



Parallel session

Volume-outcome relation in breast cancer care

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Hot topics for discussion

- Volume-outcome relation in general vs for cancer vs breast cancer: same or different?
- Volume-outcome relation for diagnostics
- How the unit should be defined? (unit, ward)
- Are the outcomes important?
- How to take into account the context, and/or patient and citizens' values?
- Existing recommendations from screening guidelines
- Volumes of what? (hospital? Physician's workload?)
- Right outcome? (mortality? Relapse? QoL?)
- Bias and confounding – statistical issues (risk assessment, etc.)
- Practical implementation in policy contexts of volume thresholds
- Use of other tools for quality assurance, eg. certification



Examples from European breast cancer services certifications

BCC	Eusoma: 150 primary cases each year, on a population base of about 250 000
DKG/DGS	100 primary cases each year. After 3 years the main location should treat \geq 150 primary cases. >50 cases if collaborating centre with pre-existing collaboration and cooperative centre with 2 locations >150 cases. At least 50 chemotherapy treatments per year for breast cancer patients or at least 200 chemotherapy treatments per year (for various types of tumours). Case number of the pathological institute given. At least 1 000 histological examinations, incl. cytological examinations
EUREF cat 1	1 000 mammograms/year
EUREF cat 2	2 000 mammograms/year
EUREF cat 3	5 000 mammograms/year – 20 000 women eligible in the target population
EUREF cat 4	10 000 mammograms/year – 20 000 women eligible in the target population
NCPR	The multidisciplinary team should discuss at least 100 new breast cancer patients per year at the meetings. The departments of the network should be delivering a combined total of at least 40 000 (health needs adjusted using the Malthus tool) fractions of external beam radiation therapy per million of the network's radiotherapy catchment population, per year
NHSBSP	Information not retrieved on the website
SESPM	No requirement
SIS/ISS	Numeric requirements only for diagnostic breast imaging centre: 2 000 mammograms/year The surgeon must treat at least 50 primary cases per year
SSS	125 primary cases each year

