Direction of developing cancer survivorship guidelines in Japan: an expert panel’s consensus

Introduction

The Japanese Government has recommended research to develop evidence-based clinical practice guidelines for the mid- and long-term effects of cancer. Our literature review of existing Japanese guidelines for cancer survivorship indicated the need to develop guidelines that help oncology specialists and other healthcare providers in Japan achieve optimal coordination of care during the various phases of the cancer care continuum and promote a healthy lifestyle for cancer survivors [1].

We aimed to develop consensus-based components used in the first evidence-based cancer survivorship guidelines in Japan. Purposeful sampling was used to recruit a panel of experts in oncology clinical practice, nursing, health sciences, epidemiology, and patient advocacy on the likely engaged in a modified Delphi process to generate consensus on: 1) the definition of survivorship, 2) aim and target users of the guideline, and 3) the potential important clinical issues in Japan. We conducted a web-based survey and held a panel meeting to obtain panelists’ feedback on the first draft proposed by the secretariat. We then held a vote online and voted again until all items reached approval of 80% or more. After each round, iterative refinements were made based on panelists’ feedback.

Methods

Results

These guidelines cover the clinical management of the following: health status, physical and psychological effects, preventive and healthy behaviors, quality of life, sexuality, and financial situation. These guidelines do not cover: Patients on chemotherapy (except for patients on maintenance therapy for metastatic disease, and patients with terminal cancer). These are completely new guidelines that use the NCCN (National Comprehensive Cancer Network) system in Japan. These guidelines will be used to complement disease-specific guidelines related to issues 19/22, 86.4% established guidelines.

For the topic of the present guidelines, 20/22 (90.9%) of the panelists reached consensus on the definition of survivorship, and the aim and target users of the guideline (Table 1). Moreover, 11 of 17 key clinical issues were retained after the fourth vote (Table 2). These guidelines cover: Patients with cancer diagnosed at age 18 years or older whose disease is cured or stable. These guidelines do not cover: Patients on chemotherapy (except for patients on maintenance therapy for metastatic disease, and patients with terminal cancer). These guidelines cover the clinical management of the following health status, physical, psychological, and preventive and healthy behaviors, quality of life, sexuality, and financial situations.

Conclusions

The panel’s consensus process on the definition of survivorship, aim and target users of the guideline, and 11 clinical issues will serve as a compass for the development of comprehensive cancer survivorship guidelines in Japan [2]. The stakeholder consensus process and identification of areas to be implemented immediately and addressed in future efforts toward developing Japanese Cancer Survivorship Guidelines are illustrated.

Acknowledgements

This research was supported by National Cancer Center Research and Development Fund (30-A-17). Members of the NCCJ Survivorship Guideline Panel were: Yutaka J. Matsuoka, Ryo Okubo, Yoichi Shimizu, Katsunori Tsuji, Tomomi Hattori, Satoshi Kanai, Hyouki Sasaki, on behalf of the NCCJ Survivorship Guideline Panel*

References


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