

Quality indicators may improve surgical treatment for cervical cancer



Quality assurance programs can improve quality of care.

INTRODUCTION

Surgery is a common treatment option for many gynecologic cancers, including those affecting the cervix. Improving the quality of surgical care has been shown to improve outcomes in other types of cancer, for example, by reducing complications and side effects.

The measurement of quality indicators is one of the primary activities of the European Society of Gynaecological Oncology (ESGO), a group of healthcare professionals working to improve the quality of care for women with gynecologic cancers across Europe. Quality indicators give doctors and hospital administrators a way to measure and score the care that is being given and, importantly, a way to improve care and organizational processes.

WHAT DID THE AUTHORS HOPE TO LEARN?

The authors wanted to develop a list of conditions and guidelines that could be used to measure quality. The aim was to create a set of quality indicators that can be used by doctors, hospitals, governments, and societies to benchmark, audit, or certify the quality of surgical treatment of women with cervical cancer.

WHO WAS INCLUDED?

This was not a clinical trial or study, so there were no people directly involved. Instead, the authors looked at published guidelines and reports of quality indicators to identify possible items to include.

HOW WAS THE STUDY CONDUCTED?

This was a systematic literature review. A systematic review aims to identify all the published evidence on a topic and to summarize the combined results. The authors used databases (large collections of information) of published studies to search for reports on quality indicators. They also used published treatment guidelines.

A list of possible quality indicators was created and discussed in two meetings of 16 experts from 11 countries, and then an external review (a review that did not include the original experts) was conducted by 94 independent doctors and 3 women with cervical cancer.

WHAT WERE THE MAIN FINDINGS OF THE STUDY?

Fifteen indicators were developed. Each has a definition that tells what the indicator is measuring—followed by a description of how the indicator will be measured—and a target.

Quality indicators are related to four main areas:

- The first is the caseload in the treatment center, training, and experience of the surgeon.
- The second is the overall hospital management, including whether it is active in clinical research, how decisions are made, and how the pre-operative workup is performed.
- The third focuses on the quality of surgical procedures.
- The fourth looks at how well standards of care are followed.

Some of the quality indicators also highlight how important it is to document or record information to help improve quality.

ARE THESE FINDINGS NEW?

No, these findings are not new. What is new is the complex set of measurable markers or conditions to be evaluated, covering all aspects of the management of the quality of surgical care, such as diagnostics, pathology, quality of the surgery, and number of treated patients. Their combination should give us a reliable picture of the quality of the care.

WHAT ARE THE LIMITATIONS OF THE STUDY?

Some of the indicators are supported only by expert opinion and have little scientific evidence to support them.

WHAT DO THE AUTHORS PLAN TO DO WITH THIS INFORMATION?

The authors plan to set up an accreditation program with ESGO to award recognition to centers that offer quality surgical treatment for cervical cancer.

WHAT IMPACT WILL THIS STUDY HAVE ON PATIENT CARE?

If you have cervical cancer, the new ESGO accreditations should help you to be able to choose to have your surgery at a center documented to provide high-quality surgical care.

If you have any concerns about your disease or treatment, you should talk to your doctor.

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