West Yorkshire Thyroid Cancer Group Meeting and Regional Thyroid MDT Development Meeting

18th November 2015, level 7, Bexley Wing, SJUH, Leeds.

Minutes of the Meeting

Present:

Dr G Gerrard (Chair)
Dr V Gill
Mrs L Priestley
Mr C Bem
Mr J Murphy
Mr J Moor
Mr S Wood
Ms C Lamping

Topics Discussed:

1. **2015 American Thyroid Association guidelines** – no big changes for us but need to read the 400+ pages in more detail.

2. **How we can improve the MDT meeting.** We all feel that we need to move through the long list more quickly, and Mr Murphy and Mr Moor will help with chairing the meetings. **If there is no representative from each team present, then their cases will not be discussed at the meeting, unless** there is appropriate communication to someone who has confirmed attendance at the meeting. We are happy to increase video links. One of the surgeons noted that Mr Agada has not been able to attend any of the MDT meetings because he has a clinic in Scarborough on Wednesdays. The meeting is to continue on Wednesday evenings, and he has been encouraged to change his job plan to allow him to take part in the York video link.

3. The surgeons were **reminded to prescribe 2 mcg per kg of thyroxine** to patients post operatively, **or 1.6 mcg per kg if** the patient is obese, frail or elderly. Also patients are referred by the oncologists to the surgeon or endocrinologist for **routine 9 - 12 month post radiiodine neck U/S.**

4. **Updated patient information leaflet on radiiodine** (personalised decision making added to the leaflet) These are in print at the moment, and when printed we need to share them with all surgeons in the region.
Meanwhile it is very helpful to continue the practice of surgeons giving the patient a leaflet on radioiodine and thyroglobulin. The butterfly DVD’s are also useful.

5. **Guidelines** on the management of thyroid cancer are on the YCN website, and also on the SCN website under the West Yorkshire head and neck section, and summarise the management of thyroid cancer in the region.

6. **Trials.** Open trials include ION and NATT (for anaplastic thyroid cancer patients – relatives can now consent for the patient to enter the trial to have their tissue banked after the patient has died). The QaLM trial, for medullary thyroid cancer patients is to hopefully open soon. We need to inform Mr Lansdown of this trial.

7. **Audits.** Mr Moor plans to start an audit on post op voice quality. The Huddersfield surgeons are comparing the pathological size of the primary compared with the US size of the tumour pre op. The oncology audits performed include management and outcome of thyroid cancer patients treated in the region in 1999 compared with 2009 and showed that both management and survival have improved over 10 years. This was presented as a poster at the RCR audit competition in 2015. A dosimetry audit (the first in the UK) was presented at UKRO in 2015. The following audits were presented at the most recent European Thyroid Association Meeting; piloting risk stratification in thyroid cancer, thyroxine dose post operatively (2 mcg per kg), nurse led review and a pathology audit on the number of PTC versus FTC cases in the region. Dr Gill and Dr Gerrard have also been monitoring the number of patients who have not had a stimulated thyroglobulin performed when requested.

8. **Computer follow up** - We are awaiting the new Beckman supersensitive thyroglobulin assay, and computer tracking before starting computer follow-up. Dr Gerrard to liaise with Judy Turley when we have the Beckman thyroglobulin assay.

9. **TNM staging of thyroid cancer patients**
   In 2012, 0% of our patients were documented as being fully staged because Mx was not inserted. We would like to know the percentage of thyroid cancer patients recorded as staged in the region in either 2013 or 2014, and Dr Gerrard to liaise with the quality improvement team.

10. **Specialist nurse support for thyroid cancer in other hospitals in the region.**
    There is no support in mid Yorkshire and less support in Bradford where one head and neck nurse has retired and another is on maternity leave.

11. **Thyroglobulin service** - the oncologists feel that this has improved since peer review.
12. **Patient satisfaction surveys**
   The nuclear medicine team performed a survey in 2015, and results awaited.

   Minutes by G Gerrard 28/12/15