Increased Thoracic Expertise Increases Lung Cancer Resection Rates

Increased investment in specialist thoracic surgical expertise can lead to a significant rise in the lung cancer resection rate, based on data from England between 2008 and 2009 that was presented at the 14th World Conference on Lung Cancer in Amsterdam, hosted by the International Association for the Study of Lung Cancer (IASLC). In England, lung cancer resection is less common than in other countries, and is performed by both cardiothoracic and pure thoracic surgeons. Researchers tested the hypotheses that the resection rate was related to the caseload and local provision of pure thoracic surgeons, and that expansion of thoracic surgery could increase the resection rate.

In 2008, 31 facilities provided the thoracic surgery service to 33 cancer networks comprising of 174 patients. Of these, 42 percent had two or more pure thoracic surgeons. In 2009 this grew to 58 percent. In 2008, there were 15,774 recorded cases of confirmed non-small cell lung cancer (NSCLC). Of these, 14.2 percent underwent surgical resection. In 2009, following the new consultant appointments, the number of histologically confirmed NSCLC patients increased by 13.8 percent, and the overall resection rate increased by 46 percent.

In facilities where a pure thoracic surgeon was present in more than two-thirds of the lung cancer multidisciplinary team meetings, the NSCLC resection rate was significantly higher than those with lower attendance. Networks that experienced an expansion in their number of pure thoracic surgeons during this period experienced a significant and larger increase in resection rate than those who did not.

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