

Les bonnes pratiques cliniques: expérience bourguignonne

FUMET Jean-David
KADERBHAI Coureche

Internes d'oncologie médicale
Centre Georges François Leclerc
Dijon

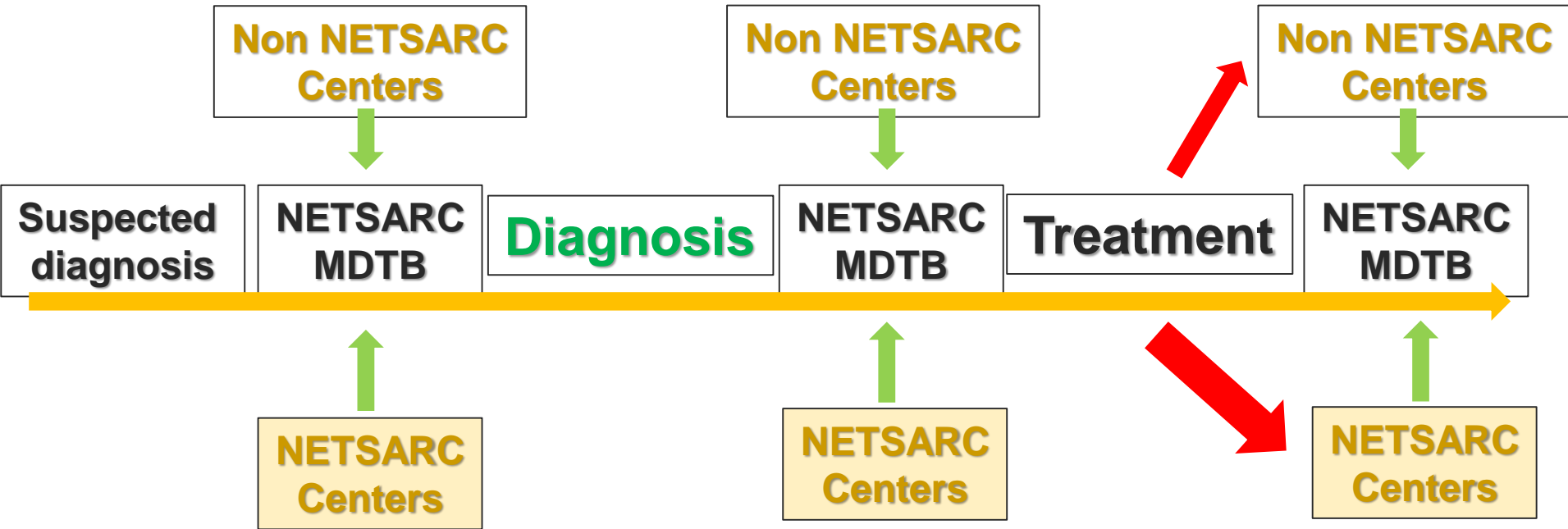


Introduction

- Multidisciplinary Team (MDT) sarcoma 2008
- **Major impact of multidisciplinary board presentation prior to first treatment?**

[The question addressed by this study]

- Does presentation of the patient to a NetSARC MDT prior to treatment impact on management and prognosis?



Material and methods

- Patients 2008-2017
- From Jan 2008 to Jun 2017, **812 newly diagnosed patients** were included in this database
- Individual NETSARC centers managed a median of 678 (range 116-3801) pts in 5 yrs.
- **142 peripheral non metastatic-STS**

Patients included

- 55 women (38,4%) and 87 men (61,6%)
- Median age : **65 years** (range 19- 87yr)
- Median size : **9 cm** (range 2 – 50cm)
- Upper extremity: 18 (12,7%) / lower extremity :124 (87,3%)
- Superficial : 30 (21,1%) / Deep seated :102(71,8%)
UNK : 10 (7,1%)

Patients included

■ Histotypes :

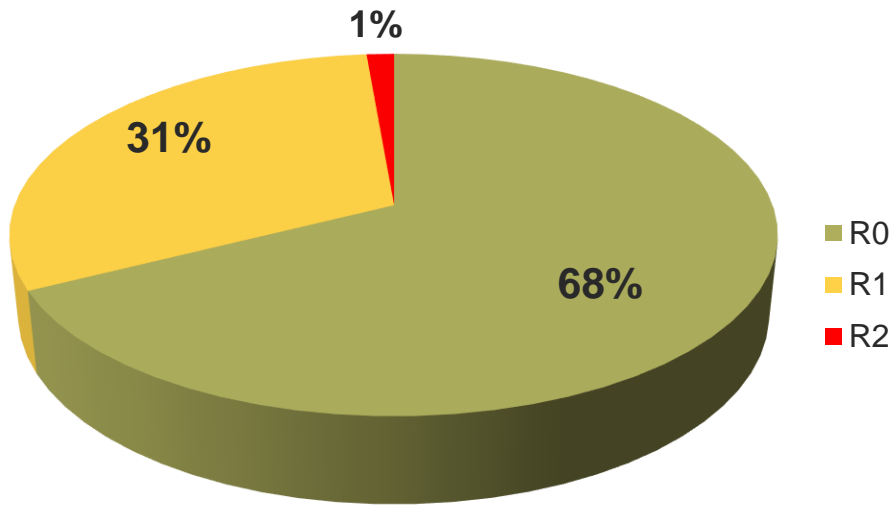
- Liposarcoma : 30,2%
- Undifferentiated : 21,8%
- Myxofibrosarcoma 17,6%
- LMS : 9,15%
- Others : 21,2%

- **Grade 1**: 40 (28,2%), **Grade 2** : 40 (28,2%), **Grade 3** : 48 (33,8%), UNK/NC 14 (9,8%)

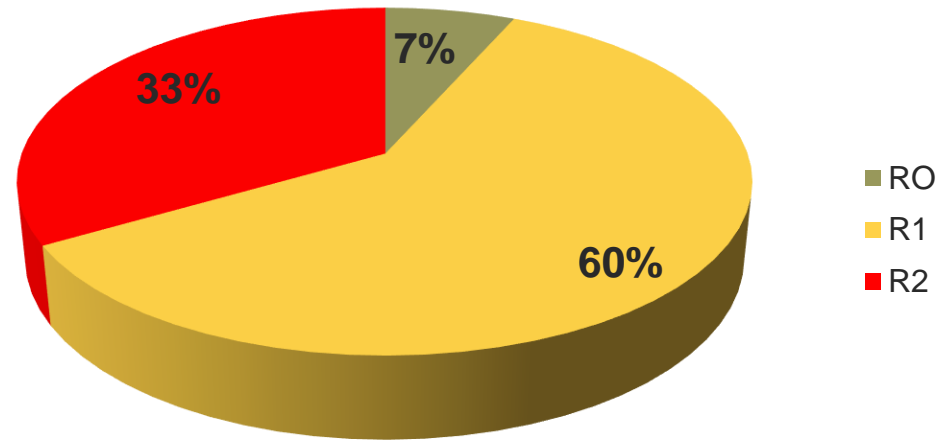
Patients included

- Surgery :
 - NetSarc : 88 (**62%**)
 - Outside : 54 (**38%**)

Results: quality of initial surgery



NetSarc



Outside

Results

MDT before treatment

- MDT :
 - Initial : 11 (**7,8%**)
 - After biopsy : 58 (**40,8%**)
 - After surgery : 73 (**51,4%**)
- Overall **48,6%** were presented to a NetSarc multidisciplinary board (NMTB) prior to initial treatment

Results

Better management when MDT before treatment

- A higher number of patients presented in NetSarc MDT had a biopsy prior the first resection (**100% vs 12,3%**, $p < 0,0001$)
- Primary surgery performed before vs after presentation to a NetSarc MDT :R0, R1, R2 and UNK surgery in :
 - **69,6%**, 30,4%, 0%, 0% (MDT before) vs
 - 17,8%, 52%, **23,2%** 7% (MDT after) ($p < 0,0001$)
- 35 (**47,9%**) patients had secondary resection after primary surgery performed without previous NetSarc MDT vs **0** in NetSarc centers ($p < 0,0001$)

Conclusions

- Sarcoma patients presented to MDT prior to initial treatment have
 - a significantly higher rate of management according to guidelines
 - Higher rates of R0 surgery (lower of R2/R.unk)
 - Less re-operations

[Further analysis]

- **Better management** when MDT before treatment
 - Adequate imaging of the tumor before treatment/ surgery ?
 - Chemotherapy ? Radiation therapy ?
- **Better survival** when MDT before treatment
 - Local relapse ?
 - Metastatic relapse ?
 - Overall survival ?

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