

Documents

Waked, B.^a, De Maeyer, F.^b, Carton, S.^c, Pieter-Jan, C.U.Y.L.E.^c, Vandamme, T.^d, Verslype, C.^e, Demetter, P.^f, Borbath, I.^g, Van Eycken, L.^h, Hoorens, A.ⁱ, Geboes, K.^a, Van Damme, N.^h, Ribeiro, S.^a

Quality of pathology reporting and adherence to guidelines in rectal neuroendocrine neoplasms: a Belgian national study
(2022) *Acta Clinica Belgica: International Journal of Clinical and Laboratory Medicine*, 77 (5), pp. 823-831.

DOI: 10.1080/17843286.2021.1985806

- ^a Ghent University Hospital, Department of Gastroenterology, Ghent, Belgium
^b Department of Gastroenterology, Godveerdegemstraat 69, Zottegem, Belgium
^c Department of Gastroenterology, Bonheiden, Imeldaziekenhuis, Bonheiden, Belgium
^d Ziekenhuis Netwerk Antwerpen, Department of Gastroenterology, Antwerp, Belgium
^e University Hospital Gasthuisberg Leuven, Department of Gastroenterology, Leuven, Belgium
^f Institute Jules Bordet, Department of Gastroenterology, Brussels, Belgium
^g Cliniques Universitaires Saint-Luc, Department of Gastro-enterology, Brussels, Belgium
^h Belgian Cancer Registry, Brussels, Belgium
ⁱ Ghent University Hospital, Department of Pathology, Ghent, Belgium

Abstract

The incidence of neuroendocrine neoplasms (NEN) in the rectum is rising since the introduction of colonoscopy screening programs. Guidelines, such as the European NeuroEndocrine Tumor Society (ENETS) algorithm, are mainly based on expert opinion. The goal of this nationwide study is to gain a better insight into the evolution in pathology reporting and adherence to the ENETS guidelines in Belgium. In Belgium, all NENs have to be reported to the Belgian Cancer Registry. We thoroughly reviewed all available pathology reports, coded as rectal NEN between 2004 and 2015, and reclassified according to World Health Organisation (WHO) classification 2019. To evaluate the adherence to the ENETS guidelines, population-based cancer registry data were linked with the medical procedures of the Belgian Health Insurance database. A total of 670 rectal NEN were retained and 16% of the cases needed reclassification. Annual incidence between 2004 and 2015 tripled from 0,20 to 0,61 per 100.000 inhabitants. Reporting of Ki67 proliferation index ameliorated most, while reporting of tumor size, lymphovascular and perineural invasion remained disappointing. Endoscopic ultrasound was performed in only 36.6% of the cases, while the mostly recommended mode of treatment (endoscopic/surgical/no resection) was followed in the majority of the cases. Incidence of rectal NEN in Belgium increased throughout the years and quality of pathology reporting improved especially after the WHO classification update in 2010. The growing awareness and knowledge among clinicians and pathologists in the community counters the need for centralization. © Belgian Society of Internal Medicine and Royal Belgian Society of Laboratory Medicine (2021).

Author Keywords

classification; guidelines; pathology reporting; Rectal neuroendocrine neoplasms; treatment

Index Keywords

Ki 67 antigen; Article, cancer grading, cancer registry, colonoscopy, endocrine carcinoma, endoscopic mucosal resection, endoscopic submucosal dissection, endoscopic ultrasonography, human, incidence, large cell neuroendocrine carcinoma, lymph vessel metastasis, medical procedures, mitosis rate, mixed adenoneuroendocrine carcinoma, neuroendocrine carcinoma, pathology reporting, perineural invasion, polypectomy, proctocolectomy, protocol compliance, quality control, rectal neuroendocrine tumor, total mesorectal excision, transanal endoscopic microsurgery, tumor differentiation, tumor volume, World Health Organization

Correspondence Address

Waked B.Corneel Heymanslaan 10, Belgium; email: bruno_waked@hotmail.com

Publisher: Taylor and Francis Ltd.

ISSN: 17843286

CODEN: ACCBA

PubMed ID: 34607538

Language of Original Document: English

Abbreviated Source Title: Acta Clin. Belg. Int. J. Clin. Lab. Med.

2-s2.0-85116397556

Document Type: Article

Publication Stage: Final

Source: Scopus