

Breast cancer: DMP is largely consistent with guidelines

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On 16 July 2014 the German Institute for Quality and Efficiency in Health Care (IQWiG) published the results of a literature search for evidence-based clinical practice guidelines on the treatment of people with breast cancer. The aim of the report is to identify those recommendations from current guidelines of high methodological quality that may be relevant for the planned revision of the disease management programme (DMP).

According to the results of the report, there is no compelling need for revision of any part of the DMP. However, IQWiG identified some aspects that could be supplemented and specified.

DMPs are revised regularly

After being commissioned by the Federal Joint Committee (G-BA), IQWiG systematically searched for new <u>guidelines</u>, assessed their <u>methodological quality</u>, and extracted relevant recommendations from these guidelines. In a next step these recommendations were compared with the specifications for the German DMP.

A need for revision may arise if new studies provide new evidence on a disease and its treatment. It is therefore legally specified that a DMP must be revised at regular intervals. It is the Institute's responsibility to firstly identify differences between the guideline recommendations and the DMP. It is then the G-BA'sresponsibility to examine whether these



differences should actually lead to a revision of the DMP.

26 relevant guidelines identified

IQWiG was able to include a total of 26 guidelines in its investigation. Six of these guidelines comprehensively address the care of patients with breast cancer. Seven guidelines exclusively deal with early breast cancer, four further guidelines with <u>advanced breast cancer</u> (stage IV). The remaining nine guidelines address specific aspects such as radiotherapy, breast reconstruction or adjuvant systematic treatment.

Supplementations desirable

As IQWiG determined, there are several health-care aspects for which the recommendations of the DMP should be revised. Among other aspects, this applies to diagnostics and measures in primary therapy: The guidelines address the performance of a <u>magnetic resonance imaging</u> (MRI) scan in specific therapeutic indications, explicitly advising against routine MRI scans. With regard to radiotherapy for <u>breast cancer</u>, the guidelines provide recommendations on hypofractionated radiotherapy – an aspect currently not considered by the DMP.

Process of report production

IQWiG published the preliminary results in the form of the preliminary report in November 2013 and interested parties were invited to submit comments. At the end of the commenting procedure, the preliminary report was revised and sent as a final report to the commissioning agency in May 2014. The written comments submitted are published in a separate document at the same time as the final report. The report was produced in collaboration with external experts.



Provided by Institute for Quality and Efficiency in Health Care

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