

Quality Performance Indicators Audit Report



Tumour Area:	Lymphoma
Patients Diagnosed:	1 st October 2021 to 30 th September 2022
Published Date:	31 August 2023

1. Patient Numbers and Case Ascertainment in the North Cancer Alliance (NCA)

A total of 266 cases of Lymphoma were recorded through audit as diagnosed in the North Cancer Alliance between 1st October 2021 and 30th September 2022, this was lower than 2020-21. Overall case ascertainment was also lower than the previous year at 85.6% compared to 108% in 2020-21. However, case ascertainment figures are provided for guidance and are not an exact measurement of audit completeness as it is not possible to compare the same cohort of patients.

Case ascertainment and proportion of NCA total for patients diagnosed with lymphoma in 2021-22

	Grampian	Highland	Orkney	Shetland	Tayside	W Isles	NCA
Audit cases 2021-22	114	75	3	1	73	0	266
% of NCA total	42.9%	28.2%	1.1%	0.4%	27.4%	0.0%	100%
Average Cancer Registration Cases (2017-21)	135.0	67.2	4.0	3.6	98.3	3.0	310.8
% Case ascertainment 2021-22	84.4%	111.6%	75.0%	27.8%	74.5%	0.0%	85.6%

The number of instances of data not being recorded were very low, as such, the audit data was considered to be sufficiently complete to allow QPI calculations.

2. Age and Gender Distribution

Figures one and two below show the age distribution of patients diagnosed with Lymphoma in the North Cancer Alliance in 2021-22 and the five years' average number of patients. In 2021-22 the highest number of male patients diagnosed were in the 70-79 age group followed by 60-69 age group, shown in Figure 1. In comparison with five years' average of male patient numbers the pattern is similar. Figure two shows, in 2021-22 the highest number of female patients diagnosed were in the 75-79 age group. In comparison with five years' average the highest number is within the 70-74 age group, however, the numbers also concentrated in the age groups of 60-69 and 75-84.

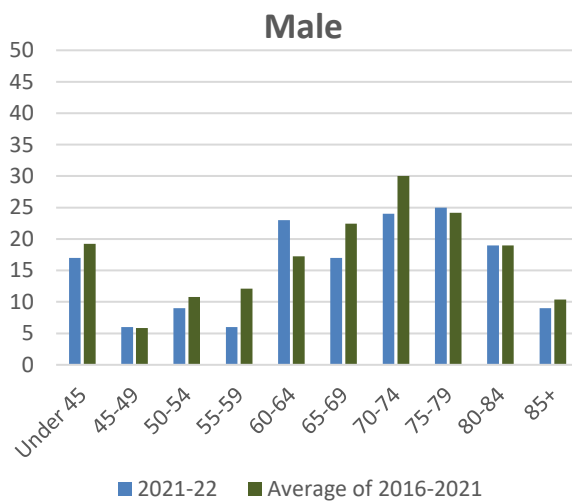


Fig 1: Age distribution of patients diagnosed with Lymphoma cancer in the NCA in 2021-2022 for Male patients

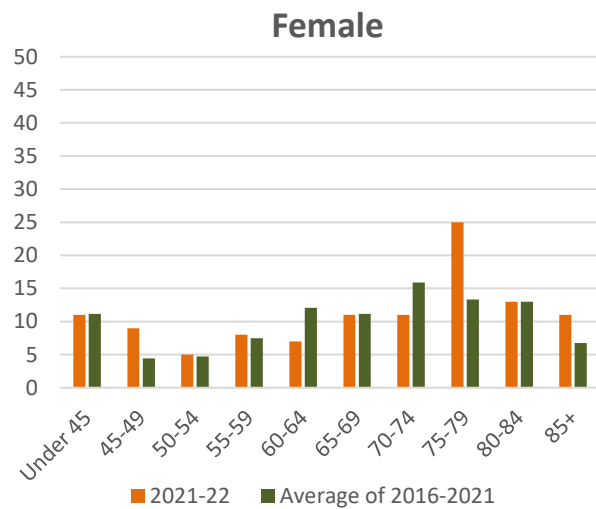


Fig 2: Age distribution of patients diagnosed with Lymphoma cancer in the NCA in 2021-2022 for Female patients

3. Performance against Quality Performance Indicators (QPIs)

Definitions for the QPIs reported in this section are published by Healthcare Improvement Scotland¹, while further information on datasets and measurability used are available from Public Health Scotland². Data are presented by Board of diagnosis.

**Where the number of cases per Board is between one and four, results have been excluded from charts and tables to minimise the risk of disclosure. However, all board results are included within the total for the North of Scotland.*

4. Governance and Risk

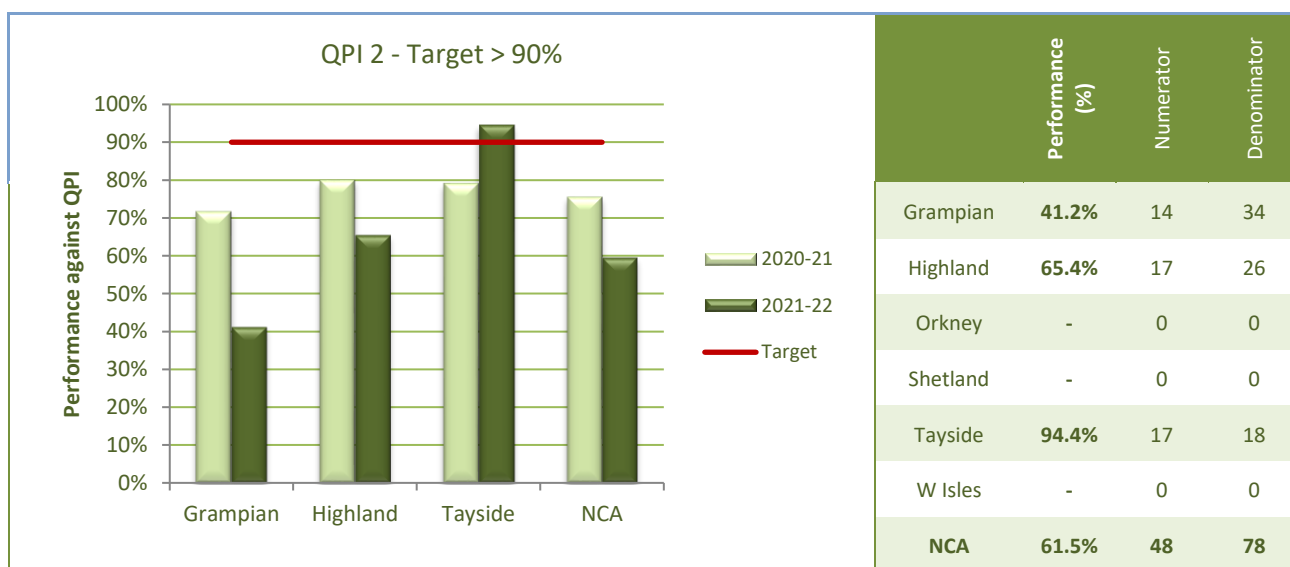
QPI performance is overseen by the North Cancer Alliance and its constituent groups, with an assessment of clinical risk and action planning undertaken collaboratively and reporting at board and regional level. Actions will be overseen by the Pathway Boards and reported concurrently into the NCA governance groups and the Clinical Governance committees at each North of Scotland health board.

Further information is available [here](#).

QPI 1	Radiological Staging
Description: Proportion of patients with lymphoma undergoing treatment with curative intent who undergo Computed Tomography (CT) of the chest, abdomen and pelvis or PET CT scanning prior to treatment, where the report is available within three weeks of radiology request.	



QPI 2	Treatment Response
Description: Proportion of patients with DLBCL who are undergoing chemotherapy treatment with curative intent, who have their response to treatment evaluated with Computed Tomography (CT) scan of the chest, abdomen and pelvis or PET CT scan.	

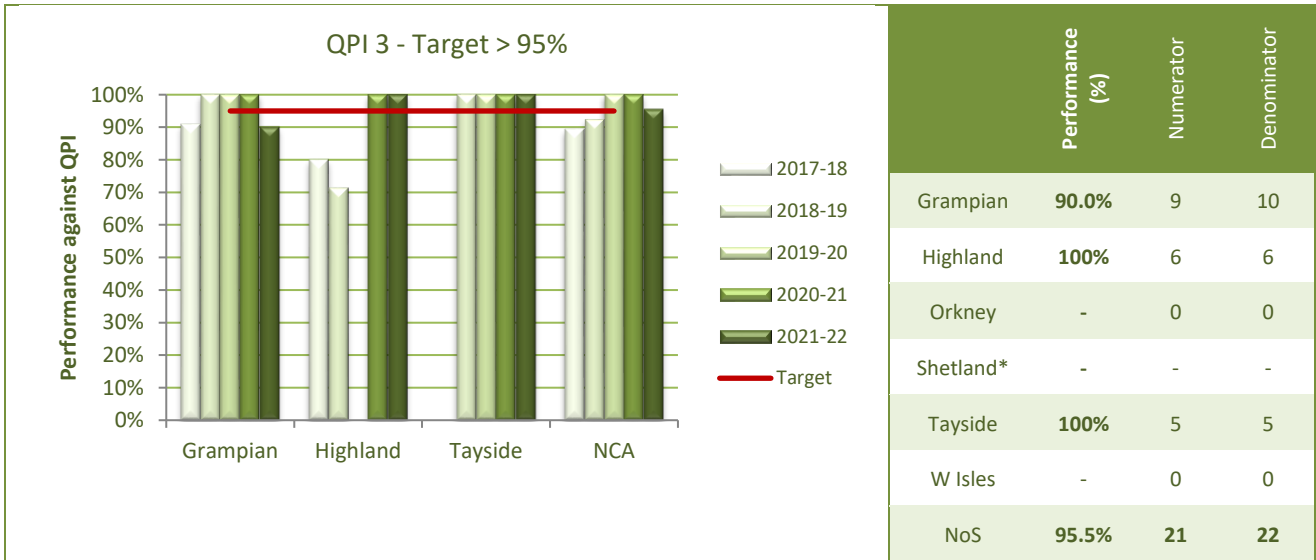


Overall the NCA boards did not meet this target due to challenges in radiology service capacity for imaging. Cases where the QPI target has not been met are due to delays in receiving imaging within the QPI reporting period. NHS Grampian have implemented a timescale process to prioritise PET CT for this patient cohort following discussions with radiology. A National Formal Review of the QPIs is currently underway and the NCA will continue to monitor the results of this QPI in future years' reporting.

QPI 3

Positron Emission Tomography (PET CT) Staging

Description: Proportion of patients with Classical Hodgkin Lymphoma undergoing treatment with curative intent who undergo PET CT scan prior to first treatment, where the report is available within three weeks of radiology request.



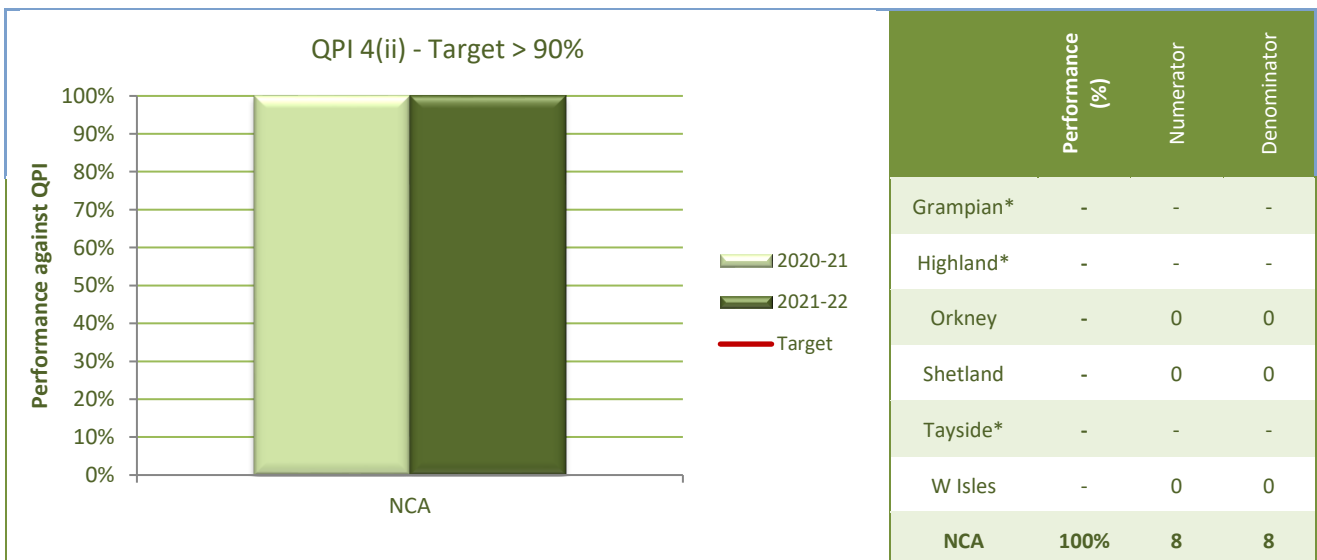
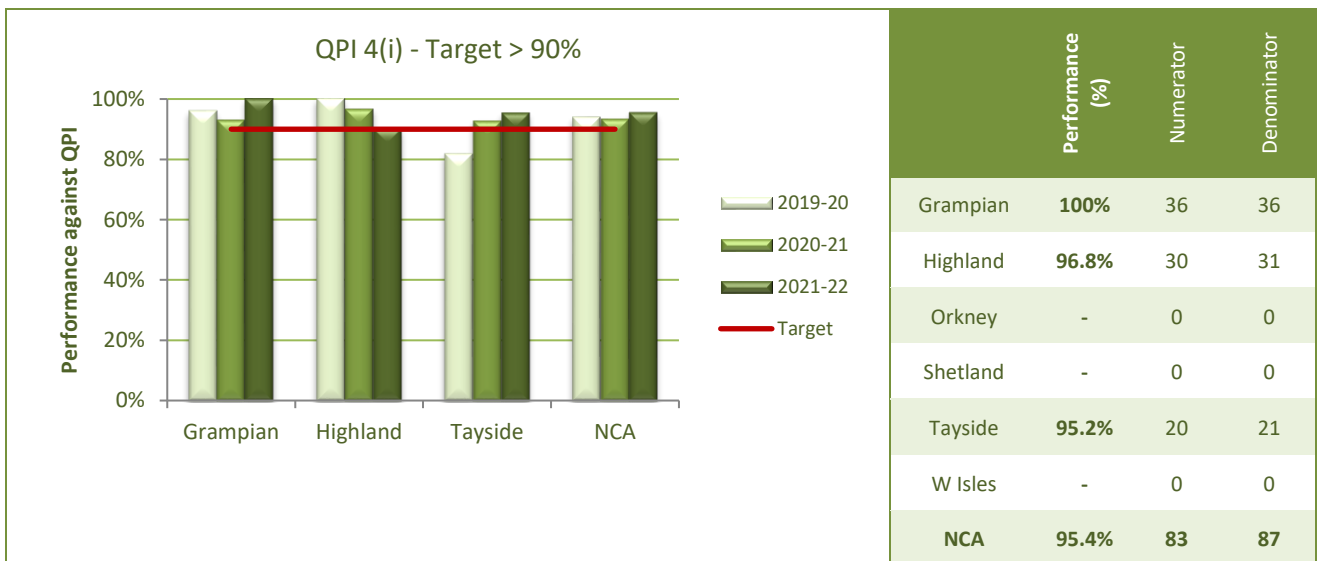
QPI 4

Cytogenetic Testing

Description: Proportion of patients with Burkitt Lymphoma or DLBCL undergoing treatment with curative intent who have MYC testing (and BCL2 / BCL6 testing where appropriate) as part of the diagnostic process.

Please note: The specifications of this QPI are separated to ensure clear measurement of the following:

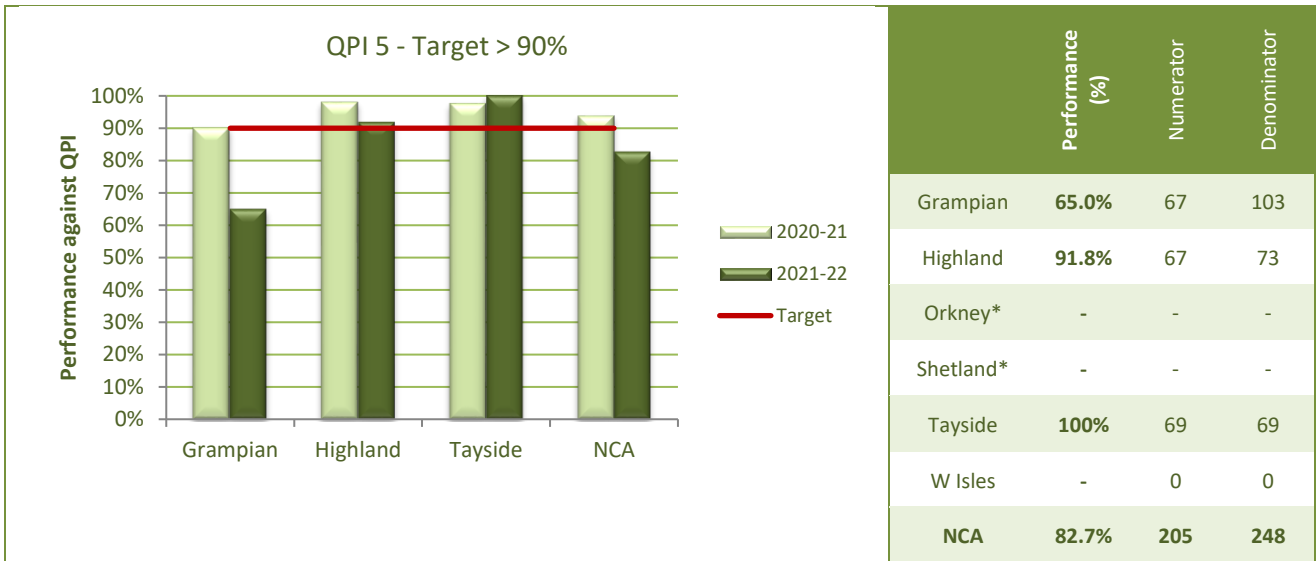
- (i) Patients with Burkitt Lymphoma or DLBCL undergoing chemotherapy treatment with curative intent who have MYC testing; and
- (ii) Patients with DLBCL MYC rearrangement identified on FISH analysis undergoing chemotherapy treatment with curative intent who have BCL2 / BCL6 testing with results reported within three weeks of commencing treatment.



QPI 5

Lymphoma MDT

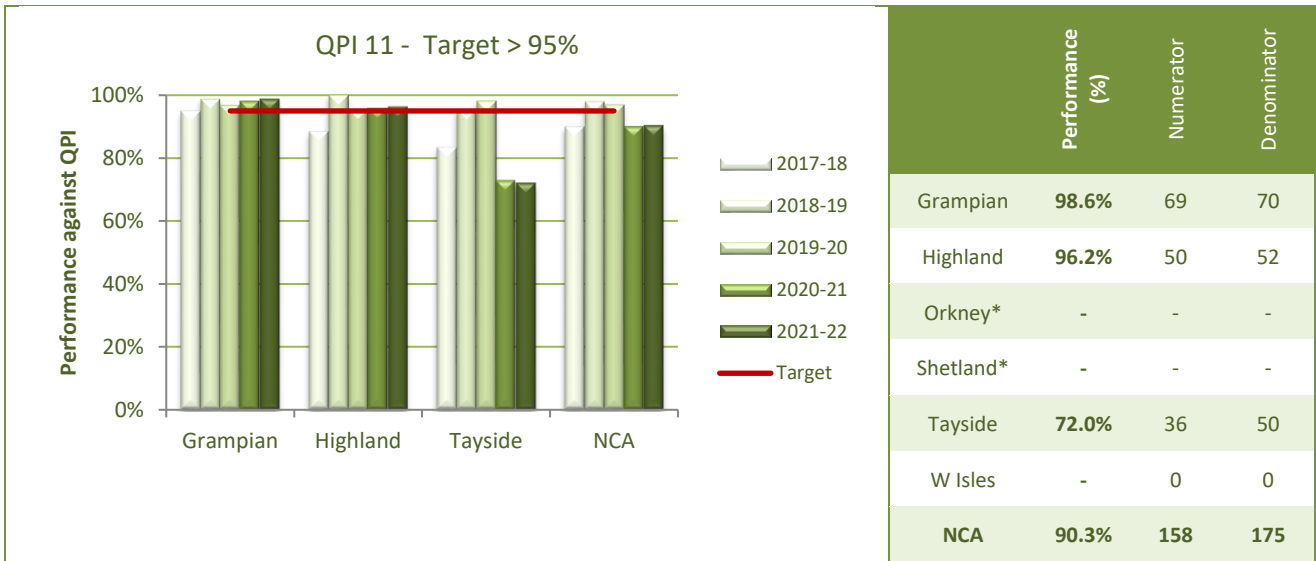
Description: Proportion of patients with lymphoma who are discussed at MDT meeting within eight weeks of the pathology report being issued.



The target for this QPI was not met by the NCA overall. NHS Grampian have missed the target due to workforce capacity issues, and will be monitored in future years' reporting.

QPI 11 **Hepatitis and HIV Status**

Description: Proportion of patients with lymphoma undergoing SACT who have hepatitis B [core antibody (anti-HBcAB) and surface antigen (HBsAG)], hepatitis C and HIV status checked prior to treatment.



The target for this QPI was not met within NHS Tayside, the results of this QPI has instigated educational sessions to be undertaken locally within NHS Tayside and will be monitored in future years' reporting.

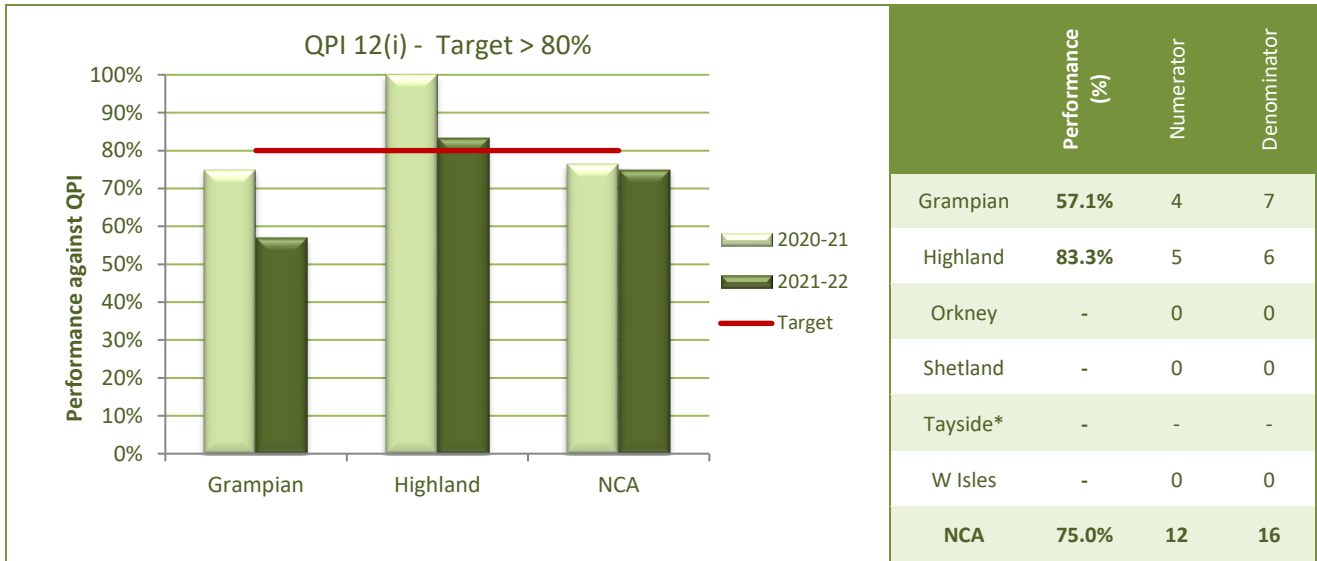
QPI 12

Treatment Response in Hodgkin Lymphoma

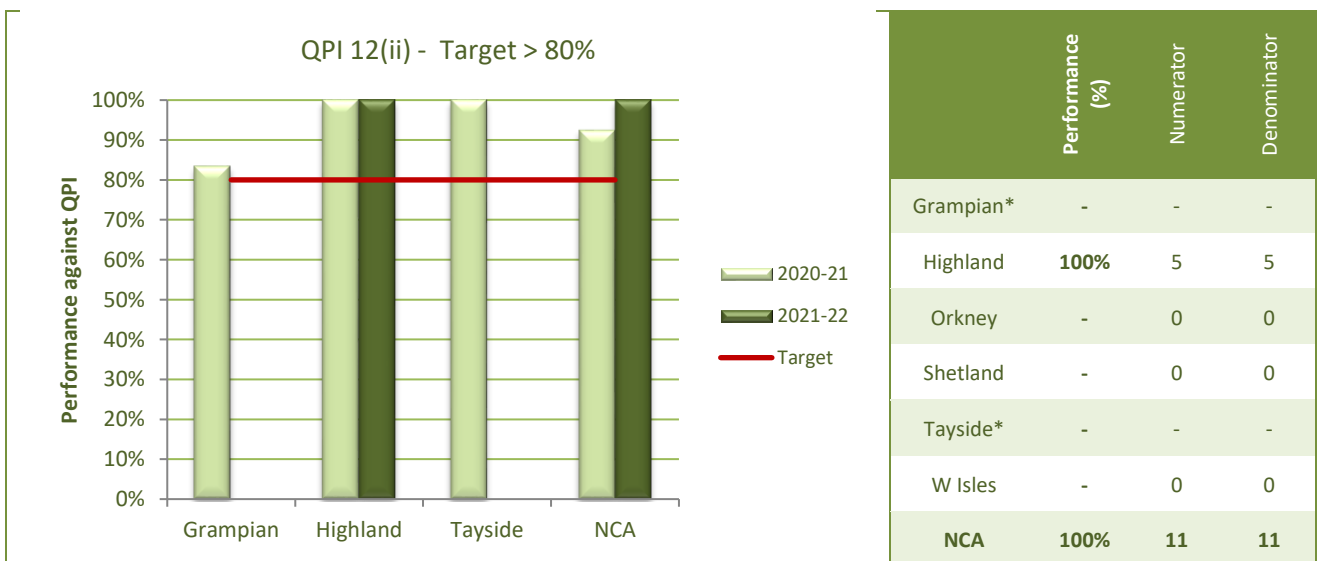
Description: Proportion of patients with advanced Hodgkin Lymphoma (stage 2B and above) who receive ABVD, BEACOPP or BEACOPDac chemotherapy treatment, that have their treatment evaluated with PET CT scan after 2± cycles of chemotherapy, and where the report is available within three working days.

Please note: The specifications of this QPI are separated to ensure clear measurement of the following:

- (i) Patients with advanced Hodgkin Lymphoma (stage 2B and above) who receive ABVD, BEACOPP or BEACOPDac chemotherapy treatment that undergo PET CT scan after two cycles of chemotherapy.
- (ii) Patients with advanced Hodgkin Lymphoma (stage 2B and above) who receive ABVD, BEACOPP or BEACOPDac chemotherapy treatment that undergo PET CT scan after two cycles of chemotherapy where the report is available within three working days.



Overall the NCA boards did not meet this target due to challenges in radiology service capacity. Cases where the QPI target has not been met are due to delays in receiving imaging within the QPI reporting period. Overall small patient numbers also impact the results of this QPI.



6. References

1. Health Improvement Scotland, Prostate Cancer Clinical Performance Indicators.
https://www.healthcareimprovementscotland.org/our_work/cancer_care_improvement/cancer_qpis/quality_performance_indicators.aspx
2. Public Health Scotland
<https://www.isdscotland.org/Health-Topics/Cancer/Cancer-Audit/#background>
3. Cancer Incident in Scotland
<https://publichealthscotland.scot/publications/cancer-incidence-in-scotland/cancer-incidence-in-scotland-to-december-2021/>