were referred to a dietician prior to 2021.

QPI 5 (ii) - MUST score \geq Referred to a Dietician (Oesophageal)



QPI 5 (ii) - MUST Score \geq 2 Referred to a Dietician (Gastric)



SURGICAL OUTCOMES

QPI 6 – Appropriate Selection of Surgical Patients

Target = 80%

Numerator = Number of patients with oesophageal or gastric cancer who receive neo-adjuvant chemotherapy or chemoradiotherapy who then undergo surgical resection

Denominator = All patients with oesophageal or gastric cancer who receive neo-adjuvant chemotherapy or chemoradiotherapy.

Exclusions = No exclusions

Oesophageal cancer

Target 80%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	146	275
Ineligible for this QPI	20	39	53	122	234
Numerator	3	2	11	26	42
Not recorded for numerator	0	0	0	0	0
Denominator	3	2	12	30	47
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	100.0	100.0	91.7	86.7	89.4

Gastric cancer

Target 80%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	3	11	17	40	71
Numerator	0	0	1	5	6
Not recorded for numerator	0	0	0	0	0
Denominator	0	0	3	7	10
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	N/A	N/A	33.3	71.4	60.0

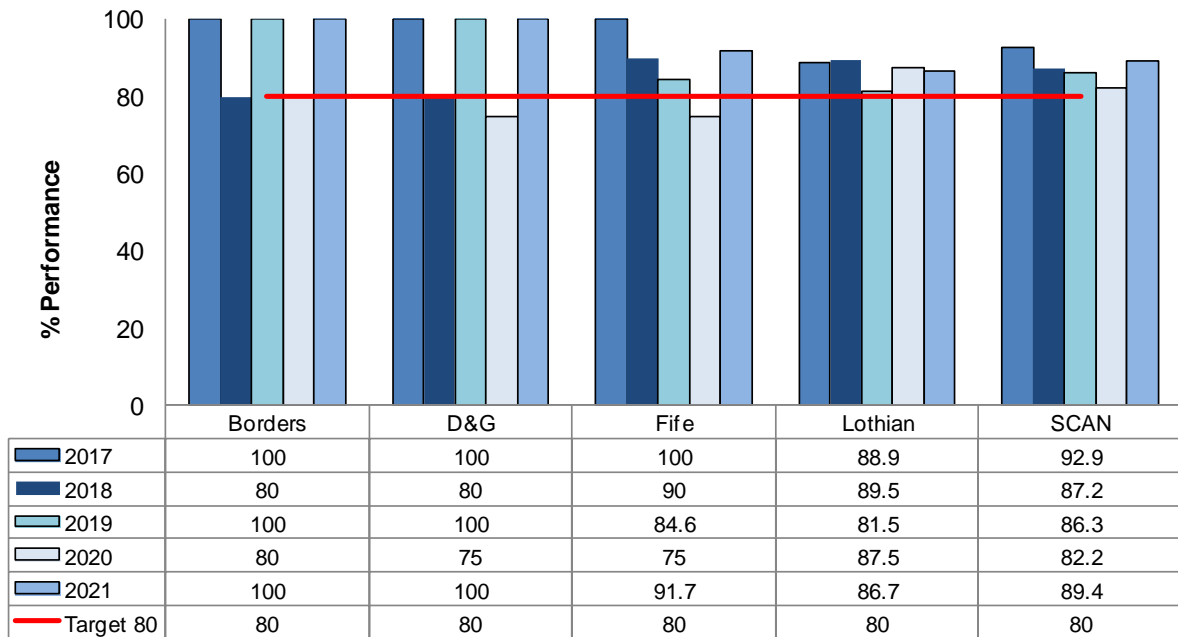
Comments where QPI was not met

Fife: The QPI target was not met showing a shortfall of 2 cases (46.7%). 2 patients were found to have unresectable disease at surgery.

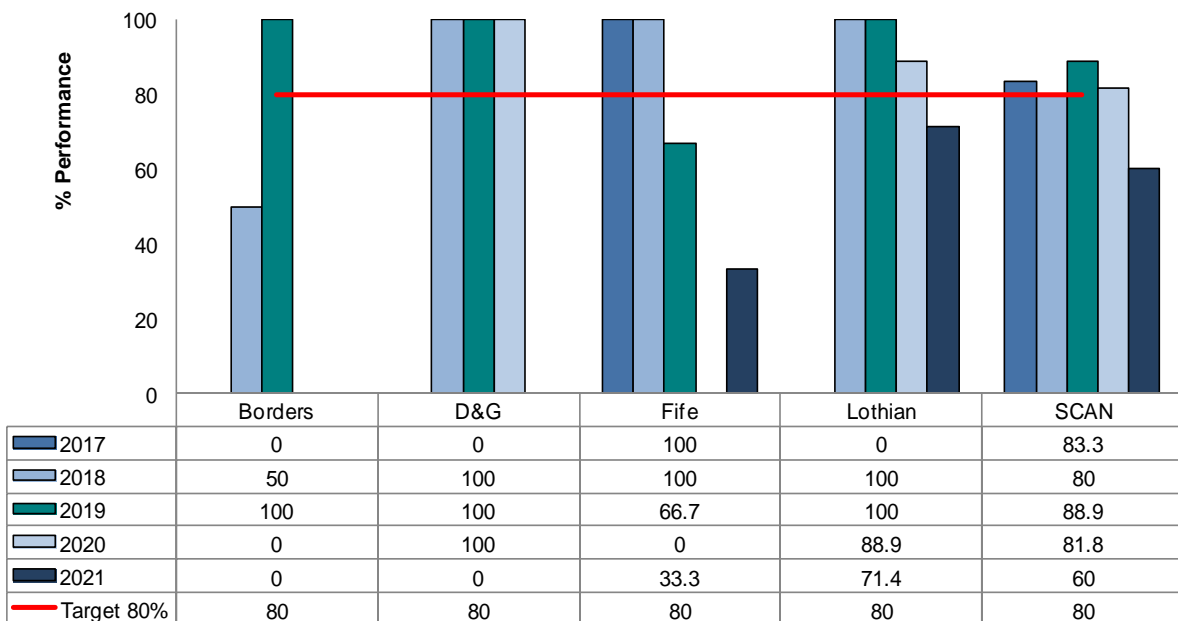
Lothian: The QPI target was not met showing a shortfall of 2 cases (7.6%): 2 patients received neoadjuvant chemotherapy but were not for surgery due to disease progression.

Comment: No actions were identified.

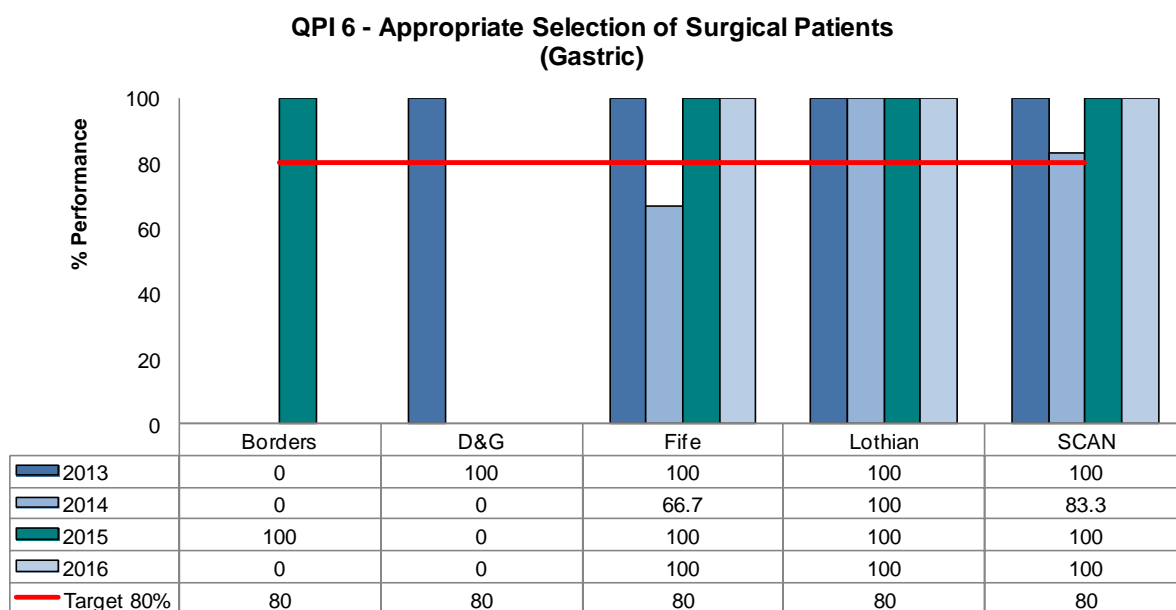
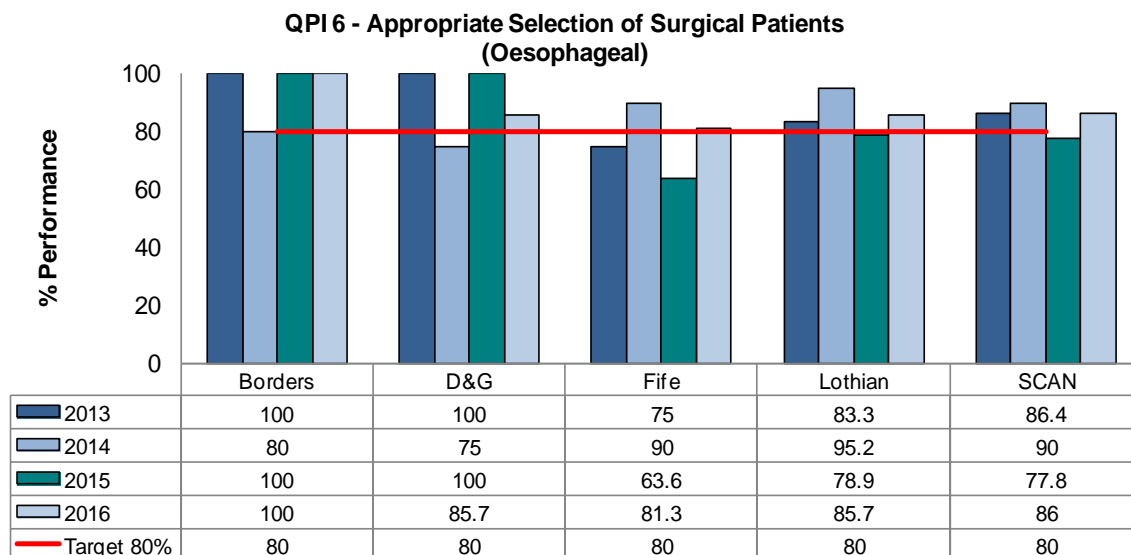
QPI 6 - Appropriate Selection of Surgical Patients (Oesophageal)



QPI 6 - Appropriate Selection of Surgical Patients (Gastric)



Following 3 year formal review QPI 6 was updated, for year 5. The QPI was amended to include patients who received chemoradiotherapy. The results are directly comparable for years 1-5, for the gastric cohort as there were no gastric cancer patients in SCAN who received chemoradiotherapy prior to 2017.



QPI 7 – 30/90 Day Mortality Following Surgery

30d Target <5%, 90d Target <7.5%

Numerator = Number of patients with oesophageal or gastric cancer who undergo surgical resection who die within 30 and 90 days of treatment

Denominator = All patients with oesophageal or gastric cancer and who undergo surgical resection (no exclusions).

Oesophageal cancer by Hospital of Surgery

30 Day Mortality Target < 5%	RIE	SCAN
2021 Cohort	302	302
Ineligible for this QPI	256	256
Numerator	0	0
Not recorded for numerator	0	0
Denominator	46	46
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	0.0	0.0

90 Day Mortality Target < 7.5%	RIE	SCAN
2021 Cohort	302	302
Ineligible for this QPI	256	256
Numerator	0	0
Not recorded for numerator	0	0
Denominator	45	45
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	0.0	0.0

One patient not yet 90 days post surgery at time of reporting.

Gastric cancer by Hospital of Surgery

30 Day Mortality

30 day Mortality Target < 5%	RIE	SCAN
2021 Cohort	81	81
Ineligible for this QPI	67	67
Numerator	0	0
Not recorded for numerator	0	0
Denominator	14	14
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	0.0	0.0

90 day Mortality Target < 7.5%	RIE	SCAN
2021 Cohort	81	81
Ineligible for this QPI	67	67
Numerator	0	0
Not recorded for numerator	0	0
Denominator	14	14
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	0.0	0.0

QPI 8 – Lymph Node Yield

Target = Oesophageal 90%, Gastric = 80%

Numerator = Number of patients with oesophageal or gastric cancer who undergo surgical resection where ≥ 15 lymph nodes are resected and pathologically examined

Denominator = All patients with oesophageal or gastric cancer who undergo surgical resection (no exclusions).

Oesophageal cancer – Hospital of surgery

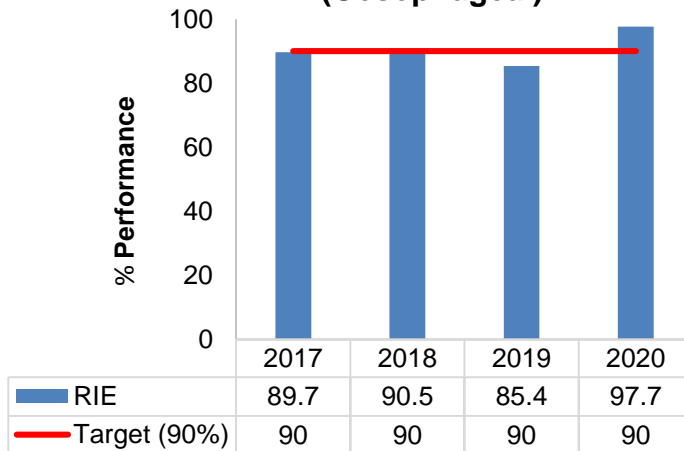
Target 90%	RIE	SCAN
2021 Cohort	302	302
Ineligible for this QPI	256	256
Numerator	46	46
Not recorded for numerator	0	0
Denominator	46	46
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	100.0	100.0

Gastric cancer – Hospital of surgery

Target 80%	RIE	SCAN
2021 Cohort	81	81
Ineligible for this QPI	67	67
Numerator	11	11
Not recorded for numerator	0	0
Denominator	14	14
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	78.6	78.6

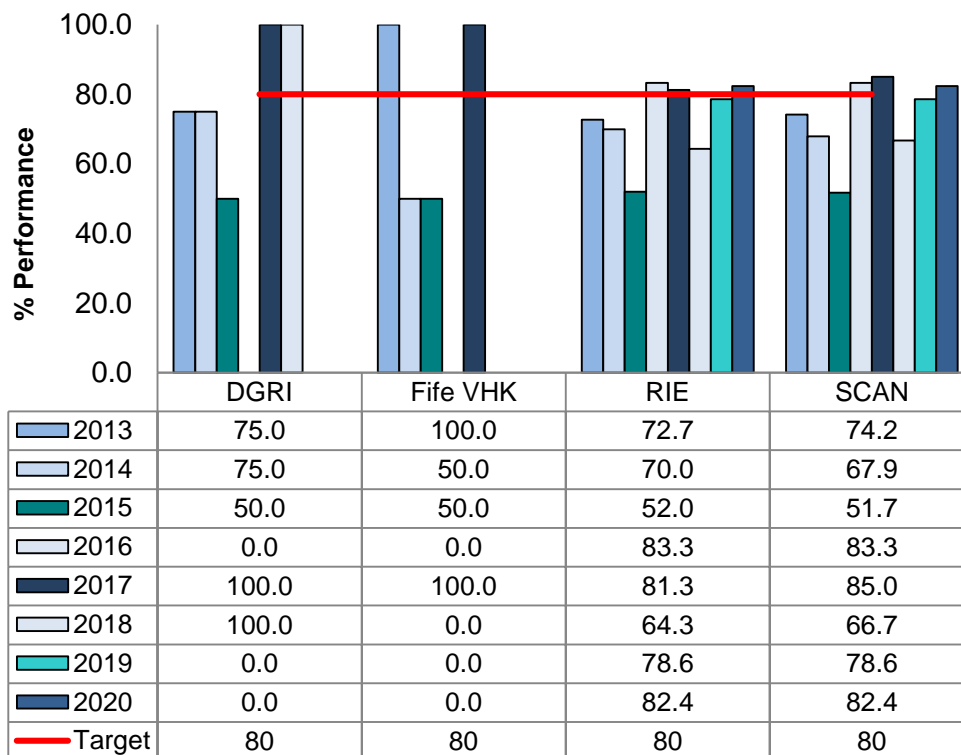
Pathology colleagues have put a lot of work into this and all cases are reviewed where lymph node yield was low. No actions were identified.

QPI 8 - Lymph Node Yield (Oesophageal)



Following formal review, QPI 8 was updated in 2016 to include results for oesophageal cancers with a target of 90%, previously QPI was reported for gastric cancer only and results are shown for gastric for all 8 years below with the unchanged target of 80%.

QPI 8 - Lymph Node Yield (Gastric)



QPI 9 – Length of Hospital Stay Following Surgery

Target = 60%

Numerator = Number of patients undergoing surgical resection for oesophageal or gastric cancer who are discharged within 14 days of surgical procedure

Denominator = All patients undergoing surgical resection for oesophageal or gastric cancer (no exclusions)

Oesophageal cancer – Hospital of surgery

Target 60%	RIE	SCAN
Numerator	26	26
Not recorded for numerator	0	0
Denominator	47	47
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	55.3	55.3

SCAN median was 14 days (range 9-105)

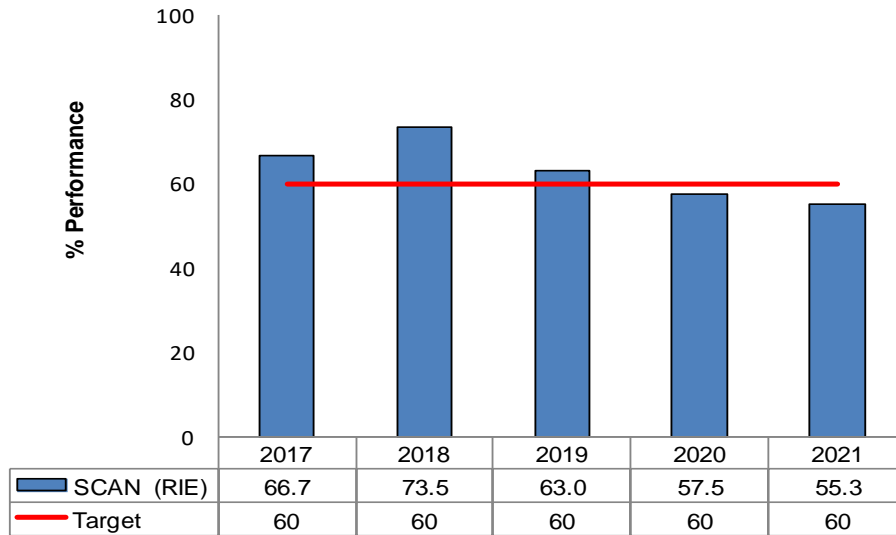
Gastric cancer – Hospital of surgery

Target 60%	RIE	SCAN
Numerator	11	11
Not recorded for numerator	0	0
Denominator	14	14
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	78.6	78.6

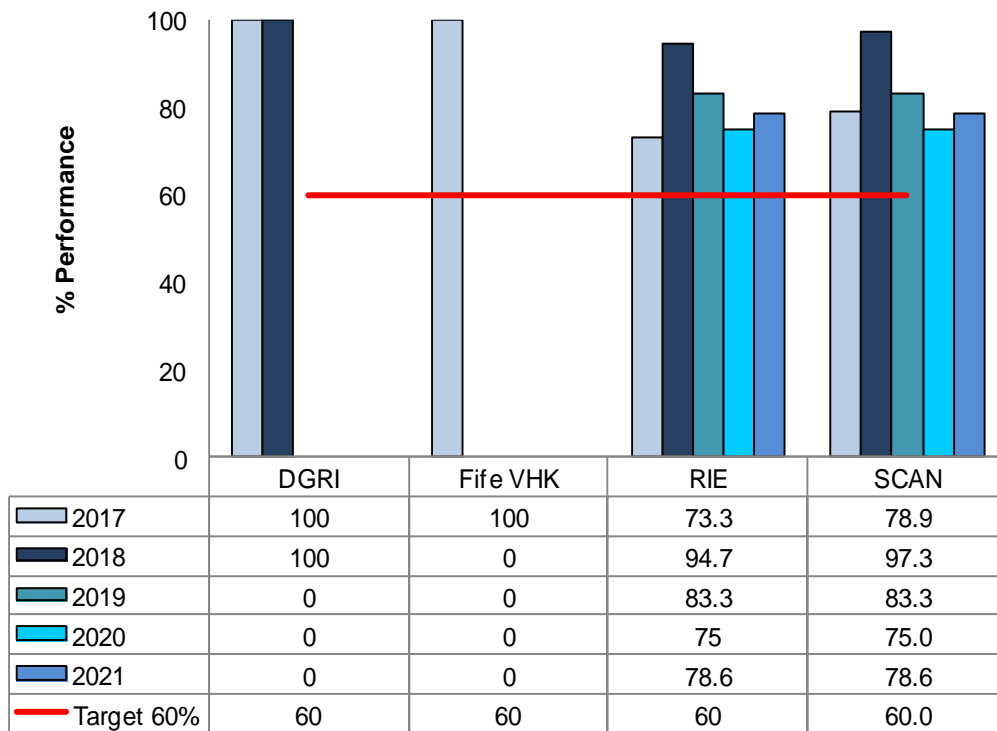
SCAN median was 9 days (range 8-22)

Following the second 3 year formal review QPI 9 (2021), Year 9 was amended to use QPI audit data

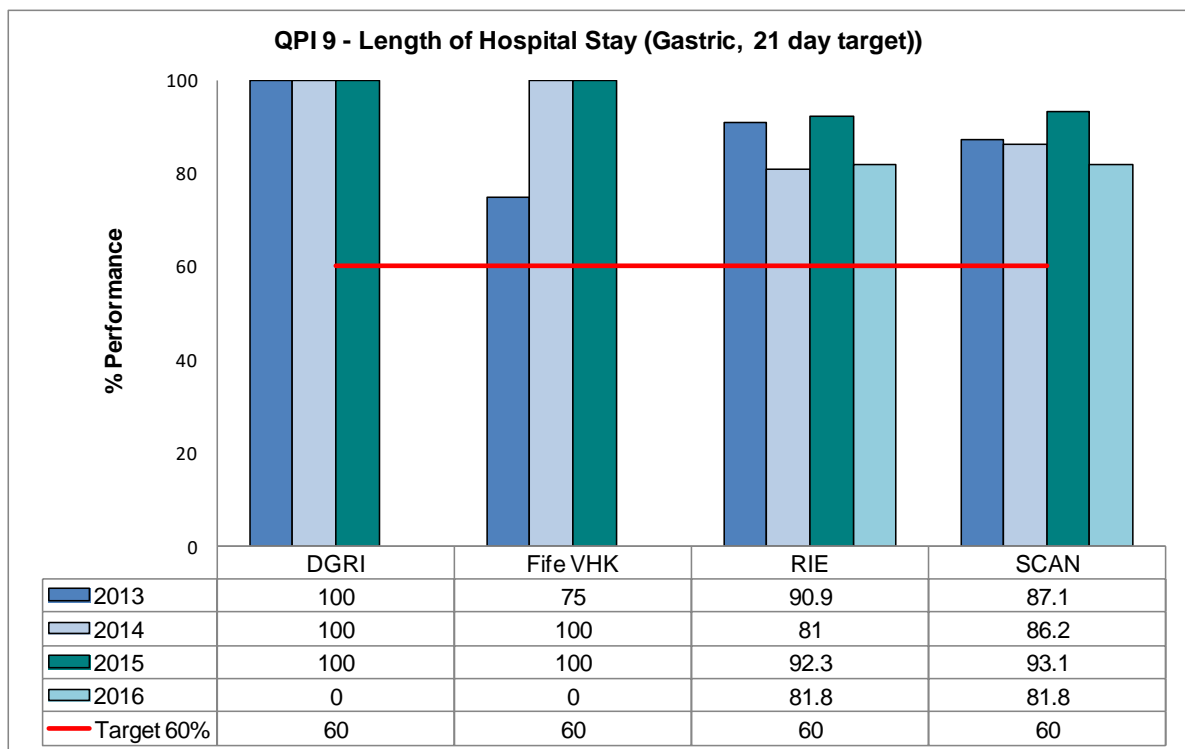
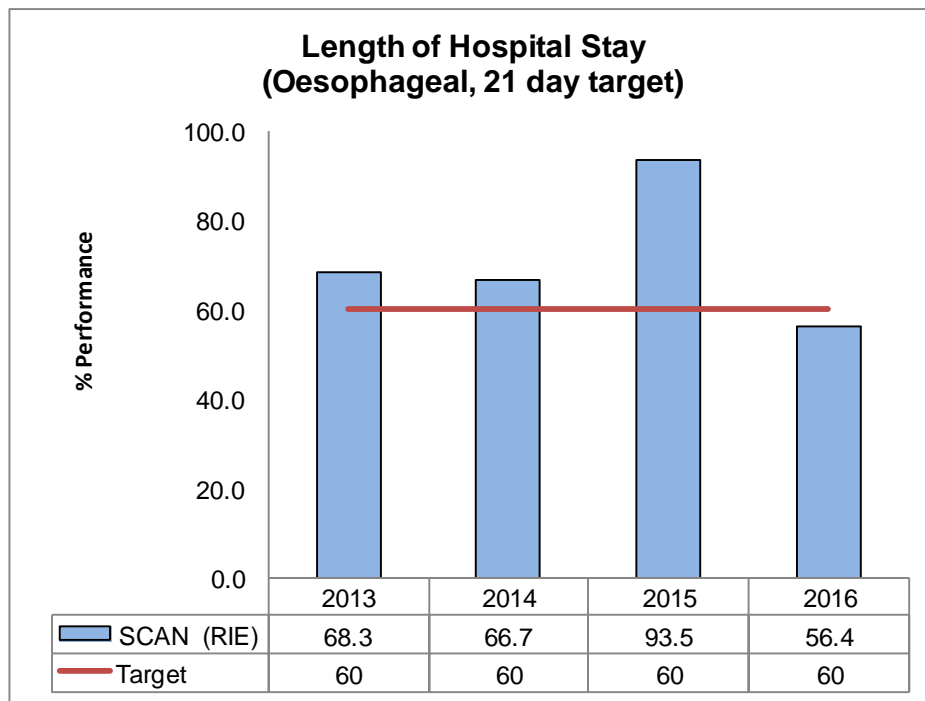
QPI 9 Length of Hospital Stay (Oesophageal)



QPI 9 - Length of Hospital of Stay (Gastric)



Following formal review, QPI 9 was updated in 2016. The time in days was changed from 21 to 14. Below are QPI 9 Oesophageal details for 3 years, measuring 21 days.



QPI 10i – Circumferential Resection Margins

Target = 70%

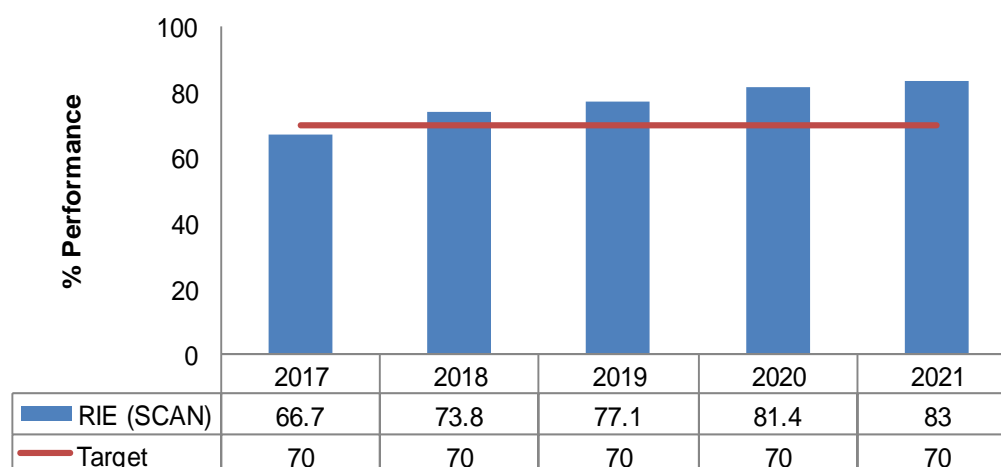
Numerator = Number of patients with oesophageal cancer who undergo surgical resection in which circumferential surgical margin are clear of tumour

Denominator = All patients with oesophageal cancer who undergo surgical resection (no exclusions)

Oesophageal cancer – Hospital of surgery

Target 70%	RIE	SCAN
2021 Cohort	302	302
Ineligible for this QPI	258	258
Numerator	39	39
Not recorded for numerator	0	0
Denominator	47	47
Not recorded for exclusions	0	0
Not recorded for denominator	0	0
% Performance	83.0	83.0

QPI 10(i) Circumferential Resection Margin (Oesophageal)



QPI 10ii – Longitudinal Resection Margin

Target = 95%

Numerator = Number of patients with oesophageal or gastric cancer who undergo surgical resection in which longitudinal surgical margin is clear of tumour

Denominator = All patients with gastric cancer who undergo surgical resection (no exclusions)

Oesophageal Longitudinal margin (Hospital of Surgery)

Target 95%	RIE	SCAN
2021 Cohort	302	302
Ineligible for this QPI	258	258
Numerator	46	46
Not recorded for numerator	0	0
Denominator	47	47
% Performance	97.9	97.9

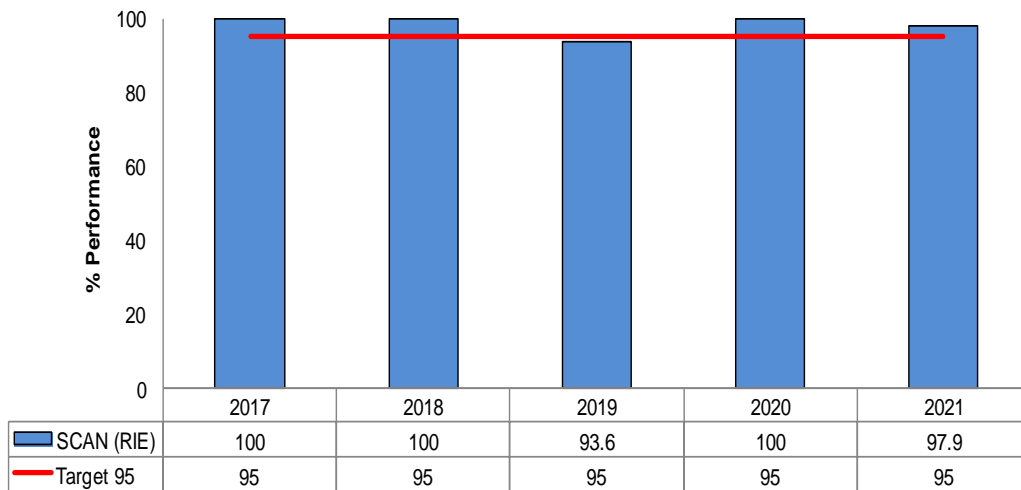
Gastric Longitudinal margin (Hospital of Surgery)

Target 95%	RIE	SCAN
2021 Cohort	81	81
Ineligible for this QPI	67	67
Numerator	11	11
Not recorded for numerator	0	0
Denominator	14	14
% Performance	78.6	78.6

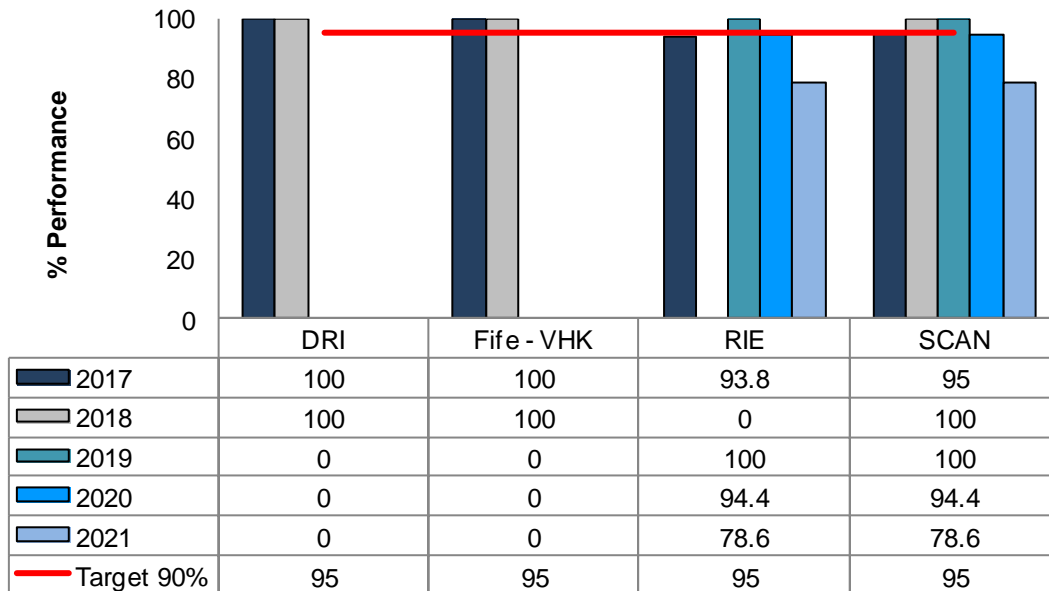
Comment:

Gastric - The 3 cases have been reviewed and no action was identified.

QPI 10(ii) Oesophageal Longitudinal Resection Margins



QPI 10ii - Gastric Longitudinal Resection Margin



Following first formal review, QPI 10 was updated in 2016. The oesophageal cancer circumferential and longitudinal resection margins were previously reported combined.

QPI 11 – Curative Treatment Rates

Target = 35%

Numerator = Number of patients with oesophageal or gastric cancer who undergo curative treatment.

Denominator = All patients with oesophageal or gastric cancer (no exclusions)

Oesophageal cancer – Health board of diagnosis

Target 35%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	41	65	173	302
Ineligible for this QPI	5	0	0	1	6
Numerator	3	3	18	48	72
Not recorded for numerator	0	0	0	0	0
Denominator	18	41	65	172	296
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	16.7	7.3	27.7	27.9	24.3

Gastric cancer – Health board of diagnosis

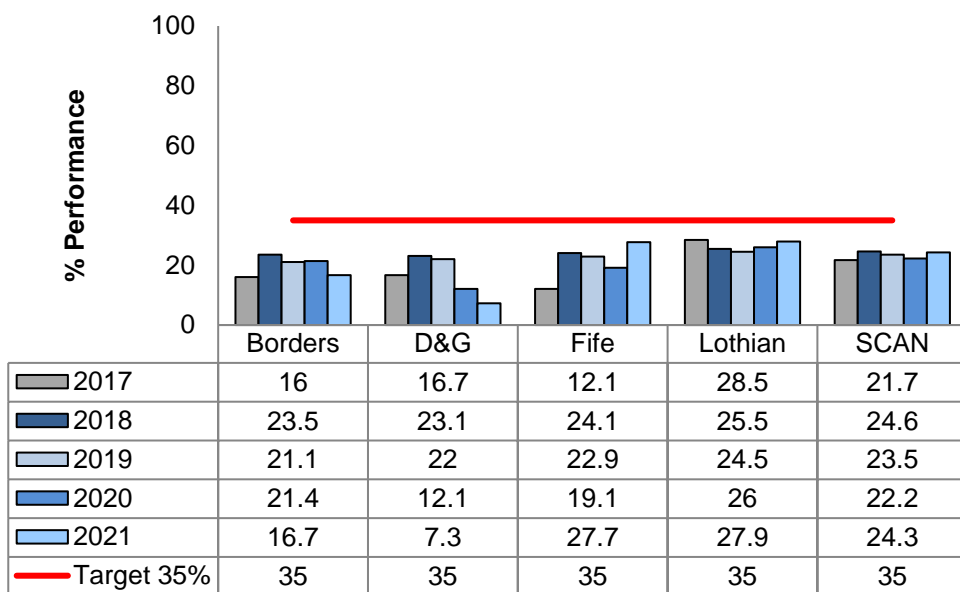
Target 35%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	3	11	20	47	81
Ineligible for this QPI	1	0	0	0	1
Numerator	0	3	7	9	19
Not recorded for numerator	0	0	0	0	0
Denominator	2	11	20	47	80
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	0.0	27.3	35.0	19.1	23.8

Comment:

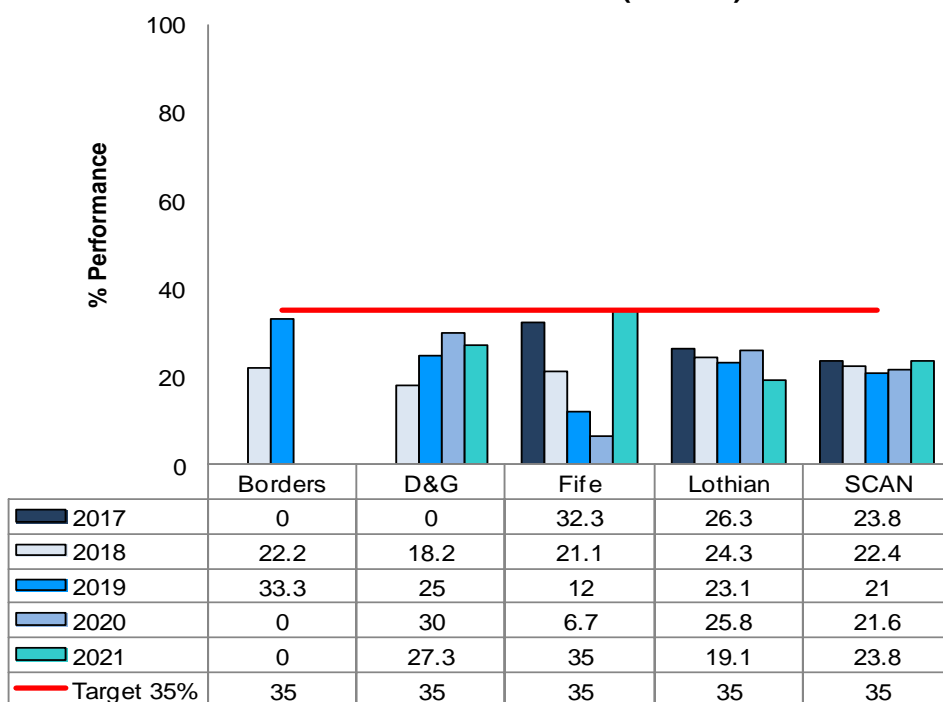
Although the overall rates are well below target, we have maintained our SCAN rates despite COVID challenges and perceived late diagnosis during that time which is some encouragement.

It was noted that Borders and D&G for Oesophageal rates were lower. All go through the same MDT and process, so we think decisions are similar.

QPI 11 - Curative Treatments (Oesophageal)



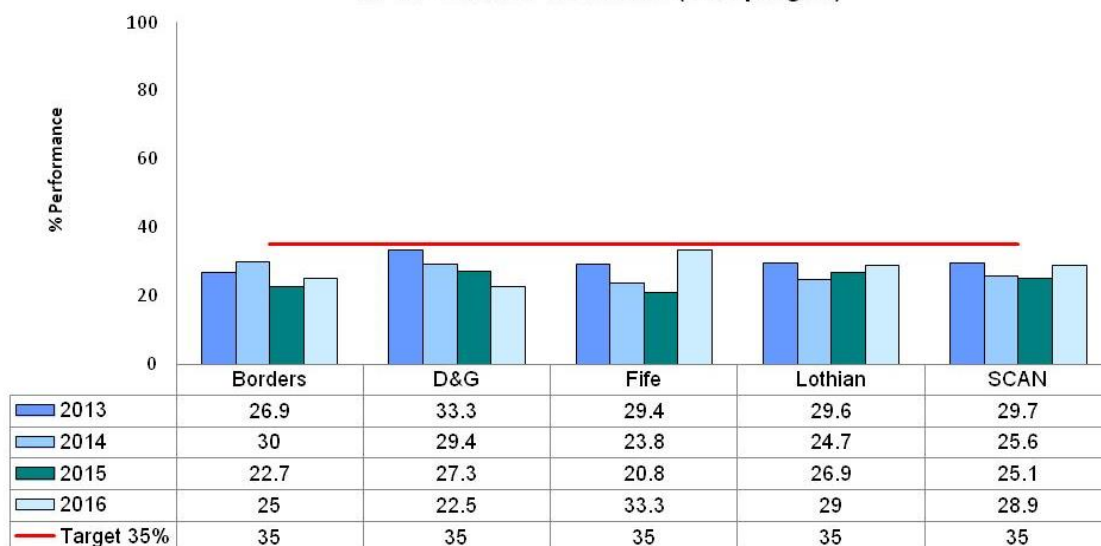
QPI 11 - Curative Treatments (Gastric)



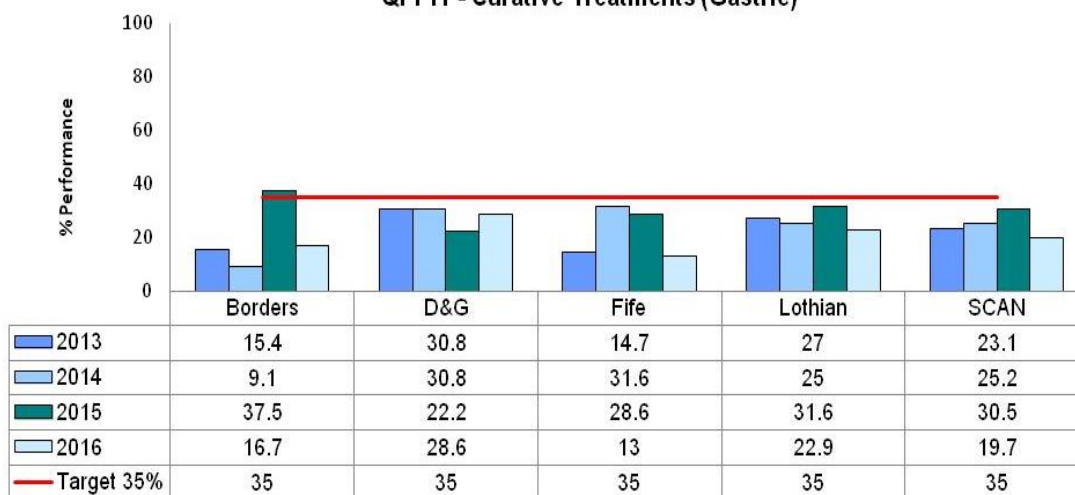
Following first formal review, QPI 11 was updated in Year 5, 2017. The curative treatment now includes neoadjuvant chemotherapy and neoadjuvant chemoradiotherapy and additional oesophagectomy and gastrectomy procedures.

Below are the QPI details for the first 4 years of analysis.

QP 11 - Curative Treatments (Oesophageal)



QPI 11 - Curative Treatments (Gastric)



QPI 12 – 30 Day Mortality Following Oncological Treatment for Oesophageal or Gastric Cancer

Target <5%

This QPI has been replaced with a standardised 30 day SACT Mortality QPI across all the tumour types covered by the QPI program.

Measurement is being revised to use data from Chemocare (electronic chemotherapy prescribing system) for reporting in order to utilise existing data and provide an accurate picture of all patients with OG cancer undergoing chemotherapy, rather than the subset of all diagnosed in the audit year cohort only.

A further target of <15% been added for patients undergoing palliative treatment.

The development of a National reporting tool is currently underway through a collaboration with Public Health Scotland and the 3 Cancer Networks; NCA, SCAN and WoSCAN. This is to ensure that reporting is consistent throughout Scotland.

Progress has been complicated by the differences in the 5 instances of Chemocare across Scotland and a date for initial reporting is yet to be confirmed at the time of writing this report.

QPI 13 – HER2 for Decision Making in Advanced Gastric and Gastro-oesophageal Junction Cancer

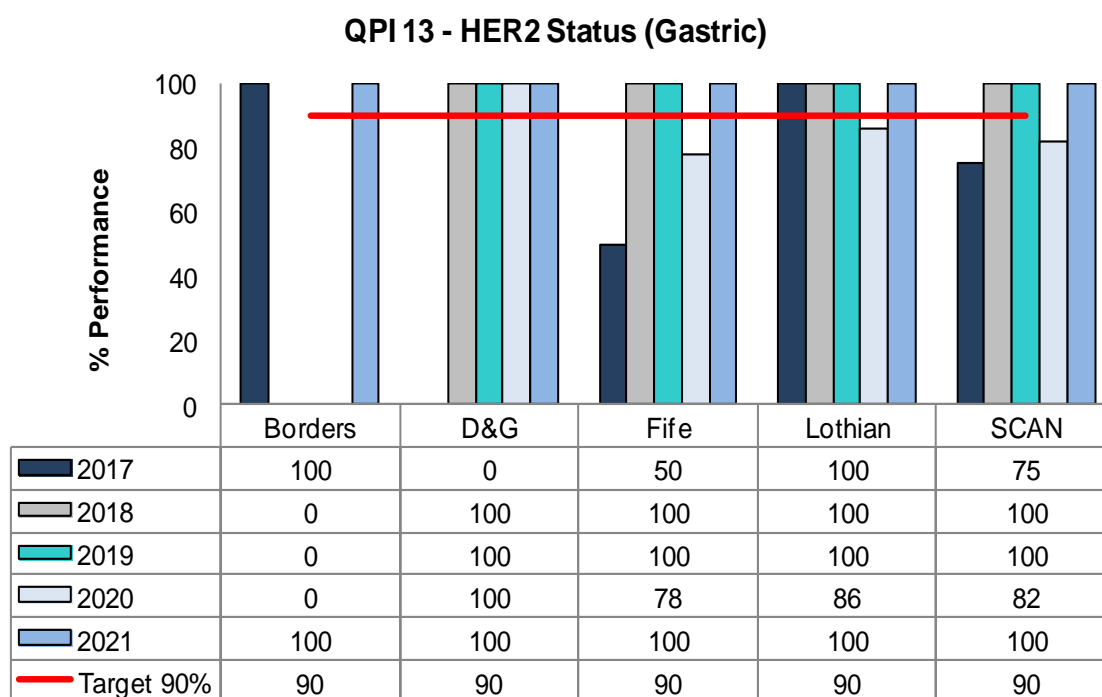
Target = 90%

Numerator = Number of patients with metastatic gastric or gastro-oesophageal junction adenocarcinoma having palliative chemotherapy with HER2 status reported prior to treatment.

Denominator = All patients with metastatic oesophageal or gastric adenocarcinoma undergoing first line palliative chemotherapy as their initial treatment (no exclusions).

Target 90%	Borders	D&G	Fife	Lothian	SCAN
2021 Cohort	23	52	65	173	313
Ineligible for this QPI	20	46	58	154	278
Numerator	3	6	7	19	35
Not recorded for numerator	0	0	0	0	0
Denominator	3	6	7	19	35
Not recorded for exclusions	0	0	0	0	0
Not recorded for denominator	0	0	0	0	0
% Performance	100.0	100.0	100.0	100.0	100.0

The SCAN Target was met.



Clinical Trials QPI

Target = 15%

Numerator = Number of patients with oesophageal or gastric cancer consented in a clinical trial

Denominator = All patients with oesophageal or gastric cancer

Note: The clinical trials QPI is measured using SCRN data and Cancer Registry data (5 year average of case ascertainment)

Clinical Trials	Borders	D&G	Fife	Lothian	SCAN
Numerator	5	0	6	62	73
Denominator	35	46	99	178	358
% Performance	14.3	0.0	6.0	34.8	20.3

The SCAN target was met.

OG Cancer Trials – 2021

Upper GI Cancer Trials 2021
Add-Aspirin
ART27.13-100
Biobank SR1418
CCP-Cancer UK
EOTB
Mint5
OCCAMS: Multicentre Study Determining Predictive Biomarkers & Targets for Oesophageal Adenocarcinoma
REGAL - Capturing trastuzumab REsistance in Gastroesophageal Adenocarcinoma by Liquid biopsy
SCCAMP V1.0

Comment

Point made to include data in key categories or make awareness of open trials through the SCAN Group.

Key Categories

Number of Cases By Site of Origin of Tumour

Tumour Site	Borders		D&G		Fife		Lothian		SCAN	
	n	%	n	%	n	%	n	%	n	%
Oesophageal Cancer	23	88.5	41	78.8	65	76.5	173	78.6	302	78.9
Gastric Cancer	3	11.5	11	21.2	20	23.5	47	21.4	81	21.1
Total OG Cancers	26	100%	52	100%	85	100%	220	100%	383	100%

Breakdown of Site of Origin of Tumour

(See ICD key below)	n	%	n	%	n	%	n	%	n	%
C15.0	0.0	0.0	1	1.9	1	1.2	1	0.5	3.0	0.8
C15.1	0.0	0.0	0	0.0	0	0.0	0	0.0	0.0	0.0
C15.2	0.0	0.0	0	0.0	0	0.0	0	0.0	0.0	0.0
C15.3	0.0	0.0	0	0.0	5	5.9	10	4.5	15.0	3.9
C15.4	4.0	15.4	10	19.2	8	9.4	30	13.6	52.0	13.6
C15.5	11.0	42.3	25	48.1	46	54.1	109	49.5	191.0	49.9
C15.8	1.0	3.8	0	0.0	1	1.2	8	3.6	10.0	2.6
C15.9	0.0	0.0	2	3.8	0	0.0	2	0.9	4.0	1.0
C16.0	7.0	26.9	3	5.8	5	5.9	14	6.4	29.0	7.6
C16.1	0.0	0.0	0	0.0	1	1.2	1	0.5	2.0	0.5
C16.2	1.0	3.8	0	0.0	3	3.5	10	4.5	14.0	3.7
C16.3	2.0	7.7	3	5.8	8	9.4	24	10.9	37.0	9.7
C16.4	0.0	0.0	2	3.8	3	3.5	3	1.4	8.0	2.1
C16.5	0.0	0.0	1	1.9	0	0.0	3	1.4	4.0	1.0
C16.6	0.0	0.0	2	3.8	0	0.0	1	0.5	3.0	0.8
C16.8	0.0	0.0	0	0.0	0	0.0	2	0.9	2.0	0.5
C16.9	0.0	0.0	3	5.8	4	4.7	2	0.9	9.0	2.3
Total	26	100%	52	100%	85	100%	220	100%	383	100%

ICD Key

ICD-O(3) Code	Description
C15.0	Cervical oesophagus
C15.1	Thoracic oesophagus
C15.2	Abdominal part of oesophagus
C15.3	Upper third of oesophagus
C15.4	Middle third of oesophagus
C15.5	Lower third of oesophagus
C15.8	Overlapping lesion of oesophagus
C15.9	Oesophagus, NOS.
C16.0	Cardia, NOS
C16.1	Fundus of stomach
C16.2	Body of stomach
C16.3	Gastric antrum
C16.4	Pylorus
C16.5	Lesser curvature of stomach, unspecified
C16.6	Greater curvature of stomach, unspecified
C16.8	Overlapping lesion of the stomach
C16.9	Stomach, (NOS)

Age and Gender Distribution

Oesophageal

Age at Diagnosis	Borders				D&G				Fife				Lothian				SCAN			
	M		F		M		F		M		F		M		F		M		F	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
<45	1	5.6	0	0.0	0	0.0	0	0.0	1	2.3	0	0.0	1	0.8	0	0.0	3	1.4	0	0.0
45-49	0	0.0	0	0.0	0	0.0	0	0.0	1	2.3	0	0.0	4	3.3	2	3.8	5	2.3	2	2.3
50-54	0	0.0	0	0.0	0	0.0	1	10.0	1	2.3	1	4.8	5	4.1	2	3.8	6	2.8	4	4.5
55-59	2	11.1	0	0.0	0	0.0	0	0.0	6	13.6	1	4.8	9	7.4	2	3.8	17	7.9	3	3.4
60-64	1	5.6	0	0.0	3	9.7	1	10.0	8	18.2	2	9.5	21	17.2	9	17.3	33	15.4	12	13.6
65-69	2	11.1	2	40.0	3	9.7	2	20.0	8	18.2	4	19.0	18	14.8	5	9.6	31	14.5	13	14.8
70-74	5	27.8	0	0.0	8	25.8	2	20.0	6	13.6	5	23.8	17	13.9	9	17.3	36	16.8	16	18.2
75-79	2	11.1	2	40.0	8	25.8	1	10.0	11	25.0	2	9.5	18	14.8	8	15.4	39	18.2	13	14.8
80-84	2	11.1	0	0.0	5	16.1	2	20.0	1	2.3	3	14.3	19	15.6	5	9.6	26	12.1	10	11.4
85+	3	16.7	1	20.0	4	12.9	1	10.0	1	2.3	3	14.3	10	8.2	10	19.2	18	8.4	15	17.0
Total	18	100%	5	100%	31	100%	10	100%	44	100%	21	100%	122	100%	52	100%	214	100%	88	100%

Oesophageal

Age at Diagnosis	Borders		D&G		Fife		Lothian	
	M	F	M	F	M	F	M	F
Min	40	66	61	51	41	53	41	44
Max	90	87	91	88	85	90	92	91
Mean	74	74	76	72	67	72	69.5	70.4
Median	74	74	75	73	68	71	69	72

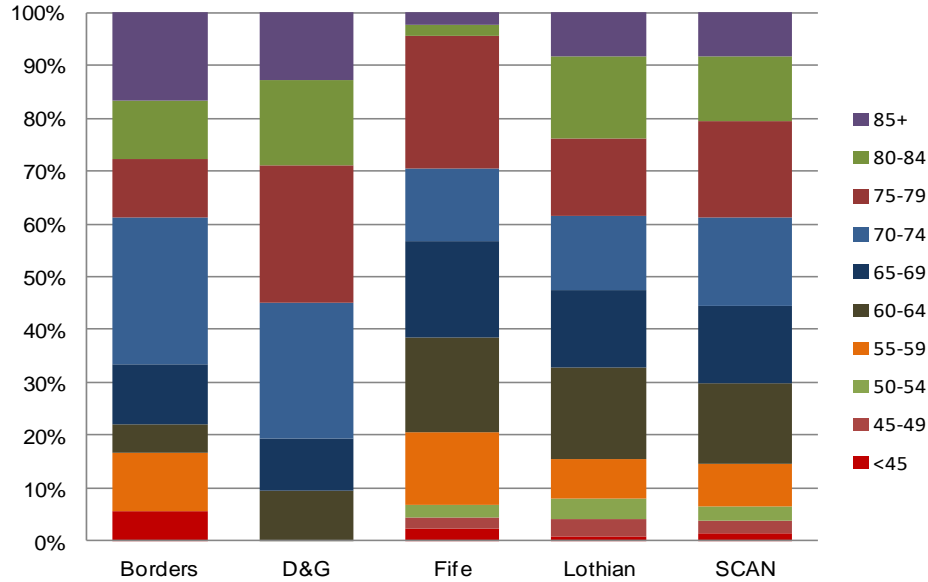
Gastric

Age at Diagnosis	Borders				D&G				Fife				Lothian				SCAN			
	M		F		M		F		M		F		M		F		M		F	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
<45	0	0.0	0	0.0	1	11.1	0	0.0	0	0.0	0	0.0	1	3.3	3	17.6	2	3.6	3	11.5
45-49	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1	5.9	0	0.0	1	3.8
50-54	0	0.0	0	0.0	0	0.0	0	0.0	1	7.7	0	0.0	4	13.3	1	5.9	5	9.1	1	3.8
55-59	0	0.0	0	0.0	0	0.0	0	0.0	1	7.7	0	0.0	0	0.0	1	5.9	1	1.8	1	3.8
60-64	0	0.0	0	0.0	1	11.1	0	0.0	0	0.0	2	28.6	1	3.3	2	11.8	2	3.6	4	15.4
65-69	0	0.0	0	0.0	1	11.1	0	0.0	1	7.7	1	14.3	5	16.7	1	5.9	7	12.7	2	7.7
70-74	1	33.3	0	0.0	2	22.2	1	50.0	4	30.8	2	28.6	5	16.7	4	23.5	12	21.8	7	26.9
75-79	0	0.0	0	0.0	1	11.1	0	0.0	2	15.4	1	14.3	7	23.3	1	5.9	10	18.2	2	7.7
80-84	0	0.0	0	0.0	1	11.1	0	0.0	2	15.4	1	14.3	5	16.7	2	11.8	8	14.5	3	11.5
85+	2	66.7	0	0.0	2	22.2	1	50.0	2	15.4	0	0.0	2	6.7	1	5.9	8	14.5	2	7.7
Total	3	100%	0	100%	9	100%	2	100%	13	100%	7	100%	30	100%	17	100%	55	100%	26	100%

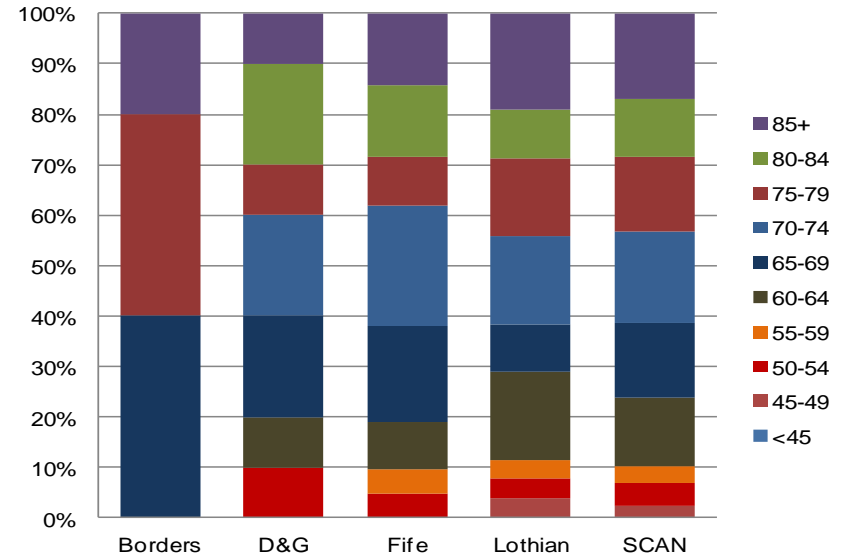
Gastric

Age at Diagnosis	Borders		D&G		Fife		Lothian	
	M	F	M	F	M	F	M	F
Min	73	N/A	35	73	54	60	44	34
Max	92	N/A	88	94	92	81	91	86
Mean	72	N/A	71	84	74	69	73.5	60.5
Median	74	N/A	72.5	83.5	74	70	71	71

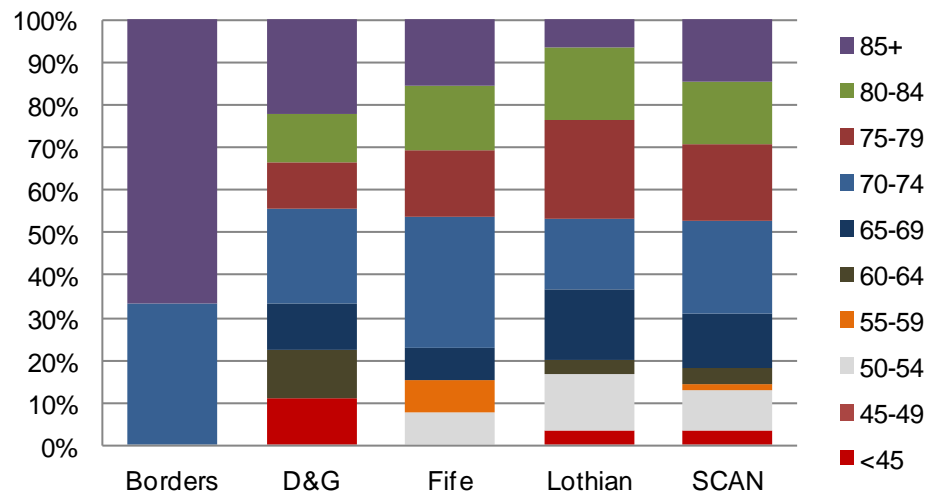
2021 Oesophageal Cancer Age by Board (Males)



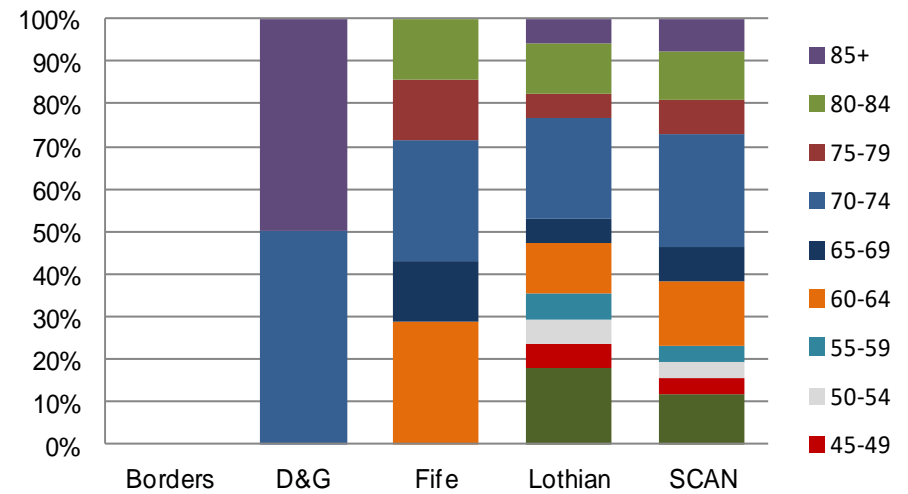
2021 Oesophageal Cancer Age by Board (Females)



2021 Gastric Cancer Age by Board (Males)



2021 Gastric Cancer Age by Board (Females)



OG Attainment Summary 2020

OG QPI Attainment Summary - 2020			Target %		Borders		D&G		Fife		Lothian		SCAN	
QPI 1: Endoscopy - Histological diagnosis made within 6 weeks of initial endoscopy and biopsy	Oesophageal	95	N 28 D 28	100%	N 28 D 30	93.3%	N 64 D 66	97.0%	N 122 D 138	88.4%	N 242 D 262	92.4%		
	Gastric	95	N 5 D 5	100%	N 7 D 7	100%	N 11 D 12	91.7%	N 58 D 61	95.1%	N 81 D 85	95.3%		
QPI 3: MDT before definitive treatment	Oesophageal	95	N 24 D 28	85.7%	N 30 D 33	90.9%	N 64 D 67	95.5%	N 141 D 146	96.6%	N 259 D 274	94.5%		
	Gastric	95	N 6 D 6	100%	N 8 D 10	80.0%	N 11 D 13	84.6%	N 60 D 65	92.3%	N 85 D 94	90.4%		
QPI 4i: TNM Staging recorded at MDT prior to treatment	Oesophageal	90	N 26 D 28	92.9%	N 33 D 33	100%	N 66 D 68	97.1%	N 138 D 146	94.5%	N 263 D 275	95.6%		
	Gastric	90	N 6 D 6	100%	N 10 D 10	100%	N 11 D 15	73.3%	N 59 D 66	89.4%	N 86 D 97	88.7%		
QPI 4ii: TNM Treatment Intent recorded at MDT prior to treatment	Oesophageal	95	N 27 D 28	96.4%	N 32 D 33	97.0%	N 67 D 68	98.5%	N 136 D 146	93.2%	N 262 D 275	95.3%		
	Gastric	95	N 6 D 6	100%	N 10 D 10	100%	N 12 D 15	80.0%	N 54 D 66	81.8%	N 82 D 97	84.5%		
QPI 5i: Nutritional Assessment: Undergo screening with the Malnutrition Universal Screening Tool (MUST) before first treatment.	Oesophageal	95	N 22 D 28	78.6%	N 32 D 33	97.0%	N 66 D 68	97.1%	N 96 D 146	65.8%	N 216 D 275	78.5%		
	Gastric	95	N 5 D 6	83.3%	N 8 D 10	80.0%	N 13 D 15	86.7%	N 50 D 66	75.8%	N 76 D 97	78.4%		
QPI 5ii: Nutritional Assessment: are at high risk of malnutrition (MUST score >2) referred to dietician	Oesophageal	90	N 9 D 9	100%	N 15 D 15	100%	N 23 D 23	100%	N 79 D 83	95.2%	N 126 D 130	96.9%		
	Gastric	90	N 3 D 3	100%	N 2 D 2	100%	N 7 D 7	100%	N 32 D 38	84.2%	N 44 D 50	88.0%		
QPI 6: Appropriate Selection: Neo-Adjuvant chemotherapy followed by surgical resection	Oesophageal	80	N 4 D 5	80.0%	N 3 D 4	75.0%	N 9 D 12	75.0%	N 21 D 24	87.5%	N 37 D 45	82.2%		
	Gastric	80	N 0 D 0	-	N 1 D 1	100.0%	N 0 D 1	0.0%	N 8 D 9	88.9%	N 9 D 11	81.8%		

QPI 7i: 30 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<5	Presented by Board of Surgery			N 0 0.0%	D 43	N 0 0.0%	D 43			
	Gastric	<5	Board of Surgery	N 0 0.0%	D 1	Board of Surgery	N 0 0.0%	D 17	N 0 0.0%	D 18		
QPI 7ii: 90 Day Mortality Following Surgery (presented by Board of Surgery)	Oesophageal	<7.5	Board of Surgery			N 1 2.3%	D 43	N 1 2.3%	D 43			
	Gastric	<7.5	Board of Surgery	N 0 0.0%	D 1	Board of Surgery	N 0 0.0%	D 17	N 0 0.0%	D 18		
QPI 8: Lymph Node Yield – Curative resection where >15 lymph nodes are resected and examined (Presented by Board of Surgery)	Oesophageal	90	Board of Surgery			N 42 97.7%	D 43	N 42 97.7%	D 43			
	Gastric	80	Board of Surgery			N 14 82.4%	D 17	N 14 82.4%	D 17			
QPI 9: Hospital of Stay: Discharge within 14 days of surgical procedure (presented by Board of Surgery)	Oesophageal	60	Board Of Surgery			N 23 57.5%	D 40	N 23 57.5%	D 40			
	Gastric	60	Board of Surgery			N 12 75.0%	D 16	N 12 75.0%	D 16			
QPI 10i: Oesophageal clear circumferential resection margins (presented by Board of Surgery)	Oesophageal	70	Board of Surgery			N 35 81.4%	D 43	N 35 81.4%	D 43			
QPI 10ii: Longitudinal margins clear (presented by Board of Surgery)	Oesophageal	90	Board of Surgery			N 43 100%	D 43	N 43 100%	D 43			
	Gastric	95		N 0 0.0%	D 1		N 17 100%	D 17	N 17 94.4%	D 18		
QPI 11: Curative Treatment Rates	Oesophageal	35	N 6 21.4%	D 28	N 4 12.1%	D 33	N 13 19.1%	D 68	N 38 26%	D 146	N 61 22.2%	D 275
	Gastric	35	N 0 0.0%	D 6	N 3 30.0%	D 10	N 1 6.7%	D 15	N 17 25.8%	D 66	N 21 21.6%	D 97
QPI 12: 30 day Mortality after Oncological Treatment	Oesophageal curative Chemoradiotherapy	<5	Not yet reported - Awaiting Chemocare National query tool									
	Gastric Curative Chemoradiotherapy	<5										
QPI 13 HER2 Status in Advanced Oesophageal /Gastric Adenocarcinoma		90	N 1 50.0%	D 2	N 1 100%	D 1	N 8 80.0%	D 10	N 18 85.7%	D 21	N 27 81.8%	D 33
Clinical Trial QPI NB: N= patients consented to trial/study on SCR database, D = 5 year average Cancer Registry patients		15	N 5 13.2%	D 38	N 2 4.3%	D 46	N 2 2.0%	D 99	N 18 10.1%	D 178	N 27 7.5%	D 361