

Do you have the making of a Delphi Champion?



Modified Delphi Exercise

The Association of Coloproctology of
Great Britain and Ireland

Dear Colleague

We are delighted to release the results from the ACPGBI's modified Delphi exercise. This important work will set the research agenda for our Association and help the Bowel Disease Research Foundation, who supported the exercise, to prioritise areas for future funding. You submitted over 500 questions in round one. ACPGBI members subsequently cast more than 400 votes in the second and third rounds to define our top 25 research questions. Of these, 15 relate to the treatment of bowel cancer while 10 relate to diverse topics including benign disease, surgical technique and clinical governance.

The results will be published in the December issue of *Colorectal Disease* and are currently available electronically ahead of publication, citation Tiernan et al, *Colorectal Dis.* Oct 5. doi: 10.1111/codi.12790. We are most grateful to the Editor for allowing us to include the results tabled below.

What next? We would like to ask for your help once more to move this project forward. The ACPGBI, BDRF and RCS, together with patient groups, wish to develop a co-ordinated strategy to evolve and implement the Delphi research agenda. In the first instance we would like to hear from individuals or groups who wish to participate in answering any of these questions. We are now seeking **Delphi Champions**. These Champions will be invited to attend the **Delphi Games** in spring 2015, a series of themed meetings that will bring together clinicians, methodologists, patients and funders to develop our trials strategy.

The ACPGBI has agreed to provide a start-up fund to help groups grow. Additional resources are available through the RCS .

If you are interested in becoming a **Delphi Champion**, or simply want to support work on a specific research question, then please do apply providing:

- your name, position and place of work
- contact details
- which research question(s) (maximum of 3) you would like to help develop
- paragraph of less than half a side of A4 explaining your interest

- a short CV of maximum one side A4
- are there any other key players that we should invite to the games? Please also let us know if there are researchers from other disciplines or overseas groups that we should invite to collaborate.

Closing date for expressions of interest is **15 December 2014**. Please email completed applications to gsaffery@bdrf.org.uk.

Please do put your name forward – you have the making of a Champion!

Yours sincerely

Nicola Fearnhead
Chair, ACPGBI Research & Audit Committee

Simon Bach
RCS Subspecialty Lead for Colorectal Surgery
NCRI Colorectal Cancer Clinical Studies Group

Reproduced from Tiernan et al, *Colorectal Dis.* Oct 5. doi: 10.1111/codi.12790. with permission:

Highest priority list of cancer-related research questions:

1	What is the optimal treatment for early rectal cancer? What are the relative roles of endoscopic mucosal resection (EMR), transanal endoscopic microsurgery (TEMs), radiotherapy, chemotherapy and resectional surgery? In cases of early rectal cancer amenable to local excision techniques, are there benefits from additional treatment modalities?
2	What is the best method to predict complete pathological response to chemoradiotherapy in rectal cancer treated with neoadjuvant chemoradiotherapy prior to surgery? Do these patients require immediate resectional surgery? If not, what is the best strategy for surveillance?
3	What is the optimal treatment for endoscopically removed polyp cancers? When is surgical resection necessary? What is the long-term outcome of polyp cancers treated with polypectomy alone?
4	What are the short and long-term outcomes after extralevator abdominoperineal excision of rectum (ELAPE)? Is there an oncological gain and is it justified?
5	What biomarkers (including genetic profiling) affect response to chemoradiotherapy for rectal cancer?
6	Why do some patients develop colorectal cancer metastases? Can early markers of metastatic disease be developed?
7	What is the optimal timing of resection of liver and/or lung metastases from colorectal cancer – before, during or after primary surgery?
8	What is the optimal method of wound closure after abdominoperineal excision of rectum (APER)? In which situations are mesh or plastic reconstruction indicated, and is there a benefit from these techniques?

9	Is there a benefit to preoperative (chemo)radiotherapy in T3 rectal cancer with non-threatened margins? If so, does it justify any potential additional toxicity?
10	Is chemotherapy better given before or after surgery for locally advanced colon cancer? Or both before and after?
11	Is there a price to cancer survivorship after treatment for colon, rectal and anal cancer? What is the impact of treatment on quality of life? What level of poor function is justified to avoid a permanent stoma?
12	What is the role of delayed resection of the primary tumour in chemoresponsive metastatic colorectal cancer?
13	What are the optimal methods and intervals for population screening for colorectal cancer? How can uptake of screening be improved? Are there subgroups of the population who are at higher risk and should be screened earlier or at different intervals?
14	Which colorectal adenomas indicate significantly increased risk of future colorectal cancer? What is the optimal screening strategy for these patients?
15	What is the optimal surveillance strategy for patients who have undergone transanal local excision of rectal cancer?

Highest priority list of non-cancer research questions:

1	How can early detection and outcome of anastomotic leakage be improved? Are there any new techniques or approaches that will reduce anastomotic leak rates in colorectal surgery?
2	What is the best method of i) preventing parastomal hernias ii) repairing parastomal hernias?
3	What are the indications for, and what is the optimal timing of, surgery for Crohn's disease in the era of biological therapy?
4	What are the short and long term outcomes of minimally invasive approaches (e.g. percutaneous radiological drainage, laparoscopic washout and drainage) to managing complicated diverticulitis?
5	How can postoperative ileus be reduced?
6	What is the optimal multimodal strategy for managing fistulating perianal Crohn's disease?
7	How does reporting and sharing of surgeon specific outcomes affect clinical practice?
8	What are the short and long-term outcomes of laparoscopic ventral mesh rectopexy (VMR), and is the mesh material important?
9	What are the predictive factors for poor outcome in patients with severe intra-abdominal sepsis? How can outcomes be improved?
10	When should a colorectal anastomosis be defunctioned? Are there predictive factors which would aid decision-making about need for diversion?