Structured Pathology Reporting of Cancer Newsletter

September 2013. Issue 15.

PDF versions of this newsletter are
available from the structured
pathology website.

Welcome to the 15th edition of the Structured Pathology Reporting of
Cancer newsletter.

This newsletter is intended to provide information on the project to
expand and promote the use of structured pathology reporting of
cancer.

Protocol update….open consultation

The following protocols are now open for public consultation:

1. Cervical Cancer Structured Pathology Reporting Protocol
2. Salivary Gland Neoplasms Structured Pathology Reporting
   Protocol
3. Polypectomy and Local Resections of the Colorectum
   Structured Pathology Reporting Protocol

They are available for comment until 24th Sept. Please take the time
to visit the link below and provide your valuable feedback:

www.rcpa.edu.au/Publications/StructuredReporting/publicconsultation.htm

The adrenal gland protocol is nearing completion and will be heading
for open consultation soon as well.

New editions for Melanoma, Lung and Prostate (Radical
Prostatectomy), which include the endorsed international dataset
elements, will be finalised shortly and thereafter be posted for a
period of open consultation locally.

ICCR PROGRESS

From left: John Srigley (CPAC), Mary Kay Washington (CAP), Lynn Hirshowitz (RCpath UK) and Meagan Judge (RCPA) at the ESP Chairs of the Working Groups meeting in Lisbon.

The ICCR has recently met at the European Congress of Pathology in Lisbon, Portugal to discuss progress and planning. Most significantly, following A/Prof David Ellis's presentation to the International Liaison of Pathology presidents (ILPP) in May, the colleges of pathology of the US (CAP), UK (RCPath) and Australasian (RCPA) have all agreed to become foundation members of an incorporated ICCR. The European Society of Pathology (ESP) was also invited to be a foundation member and this was confirmed at their executive meeting in Lisbon.

Final word is awaited from Canada, the fourth member of the original quadripartite. A joint agreement between the Canadian Partnership Against Cancer (CPAC) and the Canadian Association of Pathologists is being considered. Once the Canadian position has been clarified the ICCR will progress to formal incorporation as a not-for-profit organisation limited by guarantee.

Prior to the meeting in Lisbon, the International Agency for Cancer Research (IARC) an agency of the World Health Organisation, who produce the classifications of tumours publications ("Blue Books") agreed to be formally represented on the ICCR Dataset Steering Committee. Prof Fred Bosman, editor of Virchows Archiv and one of four Series Editors for the 4th edition of the WHO Classification of Neoplastic Diseases, attended part of the ICCR meeting in Lisbon which was extremely helpful. IARC have also agreed to provide a representative to each of the ICCR expert panels to ensure bilateral communication on the dataset development and WHO blue book updates. This follows the agreement by the ICCR to synchronise development of the ICCR Datasets with the WHO publications.

After discussion with Prof Bosman the first of these datasets will be:
- Heart
- Lung
- Mesothelioma of the pleura
- Thymus

(As a lung dataset has recently been tackled by the ICCR, it is expected that the 2nd edition will include only minor updates). The ICCR will be nominating expert chairs and panels for these datasets in the coming months.

Cancer datasets in progress
In progress are the renal cancer dataset and datasets for Ovarian, Fallopian tube and Primary peritoneal site.

The renal cancer dataset is nearing completion of its final draft and it is hoped it will go to open consultation by the end of 2013.

The Ovarian, Fallopian tube and Primary peritoneal site expert panel has been convened and a draft proposal for discussion is being planned. An early draft of the International Federation of Gynecology and Obstetrics (FIGO) staging classification has been received and has proven to be of great assistance. The finalisation of the WHO classification of tumours is required as well as this will have significant impact on the tumour classification and grading in the dataset.

Publications
As part of the ICCR development process, a journal article is written by the expert panel which describes and discusses the evidence behind the elements in the ICCR dataset. The article for Lung Carcinoma has recently been published:

Data Set for Reporting of Lung Carcinomas: Recommendations From International Collaboration on Cancer Reporting**.** Jones KD, Churg A, Henderson DW, Hwang DM, Wyatt JM, Nicholson AG, Rice AJ, Washington MK, Butnor KJ. (2013) Arch Pathol Lab Med. 137(8): 1054-1062

Keep an eye out for the article on Melanoma in the American Journal of Surgical Pathology which is currently in press:

Scolyer RA, Judge MJ, Evans A, Frishberg DP, Prieto VG, Thompson JF, Trotter MJ, Walsh MY, Walsh NMG, Ellis DW. (2013) Data Set for Pathology Reporting of Cutaneous Invasive Melanoma Recommendations From the International Collaboration on Cancer Reporting (ICCR).

For more details on the work of the INTERNATIONAL COLLABORATION ON CANCER REPORTING – read the ICCR newsletters at:

www.rcpa.edu.au/Publications/StructuredReporting/ICCR.htm

Naturally Nelson

The New Zealand Society of Pathologists Annual Scientific Meeting will be held in Nelson later this month - Friday 27 to Sunday 29 September 2013**.**

Prof John Srigley who represents the Canadian Partnership Against Cancer (CPAC) on the International Collaboration on Cancer Reporting (ICCR), will be joining A/Prof David Ellis and Lance Goodall from Cancer Control NZ on a symposium on Saturday morning, discussing "The Pathologist as a diagnostic oncologist in the cancer matrix".   Both John and Lance will be talking about their respective implementations of structured reporting.

Join us for the discussion and register at:
http://www.rcpa.edu.au/Continuing/NZASM2013/registration.htm

Or contact EVE PROPPER by emailing evep@rcpa.edu.au.

In the news

Prof Srigley also discusses the achievements of the Canadian implementation of structured reporting in his recently published article:

Srigley J, Lankshear S, Brierley J, McGowan T, Divaris D, Yurcan M, Rossi R, Yardley T, King MJ, Ross J, Irish J, McLeod R, and Sawka C. Closing the Quality Loop: Facilitating Improvement in Oncology Practice Through Timely Access to Clinical Performance Indicators. J Oncol Pract. 2013 Jul [epub ahead of print]

Since the launch of the Canadian project, and by a combination of feedback to clinicians and knowledge transfer sessions, Ontario have realised an increase in colorectal lymph node retrieval rates from 76% to 87%, and a reduction in pT2 prostatectomy margin positivity rates from 37% to 21%.

Another article by the Canadian group : Brierley J, Srigley J, Yurcan M, Li B, Rahal R, Ross J, King ML, Sherar M, Skinner R and Sawka C. (2013) The Value of Collecting Population- Based Cancer Stage Data to Support Decision-Making at Organizational, Regional and Population Levels. Healthcare Quarterly 16(3) 27-33, discusses the value of capturing stage data and how it can be used to assess the value of screening programs, inform resource allocation, evaluate compliance with treatment guidelines, compare survival trends and enhance the spectrum of cancer control activities.

With the capture of staging data an important factor in Cancer Australia's "A National Cancer Data Strategy for Australia" we can look to Canada to see just what the outcomes for Australia might be.

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