



Manchester University
NHS Foundation Trust

Greater Manchester and Oswestry Sarcoma Service (GMOSS) Specialist Sarcoma MDT

Annual Report 2017

Host Trust: Manchester University Foundation Trust
Trust Lead Cancer Clinician: Professor Ajiith Siriwardena

The Annual Report 2017 has been agreed by:

The Sarcoma MDT Members who signed off the annual report on 14/03/2018

Chair of GMOSS MDT Miss Gillian Cribb
Vice Chair Dr Anand Kirwadi

GMOSS Annual Report 2017

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1. INTRODUCTION

General

The Greater Manchester and Oswestry Sarcoma Service (GMOSS) weekly MDT meeting is held at the Manchester Royal Infirmary, Manchester University Foundation Trust (MFT) with members from RJAH and The Christie joining the meeting via web conference. Cases discussed include all confirmed new, post resection and diagnosis of relapse sarcomas are discussed to formulate a management plan. Cases of fibromatosis and giant cell tumour of bone are also discussed as are other complex benign conditions where multimodal therapy is required.

Diagnostic services are provided at MFT- Manchester Royal Infirmary (soft tissue only) and Robert Jones and Agnes Hunt (RJAH) Hospitals (bone and soft tissue).

Core resection services are based at MRI (soft tissue only) and RJAH Hospitals (bone and soft tissue). The Christie Hospital provides plastic surgical support, a retroperitoneal resection service, chemotherapy and radiotherapy services.

The MDT meeting team has been running for several years and had an external peer review undertaken in 2013.

Sarcoma Peer Review is completed yearly and is submitted by MFT

Cancer Outcomes and Services Dataset (COSD) is submitted by MFT

Cancer Wait Times data is submitted separately by the three trusts to Open Exeter.

RJAH Participates in the NHS England Annual Audit Meeting with the other four bone tumour centres.

All three trusts participate in the National Cancer Patient Experience Study and results are available on the Quality Health web site

This document shows the activity of the MDT for the calendar year 2016 and includes key changes.

Key Achievements

- RJAH has established a biobank and has been a major contributor of tissue to 100'000 genome project (top trust in 3rd phase of West Midlands rollout of this project)

Key Challenges

- IT Systems at MFT following temporary move of MDT rooms
- Appropriateness of patients submitted for discussion
- Coping with capacity at MFT particularly with newly agreed referral form for sarcomas
- Christies Trial Recruitment. Due to staffing issues, trial recruitment was halted from July 2016 and remained at a very low level in 2017 with only 3 patients entered to trials. We have now partially resolved our staffing issues and are beginning to open new studies for recruitment in 2018.

2. CHANGES IN 2017

CORE AND EXTENDED GMOSS TEAM

Surgical Team

No changes

Radiology

Dr Kulkani has been appointed to CMFT

Pathology

Professor Freemont retired from MFT

Oncology

Dr D Saunders was appointed to Christies

Dr Karup covered for Dr Leahy for 3 months

Clinical Nurse Specialists

RJAH have approval to appoint a Band 6 CNS

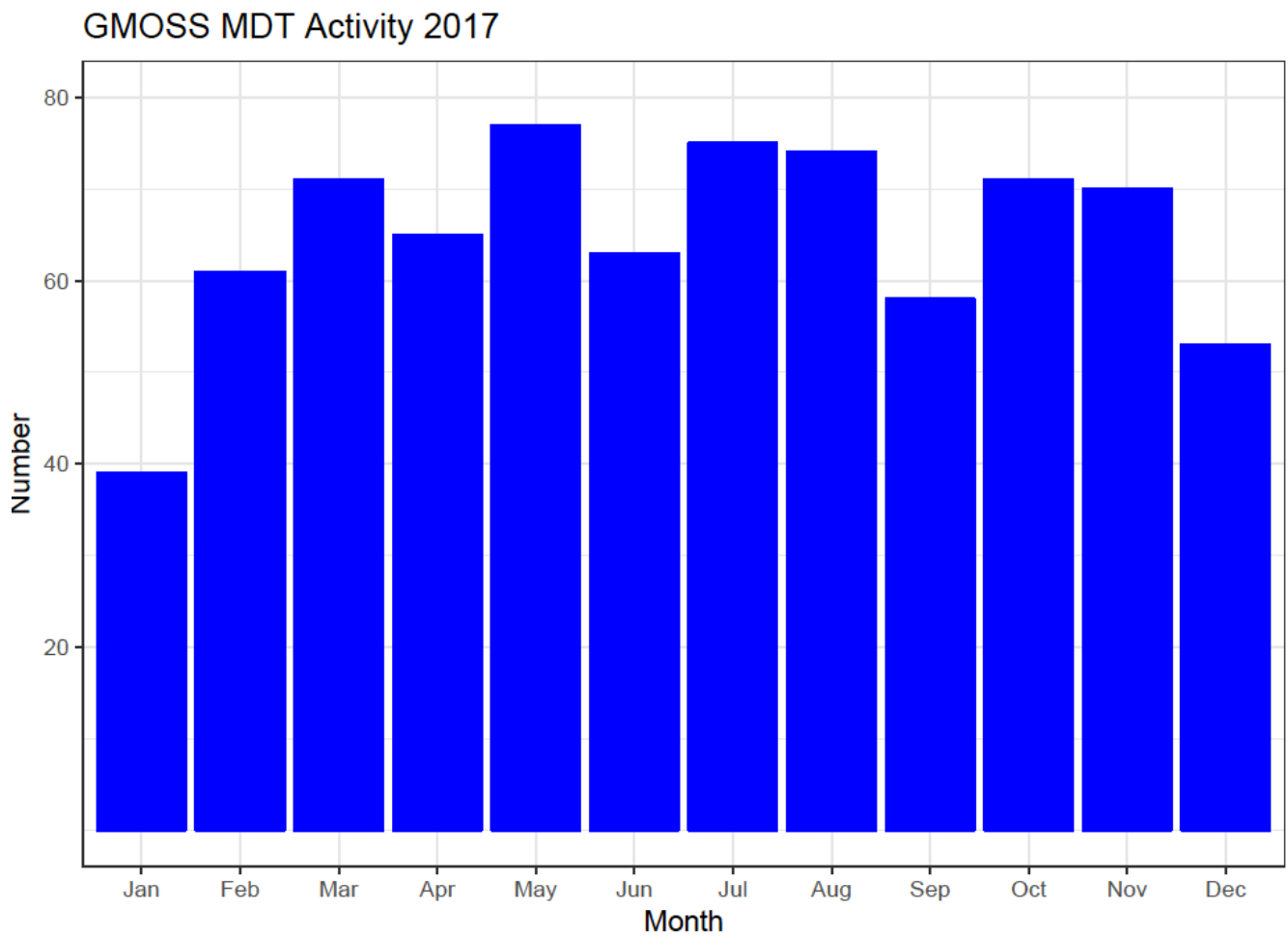
Physiotherapy

RJAH has been awarded a 3 year Macmillan Grant for 7 hours/week Band 7 Macmillan Physiotherapist to provide surveillance clinics for bone tumour patients. Mr Geraint Davies will perform these clinics and Mrs Shona Underwood has been appointed to provide the ward cover for these 7 hours.

3. MDT ACTIVITY

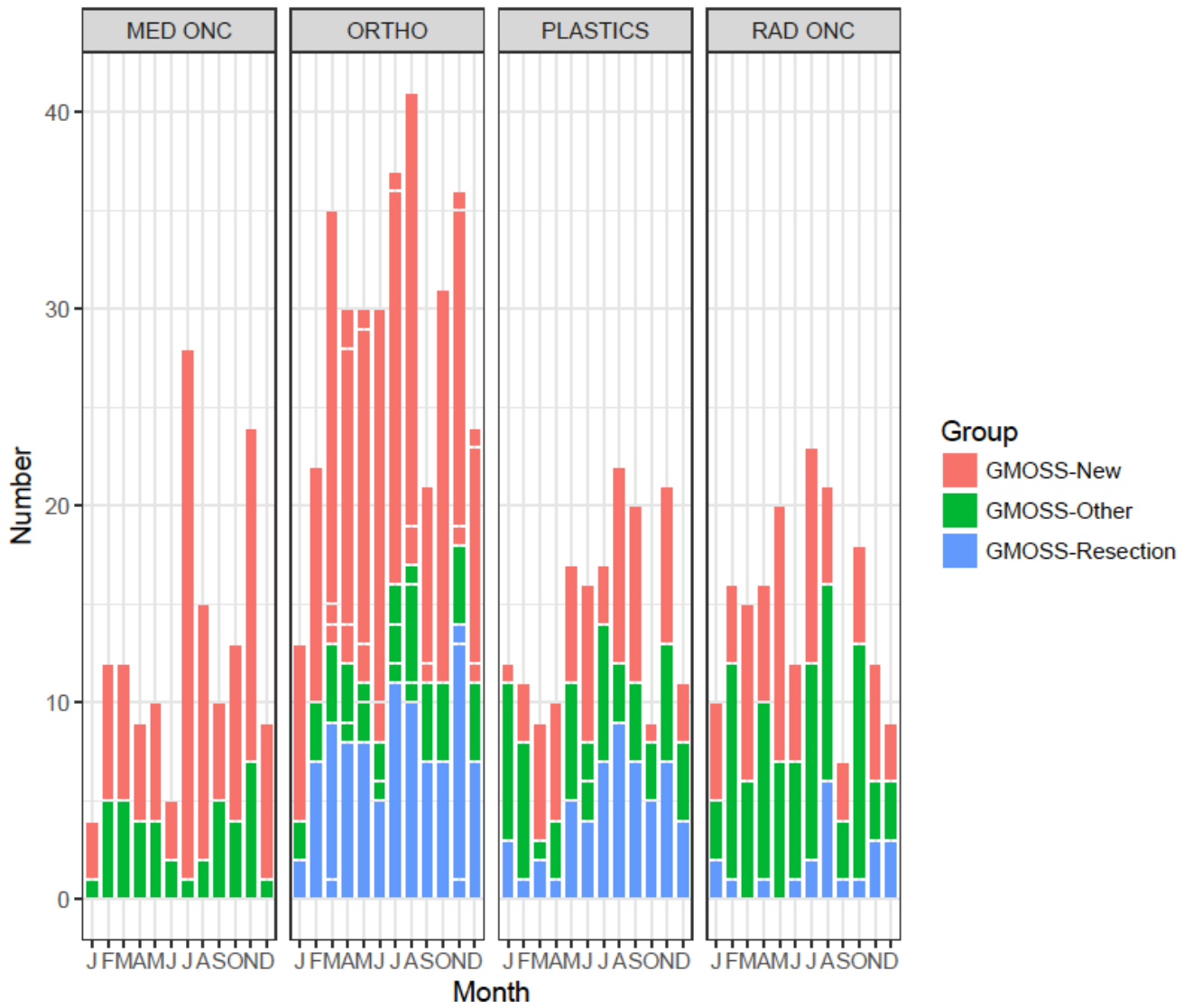
The MDT occurs on a Wednesday and is a major job plan commitment for all Consultants involved.

GMOSS MDT ACTIVITY BY MONTH



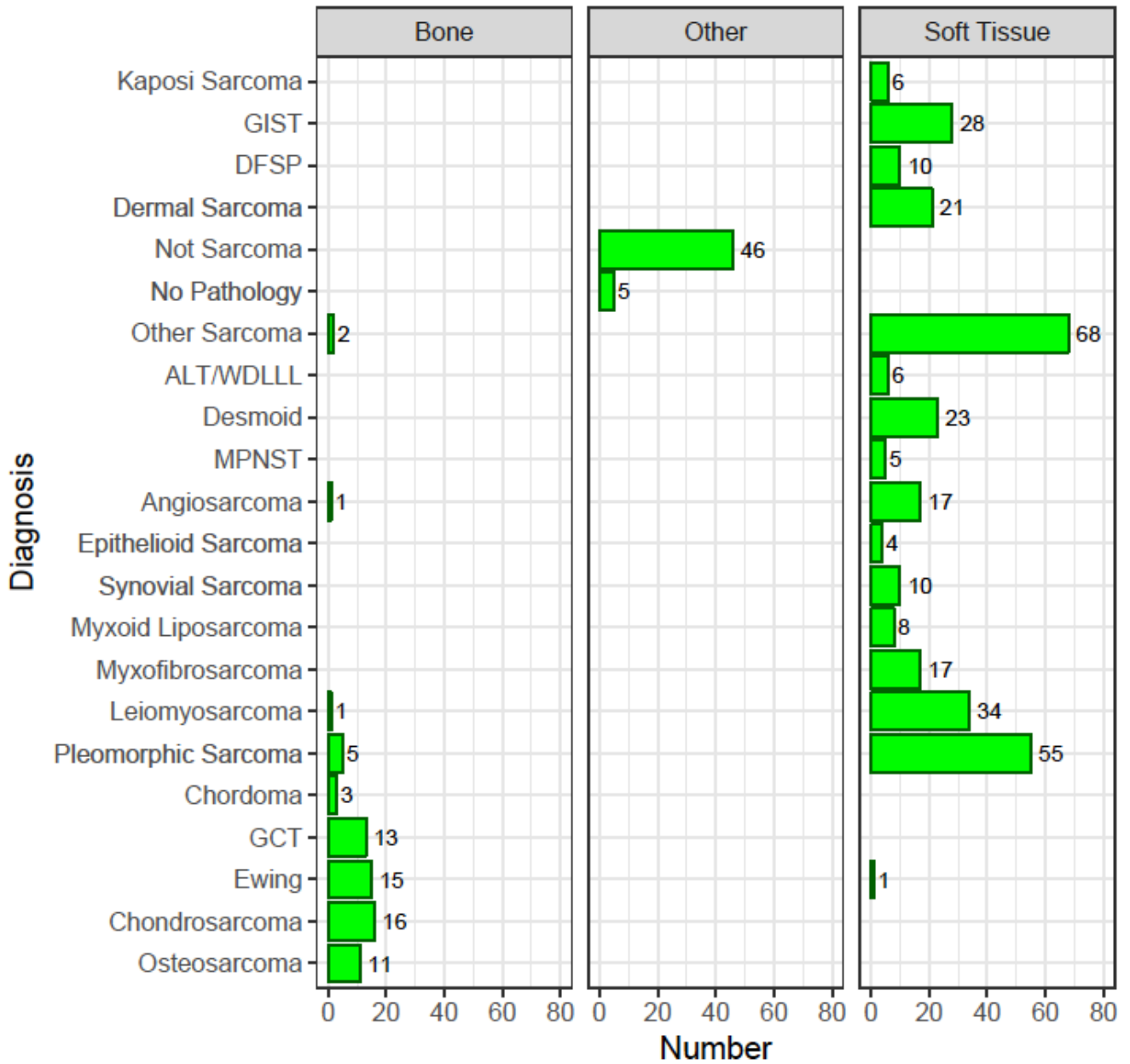
GMOSS MDT ACTIVITY BY SPECIALITY

GMOSS MDT Activity 2017



GMOSS MDT ACTIVITY BY DIAGNOSIS

GMOSS Diagnoses 2017



RJAH Bone Tumour Activity for Financial Year 2015/16

(as presented to NHS England audit March 2017)

Total new patients	927
Total follow up patients	2945
Suspected primary bone tumour	351
Confirmed primary bone tumour	73

4. MANCHESTER CANCER

The SAG ceased to exist in March 2013 and has been replaced by Manchester Cancer, who met for the first time in June 2014. Mr Amit Kumar was appointed as Manchester Cancer Sarcoma Pathway Clinical Director in June 2017

Achievements

- Finalised Sarcoma referral form with GMOSS members for GM Cancer rollout
- Quarterly Sarcoma pathway board meetings
- Set out terms of reference for Sarcoma pathway board
- Facilitating links with other Sarcoma networks and CNS's
- Supporting introduction of Recovery Package for GM Cancer patients with Sarcoma
- Future work: Develop education module for Gateway-C, 100K Genome Project

5. GMOSS MDT BUSINESS MEETINGS 2017

Meetings were held and minutes and attendance recorded on the following dates:

Wednesday 29th March

Wednesday 7th June

Wednesday 29th November

6. MDT ATTENDANCE

The table demonstrates the percentage of individual attendance from January 2017 – December 2017 and the cover arrangements that are in place for core members, as set out in the Operational Policy. Attendance is measured as a percentage of MDTs occurring within the year (except for those who started or left during the year where % is of the number of meetings that that person was eligible to attend). A full attendance record is available. There was a total of 51 meetings.

Orthopaedic Surgeon	100%
Miss G Cribb	80%
Mr P Cool	76%
Mr A Paul	82%
Mr A Kumar	69%
Clinical Oncology	92%
Dr J Wylie	75%
Dr C Coyle	84%
Dr D Saunders	67%
Medical Oncology	100%
Dr M Leahy	78%
Dr M McCabe	45%
Dr L Horsely	82%
Registrar	71%
Dr Roopa Karup	59%
Radiologist	100%
Dr R Lalam	63%
Dr Kirwadi	69%
Dr N Winn	27%
Dr P Konala	69%
Dr S Kulkarni	50%
Pathologist	100%
Prof C Mangham	47%
Prof A Freemont	45%
Dr P Shenjere	84%
CNS	100%
Sr J Evans	41%
Sr C Pemberton	57%
Sr S France	55%
Sr H Murray	53%
Sr A Buchan	82%
Sr L Cooper	78%
Plastic Surgeon	76%
Mr D Kosutic	6%
Mr D Mowatt	76%
Physiotherapist	90%
Ms M Cumbo	63%
Gemma Wilde	37%
MDTC	100%
Gill Furber	92%
Other MDTC	8%

7. AUDIT AND SERVICE IMPROVEMENT

One Stop Sarcoma Clinic MRI– piloted started Oct 17 by AK as part of New Consultant Appointment programme. Service works but capacity particularly with radiology an issue. Continuing pilot, involvement of Transformation team to assess if it is sustainable long term. Review March 18.

Introduction of Pathological Fracture Pathway, MFT, July 2017. Set up in response to HLI regarding management of pathological bone lesions / fractures

8. PUBLICATIONS BY GMOSS MEMBERS

The impact and efficacy of surveillance in patients with sarcoma of the extremities.

Cool P, Cribb G. Bone Joint Res. 2017 Apr;6(4):224-230.

Complete resolution and remodeling of chronic recurrent multifocal osteomyelitis on MRI and radiographs.

Berkowitz YJ, Greenwood SJ, **Cribb G**, Davies K, Cassar-Pullicino VN. Skeletal Radiol. 2017 Nov 9.

Osteoblastoma of the Talus: A case report and review of the literature.

Elsayed H, Puttaraju A, **Cribb G, Cool P**, Afifi H, Abdalla O.

Foot (Edinb). 2017 Mar; 30:59-62.

Soft Tissue Tumours – Diagnosis and Pitfalls

Cribb G JTO 2017 Dec;5(4)

Malignant Primary Bone Tumours

Cool P JTO 2017 Dec;5(4)

Schoffski, P., A. Wozniak, B. Kasper, S. Aamdal, M. G. **Leahy**, P. Rutkowski, S. Bauer, H. Gelderblom, A. Italiano, L. H. Lindner, I. Hennig, S. Strauss, B. Zakotnik, A. Anthony, L. Albiges, J. Y. Blay, P. Reichardt, J. Sufliarsky, W. T. A. van der Graaf, M. Debiec-Rychter, R. Sciot, T. Van Cann, S. Marreaud, T. Raveloarivahy, S. Collette and S. Stacchiotti (2017). "Activity and safety of crizotinib in patients with alveolar soft part sarcoma with rearrangement of TFE3. European Organization for Research and Treatment of Cancer (EORTC) phase 2 trial 90101 "CREATE"." Ann Oncol.

Schoffski, P., A. Wozniak, S. Stacchiotti, P. Rutkowski, J. Y. Blay, L. H. Lindner, S. J. Strauss, A. Anthony, F. Duffaud, S. Richter, V. Grunwald, M. G. **Leahy**, P. Reichardt, J. Sufliarsky, W. T. van der Graaf, R. Sciot, M. Debiec-Rychter, T. van Cann, S. Marreaud, M. Lia, T. Raveloarivahy, L. Collette and S. Bauer (2017). "Activity and safety of crizotinib in patients with advanced clear-cell sarcoma with MET alterations: European Organization for Research and Treatment of Cancer phase II trial 90101 'CREATE'." Ann Oncol **28**(12): 3000-3008.

Seddon, B., S. J. Strauss, J. Whelan, M. **Leahy**, P. J. Woll, F. Cowie, C. Rothermundt, Z. Wood, C. Benson, N. Ali, M. Marples, G. J. Veal, D. Jamieson, K. Kuver, R. Tirabosco, S. Forsyth, S. Nash, H. M. Dehbi and S. Beare (2017). "Gemcitabine and docetaxel versus doxorubicin as first-line treatment in previously untreated advanced unresectable or metastatic soft-tissue sarcomas (GeDDiS): a randomised controlled phase 3 trial." Lancet Oncol **18**(10): 1397-1410.

Surgical management of Skeletal Metastases. Orthopaedics & Trauma. June 2017, Orthopaedic oncology edition **Mr A Kumar**

The role of surgery in metastatic disease to the bone. Multidisciplinary Management of Breast Cancer for Surgeons: A European Textbook. Springer press (2017) **Mr A Kumar**

The hypoxia marker CAIX is prognostic in the UK phase III Vortex-Biobank cohort: an important resource for translational research in soft tissue sarcoma.

Forker L, Gaunt P, Sioletic S, **Shenjere P**, Potter R, Roberts D, Irlam J, Valentine H, Hughes D, Hughes A, Billingham L, Grimer R, Seddon B, Choudhury A, Robinson M, West CML.

Br J Cancer. 2017 Dec 12. doi: 10.1038/bjc.2017.430.

Evaluation of biomarkers in the UK phase III Vortex trial confirms importance of tumour hypoxia in soft tissue sarcoma

Laura Forker, Piers Gaunt, Stefano Sioletic, **Patrick Shenjere**, Joely Irlam, Helen Valentine, David Hughes, Ana Hughes, Lucinda Billingham, Martin Robinson, Catharine West

European Journal of Surgical Oncology 42 (11), S243

The hypoxia marker CA-IX is prognostic in soft tissue sarcoma patients treated in the UK phase III VORTEX trial

L Forker, S Sioletic, **P Shenjere**, J Irlam, H Valentine, D Hughes, A Hughes, P Gaunt, M Robinson, C West

European Journal of Cancer 61, S70

9. PATIENT AND CARER FEEDBACK AND INVOLVEMENT

Patient support initiatives

Northwest Sarcoma Group

The Northwest Sarcoma group are planning their first Wellness Day in 2018

Oswestry Sarcoma Support Group

The 2nd Health and Wellbeing day was held in October 2017. The support group is advertised in the local Macmillan press and on Sarcoma UK website.

Local patient surveys

Patient Feedback - Nurse Led Clinics at RJAH

A very high level of patient satisfaction was seen. This was presented at the June Business Meeting and a full summary is found in the minutes of this meeting

10. RESEARCH AND CLINICAL TRIALS

“Can shear wave elastography differentiate benign from malignant soft tissue tumours”
Recruitment complete and data being analysed

EuroEwing2012 – randomised controlled trial of first line therapy for ewing sarcoma

reCCUR – randomised controlled trial for therapy in relapsed Ewing sarcoma

EORTC 1202 – phase II trial of carbazitaxel for de-differentiated liposarcoma.

Development of Sarcoma Specific Patient Reported Outcome Measure (Phase 1), with UCH London
(Principal Investigator Mr A Kumar)