# **Timetable for the Delphi Games 2015**

# Tuesday 28 April 2015 10.00am - 4.30pm

Rooms TBC, Royal College of Surgeons (Eng)

#### **Delphi Questions**

What biomarkers (including genetic profiling) affect response to chemoradiotherapy for rectal cancer?

How can postoperative ileus be reduced?

What are the short and long-term outcomes after extralevator abdominoperineal excision of rectum (ELAPE)? Is there an oncological gain and is it justified?

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?

N.B. The latter two questions will be run as a single group on 28 April 2015.

## Wednesday 29 April 2015 10.00am - 4.30pm

Rooms TBC, Royal College of Surgeons (Eng)

#### **Delphi Questions**

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?

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?

What is the optimal timing of resection of liver and/or lung metastases from colorectal cancer – before, during or after primary surgery?

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?

## Wednesday 13 May 2015 10.00am – 4.30pm

Linder Lecture Theatre, Royal College of Surgeons (Eng)

#### **Delphi Questions**

What is the best method of i) preventing parastomal hernias ii) repairing parastomal hernias?

What are the indications for, and what is the optimal timing of, surgery for Crohn's disease in the era of biological therapy?

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?

How does reporting and sharing of surgeon specific outcomes affect clinical practice?

## Thursday 14 May 2015 10.00am - 4.30pm

Linder Lecture Theatre, Royal College of Surgeons (Eng)

#### **Delphi Questions**

What is the optimal multimodal strategy for managing fistulating perianal Crohn's disease?

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?

What are the predictive factors for poor outcome in patients with severe intra-abdominal sepsis? How can outcomes be improved?

## Tuesday 15 September 2015 10.00am - 4.30pm

Linder Lecture Theatre, Royal College of Surgeons (Eng)

## **Delphi Questions**

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?

What is the optimal surveillance strategy for patients who have undergone transanal local excision of rectal cancer?

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?

What are the short and long-term outcomes of laparoscopic ventral mesh rectopexy (VMR), and is the mesh material important?

# Wednesday 16 September 2015 10.00am - 4.30pm

Linder Lecture Theatre, Royal College of Surgeons (Eng)

# **Delphi Questions**

Why do some patients develop colorectal cancer metastases? Can early markers of metastatic disease be developed?

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?

Which colorectal adenomas indicate significantly increased risk of future colorectal cancer? What is the optimal screening strategy for these patients?