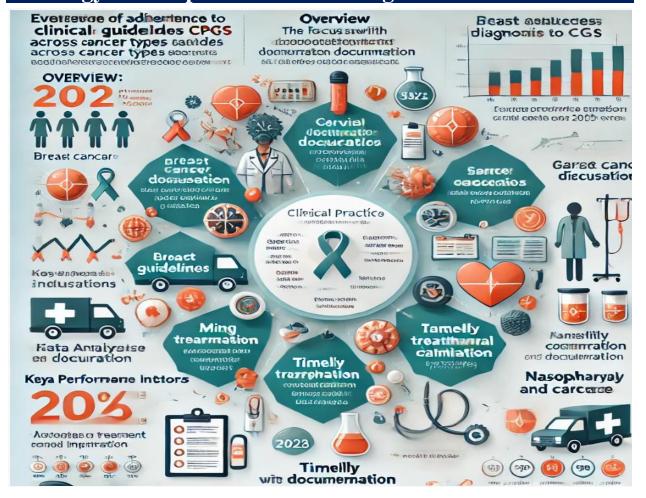
# Chapter 15: Adherence to Clinical Practice Guidelines in Oncology and Impact on Patient Diagnosis



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### Summary

This report evaluates the adherence to clinical practice guidelines (CPGs) across multiple cancer types and assesses their impact on patient diagnosis. The focus is on key performance indicators (KPIs) such as multidisciplinary team (MDT) discussions, compliance with documentation standards, timely treatment initiation, and other diagnostic and treatment-related practices. The analysis covers data from July to December 2022 and compares it with 2023 targets to identify gaps and areas for improvement. The report highlights the successes and challenges in adhering to CPGs for breast cancer, cervical cancer, Ewing sarcoma, gastric cancer, nasopharyngeal carcinoma, and prostate cancer, and discusses the implications for patient diagnosis and care outcomes.

# **Key Points**

#### **MDT Discussions:**

Ensure all cases undergo multidisciplinary team discussions to improve diagnostic accuracy and comprehensive treatment planning, especially for cancers with currently low compliance rates.

Timely Treatment
Initiation: Address
delays in
treatment initiation
for cancers like
gastric and
nasopharyngeal
carcinoma to
enhance early
intervention and
patient outcomes.

# Documentation Compliance: Improve adherence to

adnerence to
documentation
standards,
particularly in
cervical cancer
pathology reports,
to support
accurate diagnosis
and effective care
delivery.

#### Screening and Referral Protocols:

Maintain high compliance with screening and referral practices to ensure early detection, comprehensive assessment, and appropriate management of cancer patients.

#### Introduction

Clinical practice guidelines (CPGs) are essential tools designed to standardize care delivery, improve patient outcomes, and reduce variability in healthcare practices. In oncology, adhering to these guidelines is particularly crucial due to the complexity of patient conditions and the rapid progression of many cancers. CPGs provide evidence-based recommendations for the diagnosis, treatment, and management of various cancers, aiming to optimize care and ensure timely and accurate patient diagnoses.

This project evaluates the adherence to CPGs for multiple cancer types, including breast cancer, cervical cancer, Ewing sarcoma, gastric cancer, nasopharyngeal carcinoma, and prostate cancer. The focus is on the impact of adherence on diagnostic processes and patient outcomes. Key performance indicators (KPIs) such as multidisciplinary team (MDT) discussions, compliance with documentation standards, timely treatment initiation, and adherence to diagnostic and therapeutic protocols are analyzed. The project aims to identify gaps in adherence, understand contributing factors, and propose recommendations for enhancing compliance and improving diagnostic accuracy across these cancer types.

#### **Methods**

A retrospective project was conducted to assess the adherence to clinical practice guidelines (CPGs) for six types of cancer from July to December 2022, with comparative targets set for 2023. The project utilized clinical records, MDT meeting logs, treatment initiation timelines, and documentation compliance rates to evaluate the performance of various oncology programs. The key metrics assessed included:

- MDT Discussions: Participation and compliance with guidelines for discussing cases in multidisciplinary team meetings before treatment initiation, which directly impacts diagnostic accuracy and comprehensive care planning.
- **Timely Treatment Initiation:** The percentage of patients starting treatment within specified timeframes post-referral, critical for managing cancer progression effectively.
- Screening and Referral Protocols: Compliance with required screenings (e.g., dental, nutritional) and referral practices (e.g., physiotherapy) to support accurate diagnosis and tailored treatment strategies.

Data were collected from institutional databases, patient management systems, and departmental records. Descriptive statistics were used to calculate percentages and compare them against target values. Trends over time were also examined to assess the impact of any interventions implemented to improve adherence to CPGs and enhance diagnostic accuracy.

## **Results**

The following table summarizes the key findings from the analysis of adherence to clinical practice guidelines and their impact on patient diagnosis across various cancer types:

Cancer Type	Metric	2022/	Target	Findings
		2023		
Breast Cancer	Patients with MDT discussion before treatment initiation	99.4%	95%	Exceeded target; high compliance with MDT discussions, positively impacting diagnostic accuracy.
	Patients with breast surgery within 8 weeks of the last neoadjuvant chemotherapy	98%	80%	Exceeded target; effective coordination for timely surgeries, improving outcomes.
Cervical Cancer	Compliance with MDT discussion	100%	95%	Exceeded target; all cases were discussed in MDTs,

				enhancing diagnostic
				accuracy.
<b>Ewing Sarcoma</b>	Adherence to guidelines	100%	80%	Exceeded target; strong
				adherence supports accurate
				diagnosis and effective
				treatment planning.
	Timely treatment	100%	90%	Exceeded target; consistent
	initiation within 28 days			with expected timelines for
				treatment initiation,
				supporting early diagnosis.
Gastric Cancer	MDT compliance before	100%	95%	Exceeded target; all eligible
	starting therapy			cases underwent MDT
				discussions, enhancing
				diagnostic accuracy.
	Treatment initiation	70%	90%	Below target; delays in
	within four weeks post-			starting treatment affect early
	referral			intervention and diagnostic
				processes.
Nasopharyngeal	Dental and nutritional	100%	90%	Exceeded target; strong
Carcinoma	screening compliance			adherence supports
				comprehensive diagnostic
				assessments.
Prostate Cancer	Physiotherapy referral	100%	90%	Exceeded target; all eligible
	compliance			patients were referred for
				physiotherapy, supporting
				comprehensive care.
	MDT discussion	70%	90%	Below target; needs
	compliance			improvement to ensure
				thorough diagnostic
				evaluations.

# Conclusion

The project reveals varying levels of adherence to clinical practice guidelines across different cancer types and their impact on patient diagnosis. High compliance was observed in areas such as MDT discussions for breast and cervical cancer cases and screening protocols in nasopharyngeal carcinoma, leading to improved diagnostic accuracy and comprehensive care planning. However, significant gaps remain, particularly in documentation practices for cervical cancer and MDT discussions for nasopharyngeal and prostate cancers, which may negatively impact patient diagnosis and treatment outcomes.

To enhance adherence to CPGs and improve diagnostic accuracy, targeted interventions are necessary:

- Enhancing Training and Communication: Regular training sessions and improved
  communication among healthcare providers are crucial to ensuring all cases undergo MDT
  discussions and proper documentation practices are maintained.
- Streamlining Processes: Developing more efficient referral and treatment initiation processes, particularly for gastric cancer, reduces delays and supports timely diagnoses.
- 3. **Implementing Robust Monitoring Systems:** Continuous monitoring and feedback mechanisms are needed to identify deviations from guidelines promptly and implement corrective actions.