

Role of MDT in management of Benign HPB disease-Experience from a non-HPB centre in UK

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INTRODUCTION

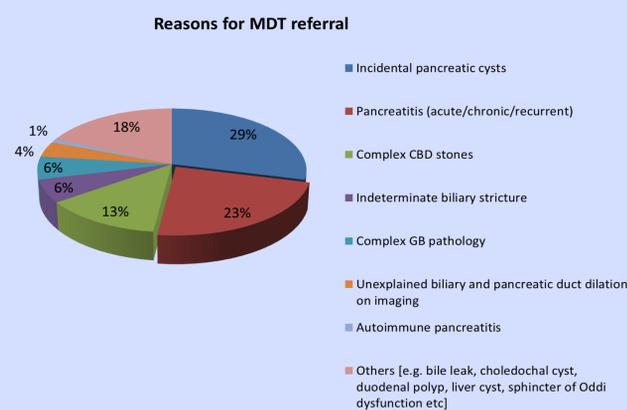
- Recent evidence suggests that MDT meetings play a key role in the management of complex benign diseases (1).
- Management of patients with complex pancreatico-biliary diseases can be challenging due to the lack of robust evidence.
- Widespread use of cross-sectional imaging has led to increased detection of incidental pathologies that may or may not be clinically relevant.
- In view of this, we established a benign HPB MDT in our institution to streamline the management of complex PB patients and report our experience over a period of 12 months

METHOD

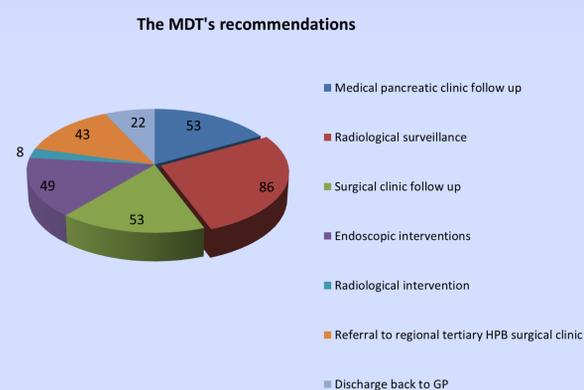
- The weekly benign HPB MDT at JCUH is attended by HPB physicians, interventional GI radiologist, specialist nurse, specialist registrars, upper GI surgeon and the visiting surgeon from the regional tertiary HPB unit.
- Referrals are sent via a dedicated pro-forma and recommendations are recorded electronically on the trust's info-flex software system.
- Retrospective analysis of a prospective maintained database was carried out between January 2017 to December 2017.
- Data was collected on patient demographics, cross-sectional imaging, diagnosis and clinical outcomes.

RESULTS

- 263 patients were discussed (55% males) for benign indications.
- Median age was 67 years (range 21-91 years).
- The main reasons for MDT referral are summarized below:



- MDT's recommendations are summarized below:



CONCLUSIONS

- Our data shows that the Benign HPB MDT facilitated the management of this complex group of HPB patients locally
- Appropriate cases were fast tracked for further management of selected complex patients at the tertiary centre requiring surgery and specialized endoscopic intervention.

REFERENCES

- Noor L H Bekkali et al. The role of multidisciplinary meetings for benign pancreatobiliary diseases: a tertiary centre experience. Frontline Gastroenterology, Volume 8, Issue 3, July 2017