

# GIDO

grup d'investigació i divulgació en oncologia

PROGRAMA DEFINITIVO

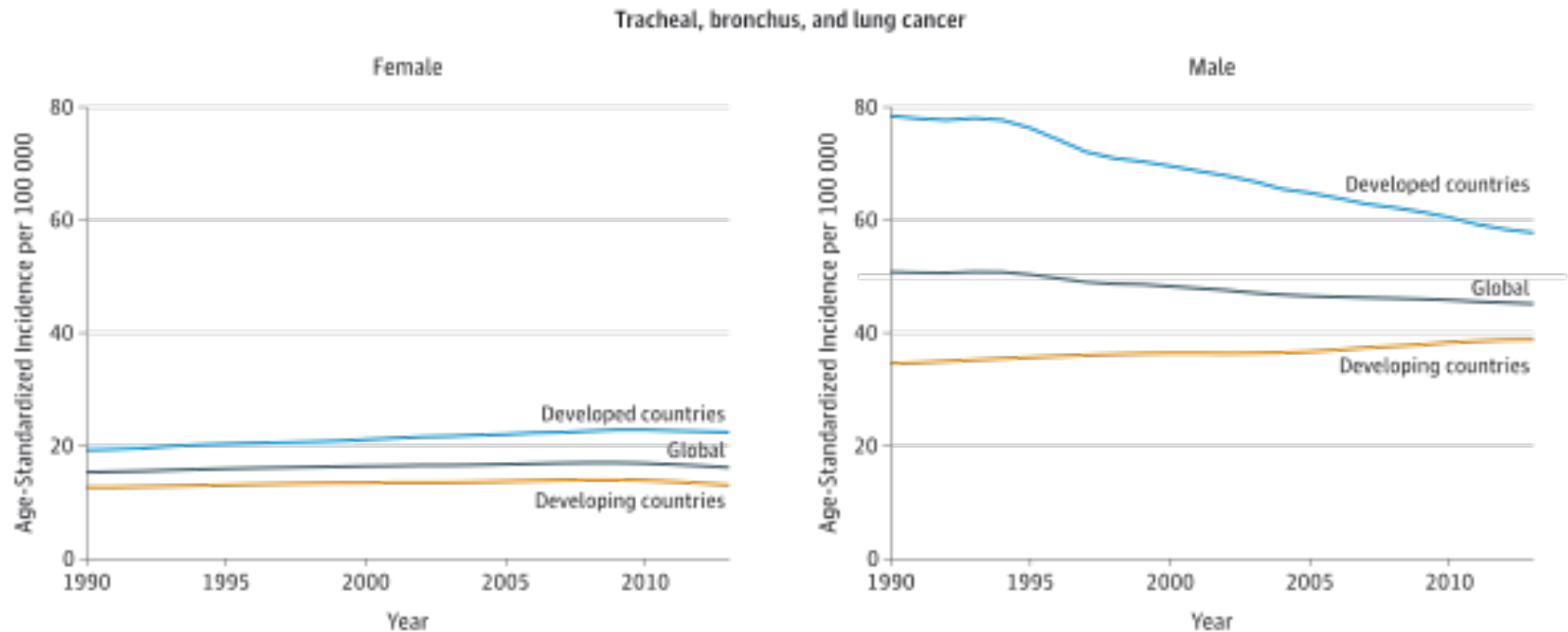


## **VI JORNADA GIDO: VISION SOCIAL Y CIENTÍFICA DEL CÁNCER DE PULMÓN: “CERRANDO EL CIRCULO”**

Comités Multidisciplinares y Trabajo en equipo

# Tendencias en incidencia Cáncer Broncopulmonar 1990-2013

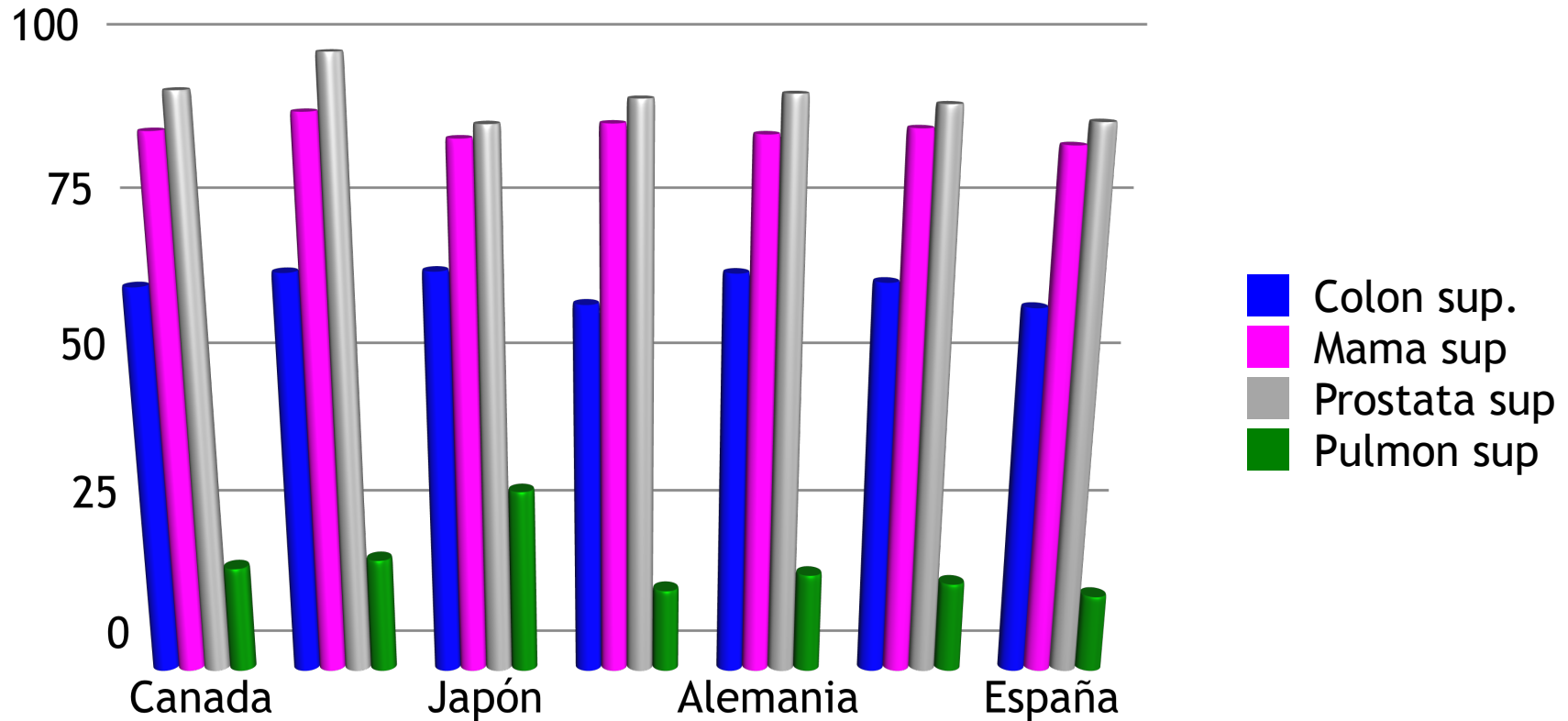
*JAMA Oncol.* doi:10.1001/jamaoncol.2015.0735 Published online May 28, 2015.



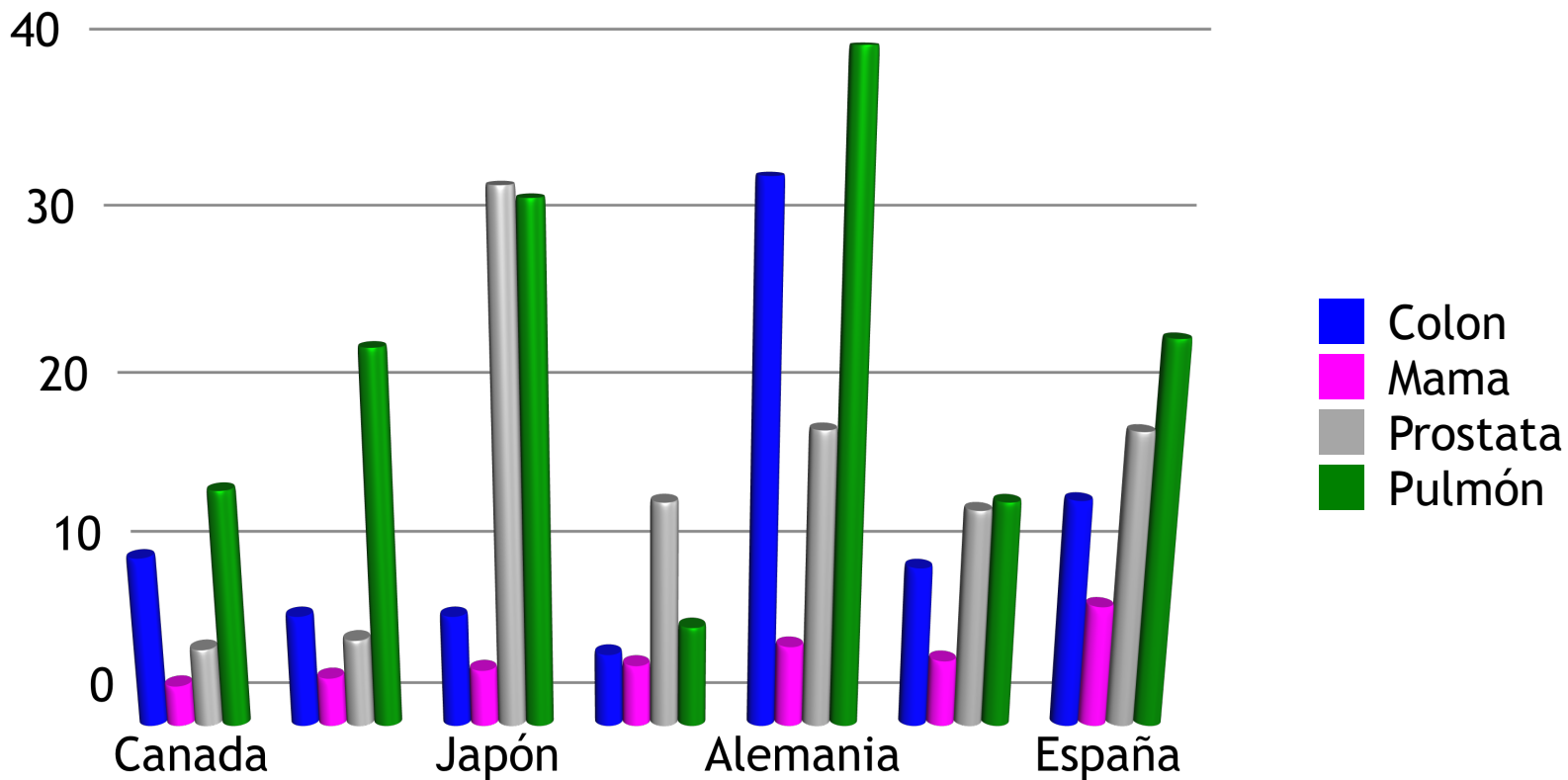
En 1990 y en 2013 el cáncer broncopulmonar continua siendo la primera causa de YLLs con un incremento absoluto del 39.2% pero con una reducción del 17.9% en las tasas ajustadas por edad

# Superv 5-a CONCORD

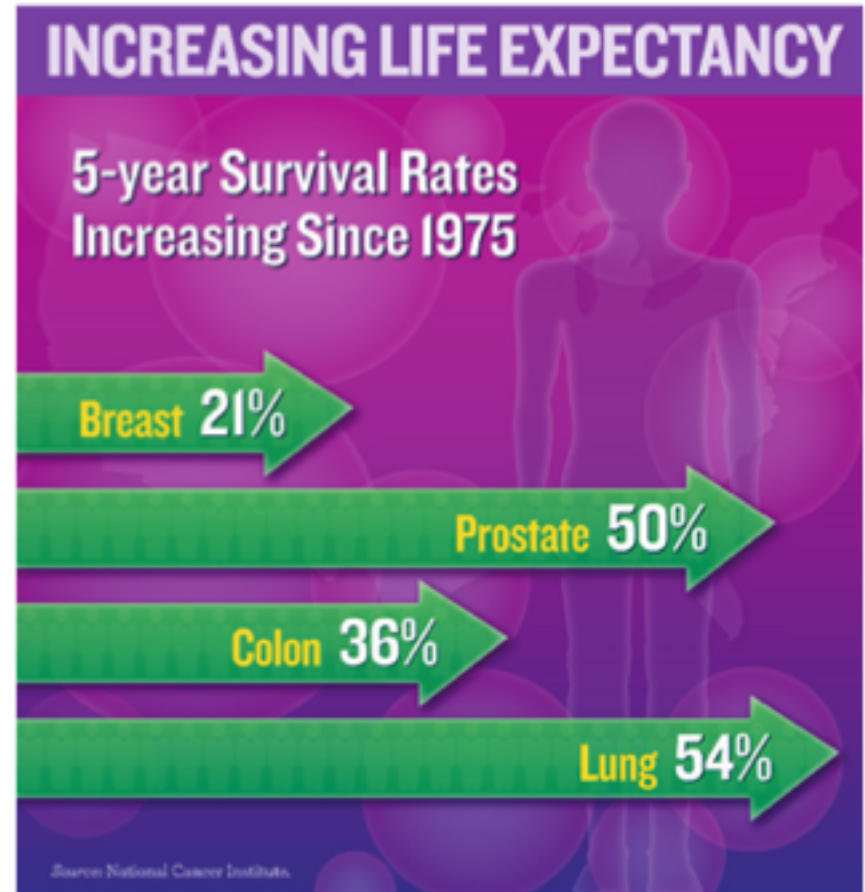
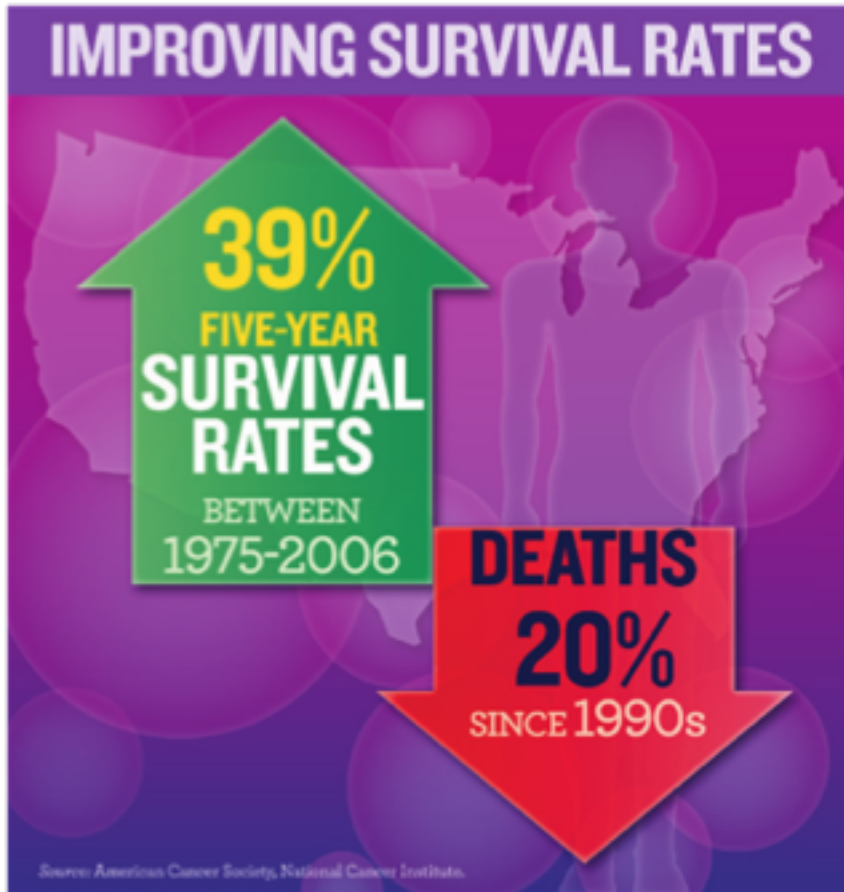
Lancet: Online November 26, 2014 [http://dx.doi.org/10.1016/S0140-6736\(14\)62038-9](http://dx.doi.org/10.1016/S0140-6736(14)62038-9)



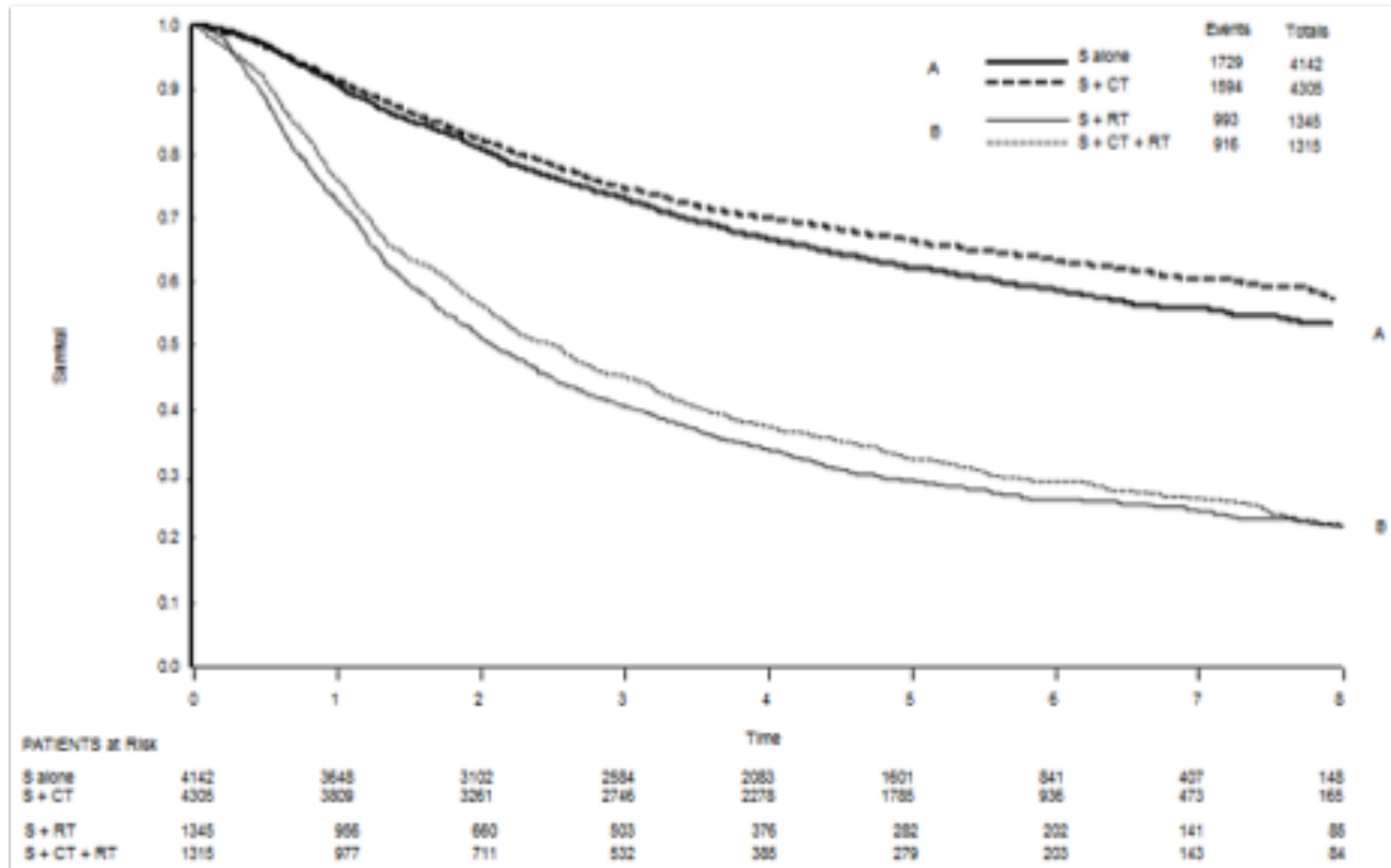
# CONCORD:1995-99 vs 2005-09: (variación % Sup 5 a)



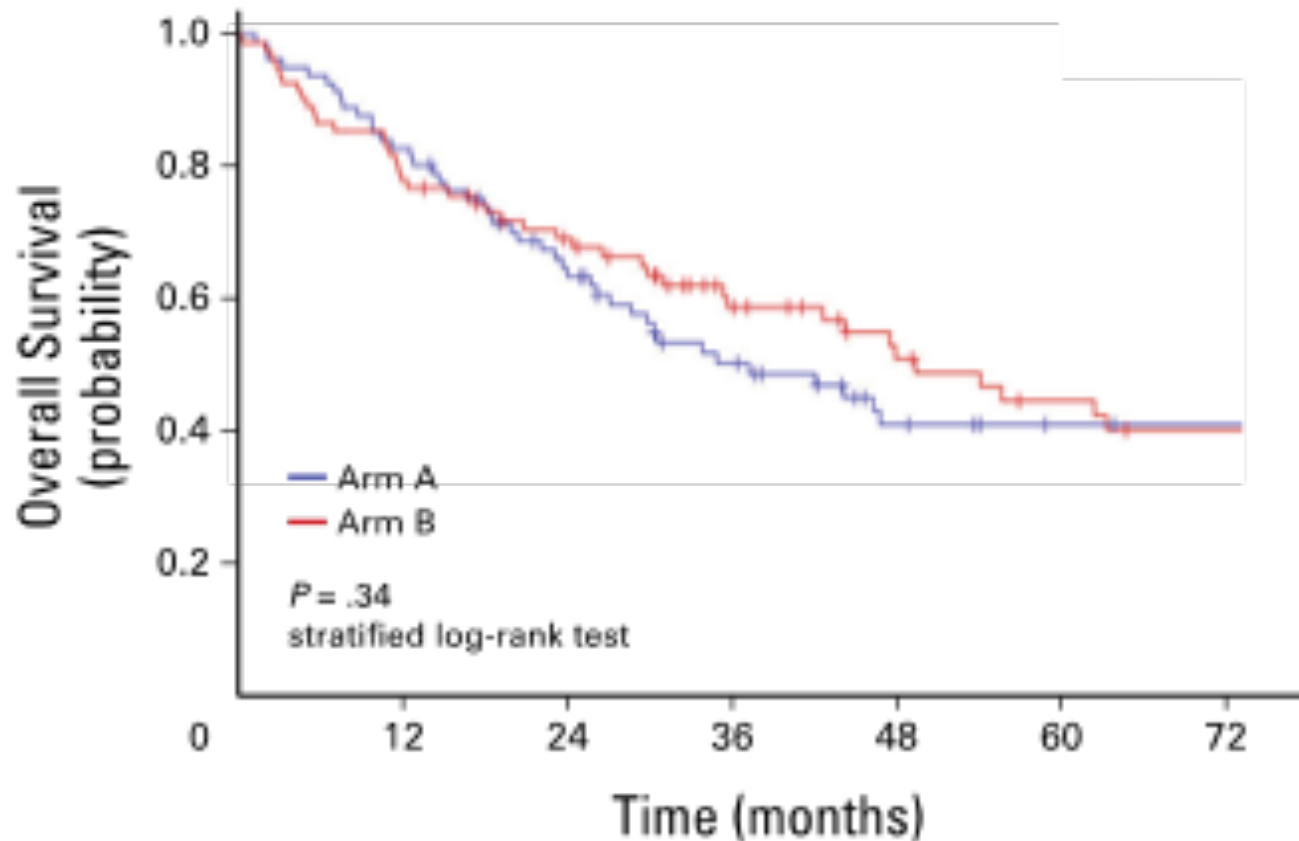
# Datos USA



# Estadios iniciales: Cir +/- QT; Cir+RT +/- QT



# Estadios localmente avanzados

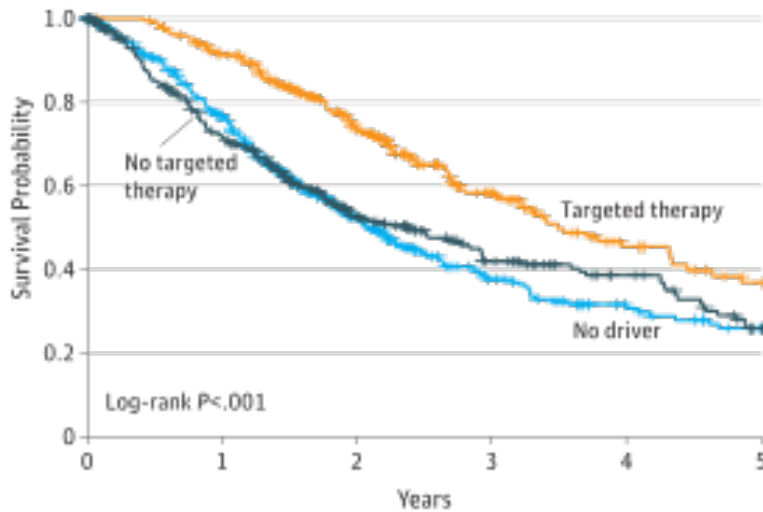


No. at risk

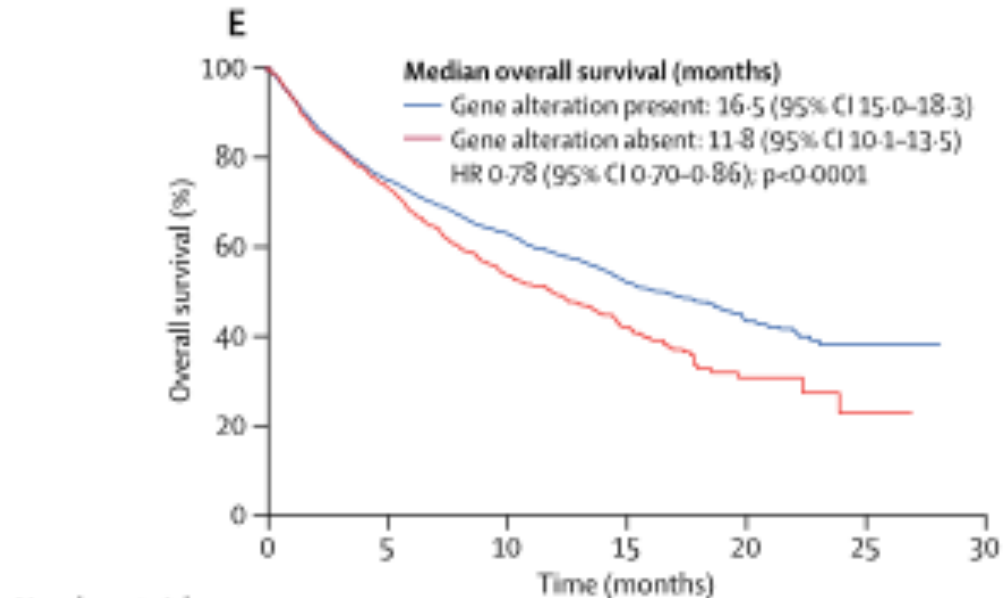
Arm A	80	66	47	32	20	16	15
Arm B	81	63	51	35	25	20	17

# Estadios avanzados: tratamientos dirigidos a dianas moleculares

**A** Patients with an oncogenic driver mutation who did and did not receive targeted therapy, and patients without an oncogenic driver



No. at risk	0	1	2	3	4	5
<b>Patients with oncogenic driver</b>						
No targeted therapy	318	205	110	64	43	20
Targeted therapy	260	225	143	72	36	23
<b>Patients with no driver</b>						
	360	250	122	59	36	23



Number at risk	0	5	10	15	20	25	30
Gene alteration present	3498	2141	1423	594	165	9	0
Gene alteration absent	1126	617	333	124	24	4	0

JAMA. 2014;311(19):1998-2006. doi:10.1001/jama.2014.3741

Lancet: Published online January 14, 2016 [http://dx.doi.org/10.1016/S0140-6736\(16\)00004-0](http://dx.doi.org/10.1016/S0140-6736(16)00004-0)

S0140-6736(16)00004-0



# Medición resultados Comités

Outcomes assessed	Study	E*	Total cases	Cancer type	Difference in MDT meeting arm and control arm with respect to the outcome
Survival	[7]	2b	88	Lung	NSD
	[8]	3b	67	Glioma	NSD (18.7 versus 11.9 months, $P = 0.11$ )
	[9]	4	240	Lung	NSD
	[10]	4	144	Oesophageal	5 years (52% versus 10%, $P < 0.001$ )
	[11]	4	243	Lung	Median (6.6 months versus 3.2 months) <sup>§</sup>
	[12]	4	533	Ovarian	In favour of MDT group <sup>§</sup>
	[13]	4	16035	All cancers	5 years (71% versus 63%, $P < 0.001$ )
	[14]	4	—	Lung	1 year (23.5% versus 18.3%) <sup>§</sup>
Quality of life	[7]	2b	88	Lung	NSD
Patient experience	[7]	2b	88	Lung	Improved in MDT group, $P = 0.01$
	[15]	4	269	Breast	Improved in MDT group, $P < 0.001$
Rate of intervention	[11]	4	243	Lung	Patients receiving chemo (23% versus 7%) <sup>§</sup>
	[16]	4	112	Lung	30% ↑ in resection in favour of MDT
	[8]	3b	67	Glioma	Patients having chemo (55% versus 17%) <sup>§</sup>
	[9]	4	240	Lung	↑ in resection (23.4 % versus 12.2%) <sup>§</sup>
	[17]	3b	2935	Colorectal	↑ in trial recruitment (10.3 versus 5.1%) <sup>§</sup>
Time to intervention	[15]	4	269	Breast	Time to treatment (29.6 versus 42.2 days) <sup>§</sup>
	[16]	4	112	Lung	NSD
	[8]	3b	67	Glioma	NSD
Staging accuracy	[18]	3b	118	Upper GI	MDT improved staging accuracy <sup>§</sup>
Costs per patients	[19]	4	208	Melanoma	MDT saved \$1600 per patient
Decision quality as prediction of accuracy	[20]	4	50	Lung	NSD, Team discussion did not improve the quality of decision making overall.
Psychological morbidity of team members	[21]	5	72	Breast	lower prevalence of psychiatric morbidity (15.7% versus 26.6% $P < 0.005$ )

# Impacto diferencial evaluación en Comités

<b>Lung cancer</b>	<b>No. patients</b>	<b>No tumor board, %</b>	<b>General tumor board, %</b>	<b>Lung cancer-specific tumor board, %</b>	<b>P</b>
Curative surgery for stage I/II NSCLC	4291	53.2	56.5	61.9	.14
Radiation for unresected stage I and II NSCLC	1666	66.5	70.8	63.8	.04
Mediastinal evaluation for stage I/II NSCLC	2191	85.7	85.6	89.3	.37
Chemotherapy or radiation therapy for stage IIIA NSCLC patients who received surgery	370	79.6	74.8	65.1	.27
Chemotherapy and radiation therapy for unresected NSCLC stage IIIA patients	1305	23.9	39.5	35.6	.02
Doublet chemo for stage IV lung cancer	5853				.15
None		56.0	52.3	50.6	
Doublet chemo		37.3	42.7	42.8	
Nondoublet chemo		6.7	5.0	6.6	
Chemotherapy and radiation therapy for limited-stage small-cell lung cancer	1062	28.4	61.8	62.9	<.001*
1-year (all-cause) survival, NSCLC	21 123	41.3	39.5	41.0	.22
1-year (all-cause) survival, small-cell lung cancer	3493	25.2	26.2	26.6	.88

HOW SCIENCE REPORTING WORKS:

