

EUROCHIP-II  
FINAL SCIENTIFIC REPORT  
ANNEX 04

**REPORT OF  
EUROCHIP-2 ACTION IN  
AUSTRIA**

**Quality Assessment and Improvement in GynOncology**

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## Quality Assessment and Improvement in GynOncology

### Background

A questionnaire based system was introduced in 1999 for ovarian cancer in Austrian gynaecological departments. It was supported and run under the auspices of AGO (the Austrian society for gynaecological oncology, a subgroup of the Austrian Society for Gynaecology).

All gynaecological departments in Austria were invited to document their ovarian cancer cases with a dedicated questionnaire. About 2/3 of Austrian gynaecological departments participated. The items of this questionnaire covered patient characteristics, staging, histology, details of surgical treatment and an overview of chemotherapy and radiotherapy. Due to data privacy laws in Austria, the patient must give its consent. Name and date of birth were needed in order to do a passive follow up by linking the cancer data to the official mortality data for Austria run by Statistics Austria.

For the sake of quality improvement, a system of quality indices was introduced. Quality indices cover all aspects of diagnosis, first surgery (for example lymph node dissection, tumour rest after surgery) and outcome in terms of overall survival. Once a year, departments were given detailed benchmarking information. Quality improvement depended on decision of every department.

This experience showed that the implementation of a questionnaire based system is feasible.

### Objective

The objective of the EUROCHIP-Austrian project was to participate in the extension of the previous experience to other gynaecological cancers. Exactly the aim was to establish a questionnaire based system for quality assessment and quality improvement for the main cancer sites treated in gynaecological departments in Austria (cervical cancer, endometrium cancer, ovarian cancer, and breast cancer).

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### Results

After successful piloting and evaluating of the system for ovarian cancer, the system was expanded to corpus cancer, cervical cancer and breast cancer in the last two years. For reasons of the supporting institution, the system is still restricted to gynaecological units. For all four main cancer sites treated in gynaecological departments, the system is now completely implemented.

Till now (December 2007), 73 of 95 gynaecological departments collaborate within the project. Data from year 2005 and 2006 show that about 50% cervical cancers, 40% of corpus cancers, 50% of ovarian cancers (invasive) and 15% of breast cancer cases in Austria are included in the quality assessment program. For breast cancer cases, one must have in mind that breast cancer cases in Austria are still treated in the majority by surgical departments).

### Future steps

1. Expanding the system to a higher proportion of gynaecological departments.
2. Expanding the paper based system to an internet based data collection.
3. Introducing a system of data monitoring in order to check validity of information.
4. Introduce a system of structured quality improvement because up to now quality improvement actions are based on the decision of the respective department.

### Conclusions

A system of quality assessment and quality improvement for all four main cancer sites treated by gynaecological departments in Austria has been introduced. The system is feasible and is well established. It is necessary to expand the system to a higher proportion of gynaecological departments in Austria and to introduce a structured system of quality improvement.

The full implementation of this system and its connection with cancer registries can offer to Austria a great opportunity to have in a routine way a list of detailed information on gynaecological cancer diagnosis and treatment useful to calculate EUROCHIP indicators on cancer treatment delay and compliance with guidelines.

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### Publications:

Obermair A, Sevelda P, Oberaigner W, Marth C: Wie gut ist die Behandlung des Ovarialkarzinoms in Österreich. Frauenarzt 44,732-6(2003). [In German]

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Oberaigner W, Stuhlinger W. Influence of department volume on cancer survival for gynaecological cancers--a population-based study in Tyrol, Austria. Gynecol Oncol. 2006 Nov;103(2):527-34.

Marth C, Hiebl S, Oberaigner W, Sevelda P. Influence of department volume on survival for ovarian cancer - Results from a prospective quality assurance program of the Austrian Association for Gynecologic Oncology (AGO). Submitted to Gynec Oncology (Dec 2007).