

## **Annual Report 2018**

## of the Certified Skin Cancer Centres

Audit year 2017 / Indicator year 2016



# DKG GERMAN CANCER SOCIETY Certification

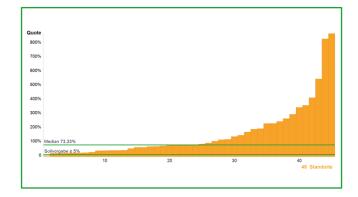
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### **General information**

	Kennzahlendefinition	Alle Standorte 2016	
		Median	Range
Zähler	Pat. mit malignem Melanom, die in eine Studie mit Ethikvotum eingebracht wurden	19*	0 - 264
Nenner	Primärfälle mit malignem Melanom Stad. III - IV	21*	5 - 370
Quote	Sollvorgabe ≥ 5%	73,33%	0,00% - 862,50%



### **Basic data indicator:**

The definitions of **numerator**, **population** (=denominator) and **target value** are taken from the Data Sheet.

The **medians** for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

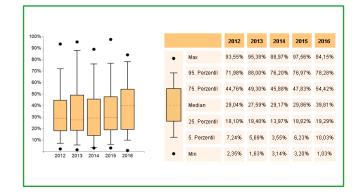
The values for the numerators, populations and rates of all Centres are given under range.

### **Diagram:**

The x-axis indicates the number of Centres, the y-axis gives the values in percent or number (e.g. primary cases). The target value is depicted as a horizontal green line. The median, which is also depicted as a green horizontal line, divides the entire group into two equal halves.

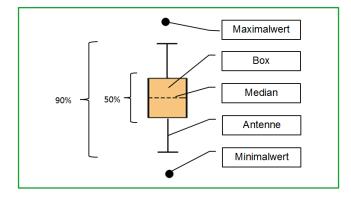


### **General information**



### **Cohort development:**

Cohort development in the years 2012, 2013, 2014, 2015 and 2016 is presented in a box plot diagram.



### **Box plot:**

A box plot consists of a **box with median**, **whiskers** and **outliers**. 50 percent of the Centres are within the box. The median divides the entire available cohort into two halves with an equal number of Centres. The whiskers and the box encompass a 90<sup>th</sup> percentile area/range. The extreme values are depicted here as dots.



## **Status of the certification system for Skin Cancer Centres 2017**

	31.12.2017	31.12.2016	31.12.2015	31.12.2014	31.12.2013	31.12.2012
Ongoing procedures	2	5	7	2	2	1
Certified Centres	61	55	47	43	41	39
Certified clinical sites	61	55	47	43	41	39



### Clinical sites taken into account

	31.12.2017	31.12.2016	31.12.2015	31.12.2014	31.12.2013	31.12.2012
Clinical sites included in the Annual Report	54	52	44	41	38	35
equivalent to	88.52%	94.5%	93.6%	95.3%	92.7%	89.7%
Primary cases total*	11,584	10,986	9,872	8,898	8,742	8,734
Primary cases per clinical site (mean)*	215	211.3	224.4	217.0	230.1	249.5
Primary cases per clinical site (median)*	179.5	183.5	190.5	189	196.5	197

<sup>\*</sup> The numbers refer to the malignant melanomas from the clinical sites included in the Annual Report.

This Annual Report looks at the Skin Cancer Centres certified in the Certification System of the German Cancer Society (DKG). The Data Sheet is the basis for the diagrams in the Annual Report.

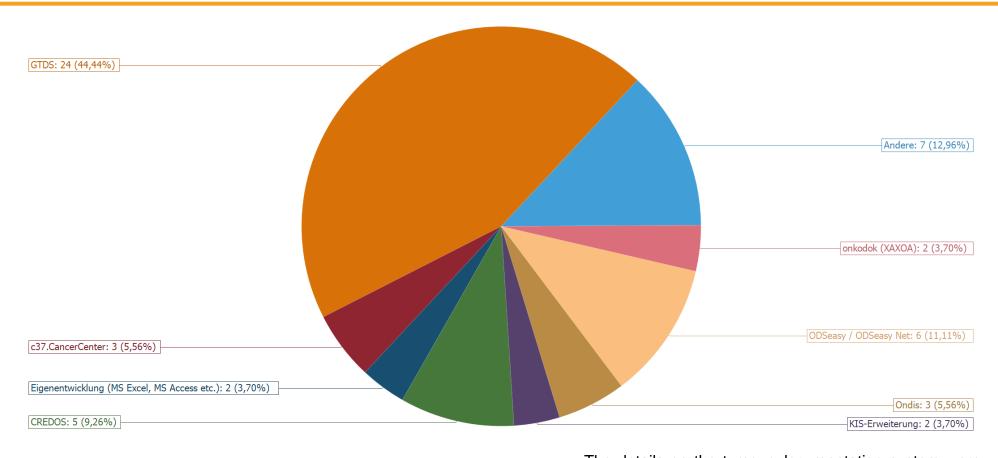
54 out of the 61 certified clinical sites of the Centres are included in the Annual Report. 5 clinical sites, certified for the first time in 2017, are not included (data depiction of a full calendar year is not mandatory for initial certification). Nor are 2 clinical sites for which no verified Data Sheet was available at the end of the year.

An up-to-date overview of all certified clinical sites can be accessed at www.oncomap.de.

The indicators published here refer to the indicator year 2016. They are the assessment basis for the audits conducted in 2017.



### **Tumour documentation systems in the Centre's clinical sites**



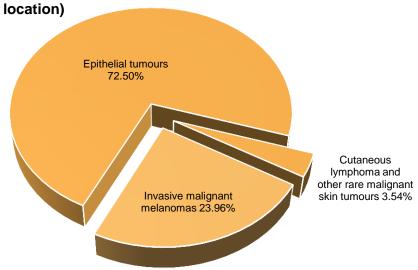
Legend:	
Other	Systems only used at one clinical site

The details on the tumour documentation system were taken from the Data Sheet (spreadsheet basic data). It is not possible to indicate several systems. In many cases support is provided by the cancer registers or there may be a direct connection to the cancer register via a specific tumour documentation system.



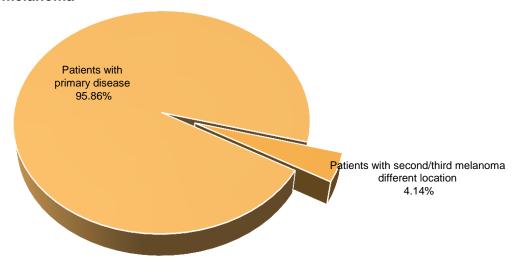
### **Basic data – Stage distribution primary cases**

Distribution primary case patients (primary disease + second/third melanomas at a different leastion)



Invasive malignant melanomas	11,584 (23.96%)
Epithelial tumours (excl. <i>in situ</i> )	35,051 (72.50%)
Cutaneous lymphomas and other rare malignant skin tumours (angiosarcoma, Merkel, DFSP, etc.)	1,711 (3.54%)
Total	48,346 (100%)

## Distribution primary case patients Invasive malignant melanoma

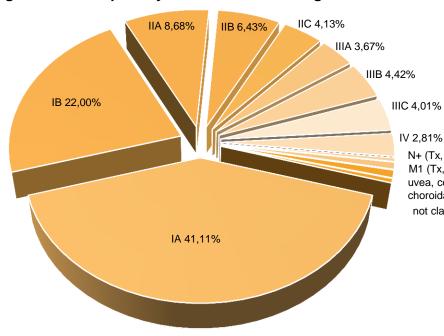


Patients with primary disease	11,104 (95.86%)
Patients with second/third melanoma different location	480 (4.14%)
Total	11,584 (100%)



### **Basic data – Stage distribution primary cases**

### Stage distribution primary cases - invasive malignant melanomas



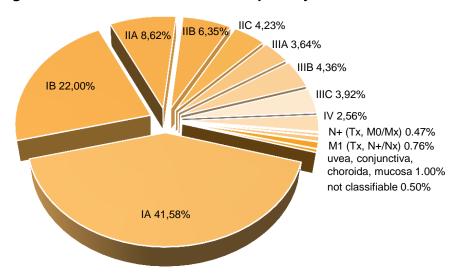
.,0.,0
2,81%
N+ (Tx, M0/Mx) 0.44%
M1 (Tx, N+/Nx) 0.85%
uvea, conjunctiva,
choroida, mucosa 0.92%
not classifiable 0.53%

	Audit Year	Audit Year	Audit Year
	2017	2016	2015
IA	4,762 (41.11%)	4,600 (41.87%)	4,280 (43.35%)
IB	2,548 (22.00%)	2,403 (21.87%)	2,109 (21.36%)
IIA	1,006 (8.68%)	939 (8.55%)	746 (7.56%)
IIB	745 (6.43%)	675 (6.14%)	535 (5.42%)
IIC	478 (4.13%)	471 (4.29%)	351 (3.56%)
IIIA	425 (3.67%)	429 (3.90%)	348 (3.53%)
IIIB	512 (4.42%)	462 (4.21%)	385 (3.90%)
IIIC	465 (4.01%)	311 (2.83%)	483 (4.89%)
IV	326 (2.81%)	275 (2.50%)	285 (2.89%)
N+ (Tx, M0/Mx)	51 (0.44%)	78 (0.71%)	105 (1.06%)
M1 (Tx, N+/Nx)	98 (0.85%)	130 (1.18%)	75 (0.76%)
uvea,conjunctiva, choroida, mucosa	107 (0.92%)	90 (0.82%)	89 (0.90%)
not classifiable	61 (0.53%)	123 (1.13%)	81 (0.82%)
Total	11,584 (100%)	10,986 (100%)	9,872 (100%)

## DKG GERMAN CANCER SOCIETY Certification

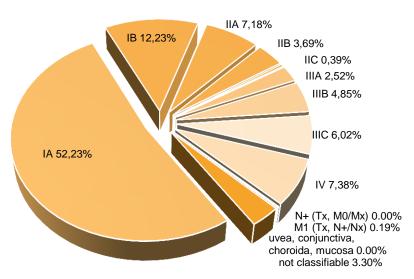
### **Basic data – Stage distribution primary cases**

### Stage distribution Number of cases of primary disease



	Audit Year 2017
IA	4,571 (41.58%)
IB	2,418 (22.00%)
IIA	948 (8.62%)
IIB	698 (6.35%)
IIC	465 (4.23%)
IIIA	400 (3.64%)
IIIB	479 (4.36%)
IIIC	431 (3.92%)
IV	281 (2.56%)
N+ (Tx, M0/Mx)	52 (0.47%)
M1 (Tx, N+/Nx)	84 (0.76%)
uvea, conjunctiva, choroida, mucosa	110 (1.00%)
not classifiable	55 (0.50%)
Total	10,992 (100%)

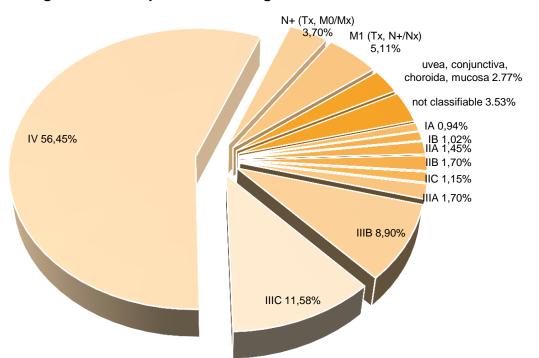
### Stage distribution Number of cases with second/third melanoma



	Audit Year 2017
IA	269 (52.23%)
IB	63 (12.23%)
IIA	37 (7.18%)
IIB	19 (3.69%)
IIC	2 (0.39%)
IIIA	13 (2.52%)
IIIB	25 (4.85%)
IIIC	31 (6.02%)
IV	38 (7.38%)
N+ (Tx, M0/Mx)	0 (0.00%)
M1 (Tx, N+/Nx)	1 (0.19%)
uvea, conjunctiva, choroida, mucosa	0 (0.00%)
not classifiable	17 (3.30%)
Total	515 (100%)

## Basic data – Stage distribution primary cases

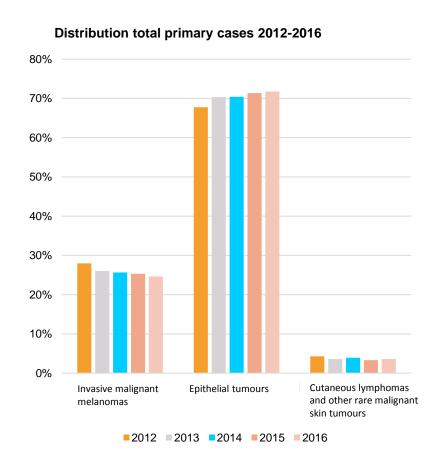
### Stage distribution patients with stage shift/recurrence



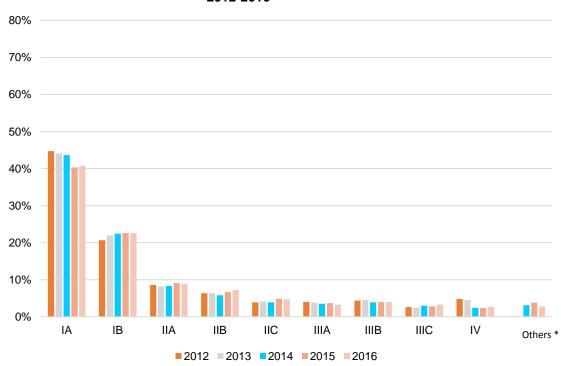
	Audit Year 2017
IA	22 (0.94%)
IB	24 (1.02%)
IIA	34 (1.45%)
IIB	40 (1.70%)
IIC	27 (1.15%)
IIIA	40 (1.70%)
IIIB	209 (8.90%)
IIIC	272 (11.58%)
IV	1,326 (56.45%)
N+ (Tx, M0/Mx)	87 (3.70%)
M1 (Tx, N+/Nx)	120 (5.11%)
uvea, conjunctiva, choroida, mucosa	65 (2.77%)
not classifiable	83 (3.53%)
Total	2,349 (100%)



## Basic data – Primary cases between the indicator years 2012-2016



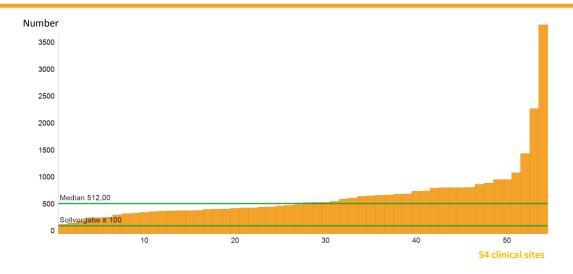
## Stage distribution Primary cases Invasive malignant melanomas 2012-2016



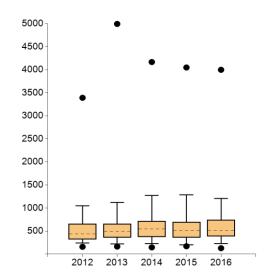
<sup>\*</sup> Other N+ (Tx, M0/Mx) / M1 (Tx, N+/Nx) / uvea, conjunctiva, choroida, mucosa / not classifiable



### 1.1 Epithelial tumours (excl. in situ, incl. inter alia basal cell carcinomas, squamous cell carcinomas)



	Indicator definition	All clinical sites 2016	
		Median	Range
Number	Primary cases (Def. see 1.1.3)	512	129 - 3998
	Target value ≥ 100		





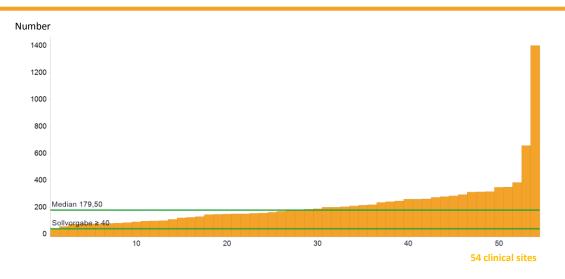
Clinical sites with evaluable data		Clinical sites the target val	_
Number	%	Number	%
54	100.00%	54	100.00%

### Notes:

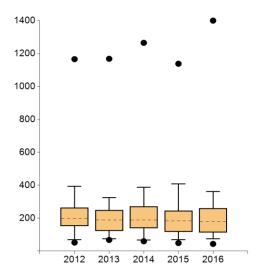
All Centres reached the target value for the number of primary cases with an epithelial tumour. The median was higher than the previous year. The majority of the Centres were able to increase their case number compared with the previous year. The Centres, included in the annual reports for 2018 and 2017, were able to increase the number of primary cases from 32,126 (indicator year 2015) to 33,829 (indicator year 2016).



### 1.2 Invasive malignant melanomas (incl. malignant uveal, conjunctival, choroidal and mucosal melanomas)



	Indicator definition	All clinical sites 2016	
		Median	Range
Number	Primary cases (Def. see 1.1.3)	179.5	44 - 1400
	Target value ≥ 40		





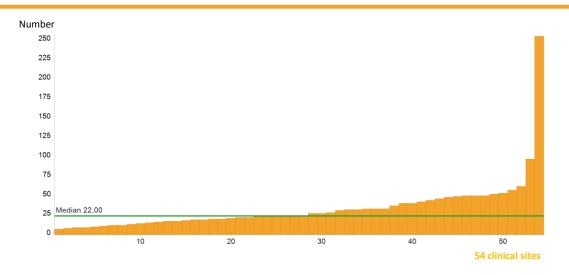
Clinical sites with evaluable data		Clinical sites the target val	_
Number	%	Number	%
54	100.00%	54	100.00%

### Notes:

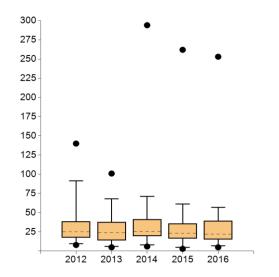
All Centres likewise reached the target value for the number of primary cases with an invasive malignant melanoma. The median has fallen across the previous three years. Nonetheless, most of the Centres were able to increase the number of primary cases compared with 2015 (30 Centres with increasing, 21 with falling case numbers). The total number of cases of the Centres, included in the annual reports for 2018 and 2017, likewise increased (from 10,810 to 11,259).



### 1.3 Cases with cutaneous lymphoma and rare, malignant skin tumours



	Indicator definition	All clinical sites 2016	
		Median	Range
Number	Primary cases (Def. see 1.1.3)	22	5 - 253
	No target value		



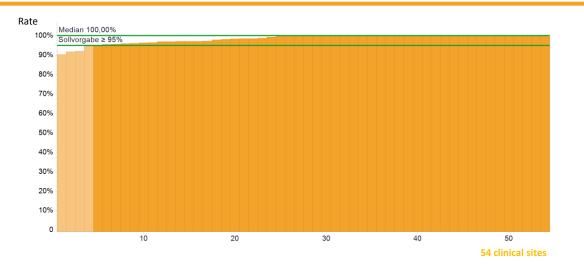


Clinical sites evaluable data		Clinical sites the target val	_
Number	%	Number	%
54	100.00%		

### Notes:

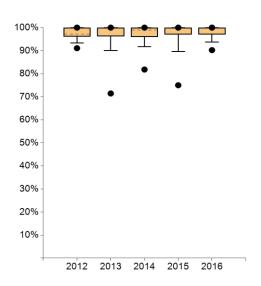
The median of primary cases with rare skin tumours was more or less the same as the previous year. The Centres, included in the annual reports for 2018 and 2017, were able to increase the total number of their primary cases from 1,568 to 1,656.

### 2. Discussion of cases with new remote metastases



	Indicator definition	All clinical sites 2016	
		Median	Range
Numerator	Cases with new remote metastases (no locoregional metastases) which were presented in the tumour conference	27*	3 - 244
Denominator	Cases with new remote metastases (no locoregional metastases)	27*	3 - 248
Rate	Target value ≥ 95%	100%	90.24% - 100%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.



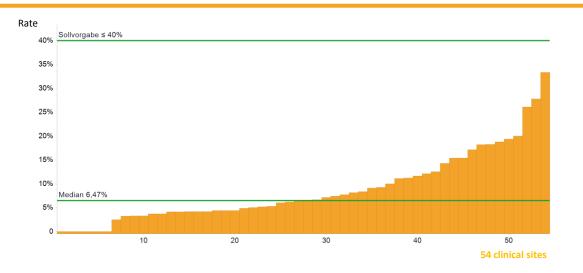


Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
54	100.00%	50	92.59%

#### Notes:

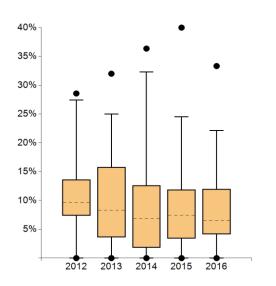
The indicator was implemented well. The median of the indicator remained the same as the previous year. The minimum value and the 5<sup>th</sup> percentile increased compared with the indicator year 2015. Most of the Centres were able to maintain or increase their rate (n=35). In 16 Centres the rate fell compared with the previous year. Four Centres failed to meet the target value. The reasons they gave for failing to meet the target value were that patients were in a palliative treatment situation or they died before presentation in the tumour conference.

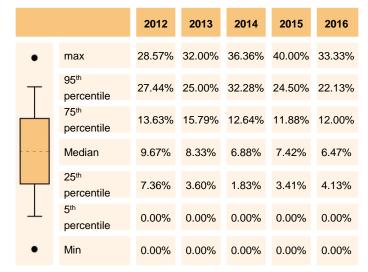
### 3. Therapy deviation from recommendation tumour conference



	Indicator definition		sites 2016
		Median	Range
Numerator	Cases with new remote metastases (no locoregional metastases) which were presented in the tumour conference and involved a therapy deviation	2*	0 - 27
Denominator	Cases with new remote metastases (no locoregional metastases) which were presented in the tumour conference (= numerator Indicator 2)	27*	3 - 244
Rate	Target value ≤ 40%	6.47%	0.00% - 33.33%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.



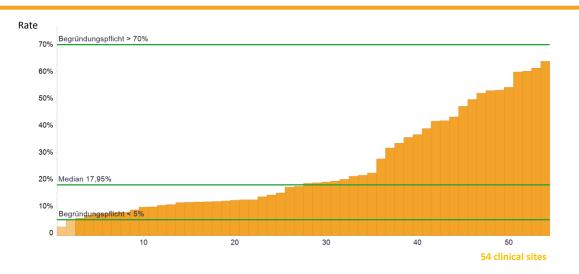


Clinical sites with evaluable data		Clinical sites the target val	_
Number	%	Number	%
54	100.00%	54	100.00%

#### Notes:

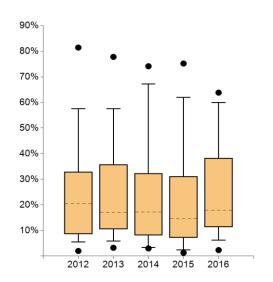
As in previous years all Centres met the target value. The median of the rate of therapy deviations from the recommendation by the tumour conference fell compared with the previous year. The reasons given by the Centres for the cases with a therapy deviation were that the patients wanted a deviating therapy or died before therapy began. The three Centres with the highest rate were not the same ones as in 2015.

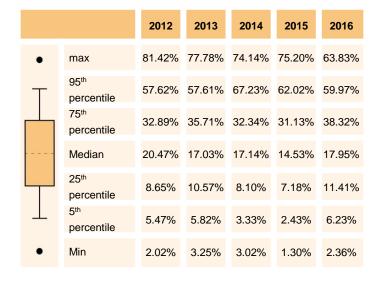
### 4. Psycho-oncological care



	Indicator definition All clinical sites 20		sites 2016
		Median	Range
Numerator	Primary cases ( = Indicator 1.2) + cases with new remote metastases (no locoregional metastases) that received social services counselling in an inpatient or outpatient setting	37.5*	8 - 251
Denominator	Primary cases ( = Indicator 1.2) + cases with new remote metastases (no locoregional metastases) ( = denominator Indicator 2).	206*	47 - 1464
Rate	Mandatory statement of reasons** < 5% and >70%	17.95%	2.36% - 63.83%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.





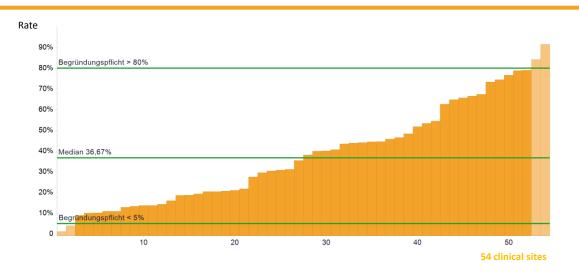
Clinical sites with evaluable data		Clinical sites plausibility li	
Number	%	Number	%
54	100.00%	52	96.30%

#### Notes:

The median of the rate of psycho-oncological counselling again increased compared with 2015. The majority of Centres increased their counselling rate (29 versus 22). Two Centres, i.e. less than the previous year (2015: 7), had a rate requiring a statement of reasons < 5%. The low rates were discussed during the audits in these Centres and for the next audit the focus will be on the indicator and psycho-oncological care.

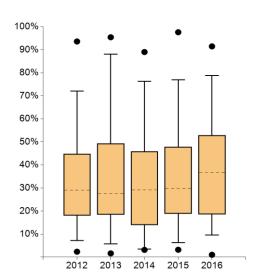
<sup>\*\*</sup> For values outside the plausibility limit(s) the Centres must give the reasons.

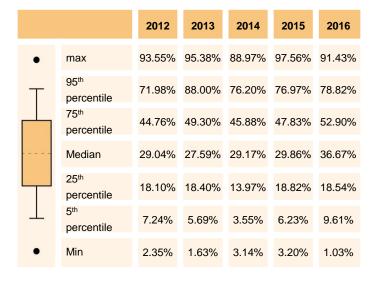
### 5. Counselling social services



	Indicator definition	All clinical sites 2016		cator definition All clinical sites 2016	sites 2016
		Median	Range		
Numerator	Primary cases ( = Indicator 1.2) + cases with new remote metastases (no locoregional metastases) which received social services counselling in an inpatient or outpatient setting	62*	2 - 348		
Denominator	Primary cases ( = Indicator 1.2) + cases with new remote metastases (no locoregional metastases) ( = denominator Indicator 2).	206*	47 - 1464		
Rate	Mandatory statement of reasons** < 5% and >80%	36.67%	1.03% - 91.43%		

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.





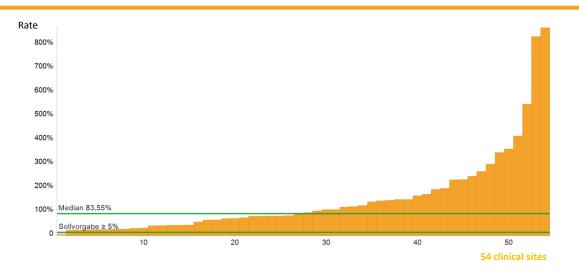
Clinical sites with evaluable data		Clinical sites plausibility lin	
Number	%	Number	%
54	100.00%	50	92.59%

#### Notes:

The median of the indicator for social services counselling increased compared with the previous year. The majority of Centres recorded an increase in the counselling rates. Two Centres were obliged to give reasons because of the low rates. One of the Centres was located in a German-speaking country outside Germany. There the social services are organised differently (outpatient counselling centres). The German Centre with the low rate stated that it also cooperated with an outpatient partner for social services.

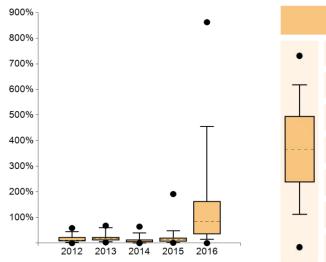
<sup>\*\*</sup> For values outside the plausibility limit(s) the Centres must give the reasons.

### 6. Malignant melanoma: Study participation



	Indicator definition		All clinical sites 2016	
		Median	Range	
Numerator	Patients with a malignant melanoma who were included in a study with an ethical vote	19*	0 - 264	
Denominator	Primary cases with a malignant melanoma stage III - IV	21*	5 - 370	
Rate	Target value ≥ 5%	83.55%	0.00% - 862.50%	

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.



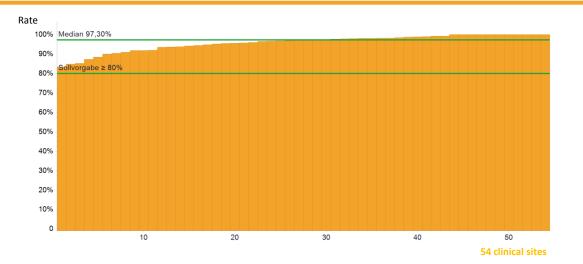


Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
54	100.00%	53	98.15%

#### Notes:

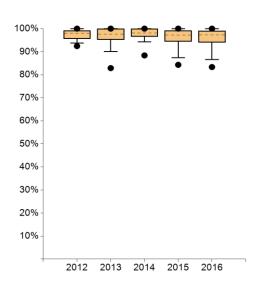
This indicator is the only indicator for which the numerator is not a subset of the denominator. This means that all Centre cases could be taken into account for the indicator and the denominator is used to classify the Centre size. Centres with very high study rates had included most of their patients in a registry study. These Centres led to a major increase in the median compared with the previous year.

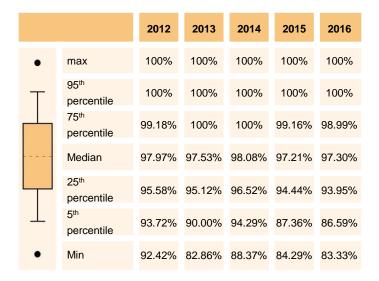
## 7. Sentinel node biopsy (SNB)



	Indicator definition	All clinical sites	
		Median	Range
Numerator	Patients with sentinel lymph node confirmed intra- operatively	71.5*	23 - 336
Denominator	Patients who have had surgery with SNB	75*	25 - 379
Rate	Target value ≥ 80%	97.30%	83.33% - 100%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.





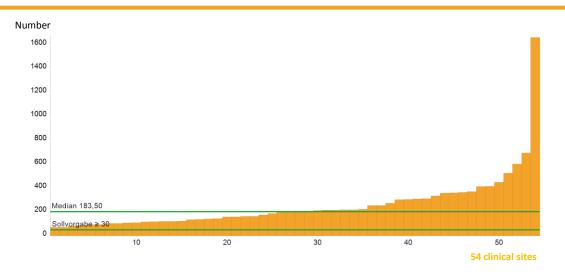
Clinical sites evaluable data		Clinical sites the target val	_
Number	%	Number	%
54	100.00%	54	100.00%

### Notes:

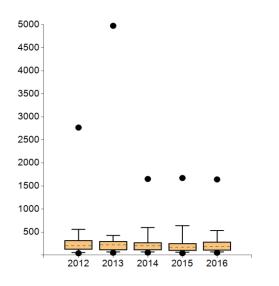
The indicator was implemented well by the Centres. As in previous years all Centres met the target value. The median, too, was unchanged over the course of time.



### 8. Surgical interventions with safety margin defined in the Guideline



	Indicator definition	All clinical sites 2016	
		Median	Range
Number	Surgical interventions with safety margin (no interventions with microscopically monitored surgery) ( = malignant melanomas, Merkel cell carcinomas, sarcomas), etc.	183.5	52 - 1642
	Target value ≥ 30		





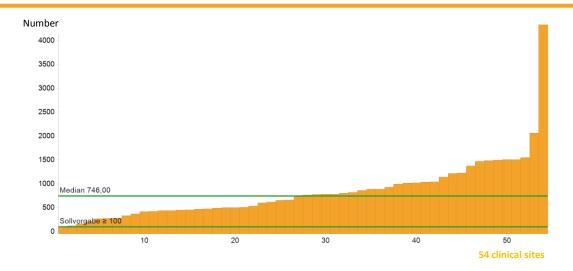
Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
54	100.00%	54	100.00%

### Notes:

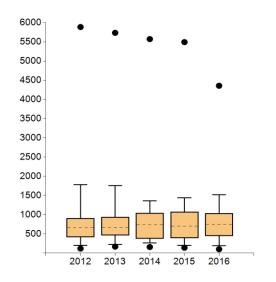
Compared with the previous year the median of the number of surgical interventions with a safety margin in accordance with the Guideline again increased. As in 2015 all Centres met the target value.



### 9. Surgical interventions with histological margin control



	Indicator definition	All clinical sites 2016	
		Median	Range
Number	Surgical interventions with histological margin control (no partial biopsies, no interventions with safety margin) (= epithelial tumours)	746	102 - 4356
	Target value ≥ 100		



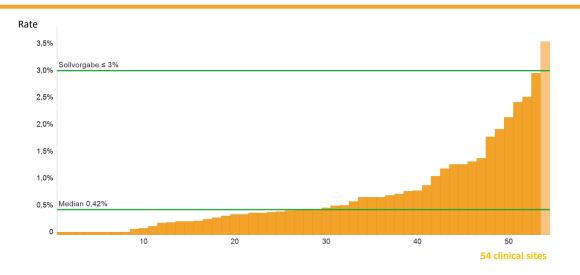


Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
54	100.00%	54	100.00%

### Notes:

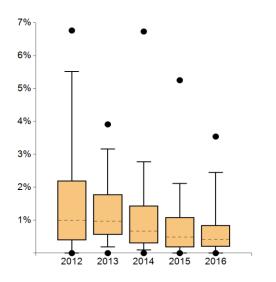
The median of the number of surgical interventions with histological margin control in the case of epithelial tumours again increased compared with the previous year. The Centres, whose data were also included in the annual report 2017, were able to increase their total number of surgical interventions from 42,493 to 43,719. All centres met the target value.

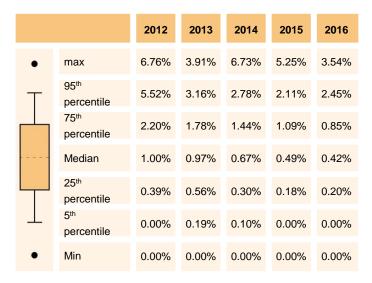
### 10. Revision surgery after secondary bleeding



	Indicator definition	All clinical	sites 2016
		Median	Range
Numerator	Revision surgery (5-983) because of intra- or post- operative secondary bleeding (ICD-code: T81.0) for the sum numerators indicators 8 + 9	3.5*	0 - 91
Denominator	Sum numerators Indicators 8 + 9	922.5*	154 - 5998
Rate	Target value ≤ 3%	0.42%	0.00% - 3.54%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.





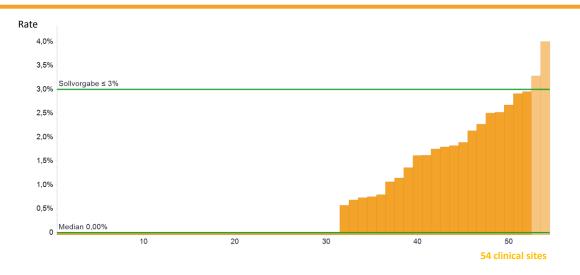
Clinical sites evaluable data		Clinical sites the target val	_
Number	%	Number	%
54	100.00%	53	98.15%

### Notes:

Overall, the indicator was very well implemented in the Centres. A continuous improvement in the indicator coupled with a falling median could be observed over the years. One Centre failed to meet the target value in 2016. The reasons given by the Centre included restructuring of the surgical team. In the next audit the focus will be on examination of the indicator.

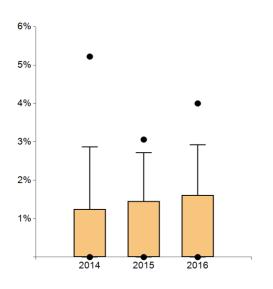


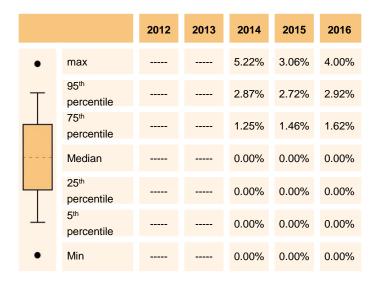
### 11. Revision surgery in the case of secondary bleeding after SNB and LND



	Indicator definition	All clinical sites 2016		All clinical	sites 2016
		Median	Range		
Numerator	Revision surgeries because of post-operative secondary bleeding (ICD-Code: T81.0) after SNB and therapeutic LND at stages IIIA, IIIB and IIIC	0*	0 - 15		
Denominator	Patients who have undergone surgery with SNB ( = denominator indicator 7) + patients with therapeutic LND for stages IIIA, IIIB and IIIC	79*	25 - 509		
Rate	Target value ≤ 3%	0.00%	0.00% - 4.00%		

\*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.



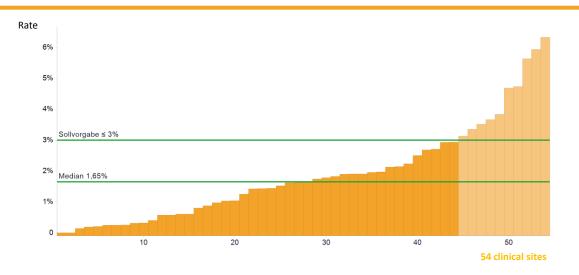


Clinical sites with evaluable data		Clinical sites meeting	
		the target val	ue
Number	%	Number	%
54 100.00%		52	96.30%

#### Notes:

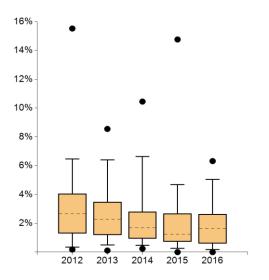
The median of the indicator was unchanged at 0%. The 75<sup>th</sup> and 95<sup>th</sup> percentiles and the maximum value increased compared with the previous year. Two Centres failed to meet the target value. During the audits the experts were able to rule out any systematic errors. Improvement measures were agreed with regard to patient selection (greater consideration of comorbidities and comedication) and post-operative care (wound dressing).

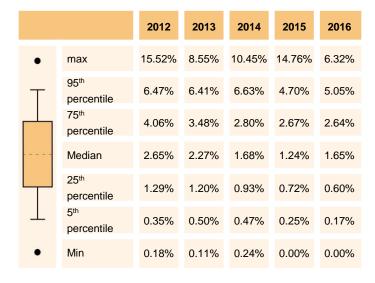
## 12. Post-surgical wound infections



	Indicator definition	All clinical sites 2016	
		Median	Range
Numerator	Post-operative wound infections (ICD-Code: T81.4) for the sum numerators Indicators 8 + 9	12*	0 - 107
Denominator	Sum numerators Indicators 8 + 9	922.5*	154 - 5998
Rate	Target value ≤ 3%	1.65%	0.00% - 6.32%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.



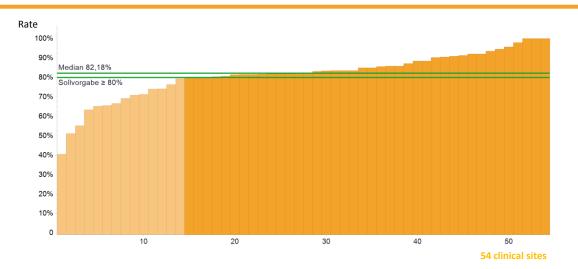


Clinical sites with evaluable data		Clinical sites meeting the target value	
Number	%	Number	%
54	100.00%	44	81.48%

#### Notes:

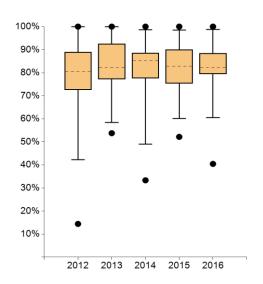
The median of the post-operative infection rate increased compared with the previous year. The 75<sup>th</sup> and 25<sup>th</sup> percentiles fell slightly. The share of Centres that met the target value was more or less the same as in 2015 (82.69%). The main reason given by the Centres that failed to meet the target value was that they use a broad definition of wound infections (e.g. also erythema). The following improvement measures *inter alia* were agreed: training courses, modified disinfection management, etc.

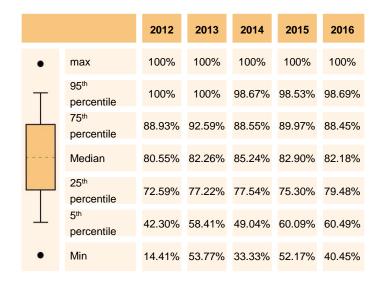
### 13. Malignant melanoma: Sentinel node biopsy (Guideline QI)



	Indicator definition	All clinical sites 2016	
		Median	Range
Numerator	Primary cases where SNB is carried out	55.5*	9 - 289
Denominator	Primary cases with a primary cutaneous melanoma with a tumour density ≥ 1mm and no sign of locoregional or remote metastasis	69*	11 - 289
Rate	Target value ≥ 80%	82.18%	40.45% - 100%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.





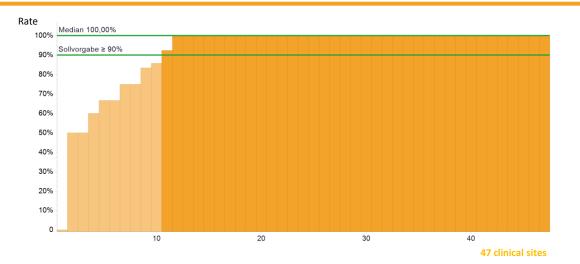
Clinical sites with evaluable data		Clinical sites	meeting
		the target value	
Number	%	Number	%
54 100.00%		40	74.07%

#### Notes:

The median of the quality indicator from the Guideline was unchanged compared with the previous year. Most Centres were able to increase their rate compared with 2015 (28 versus 23 with a drop in the SNB rate). Nine out of the 15 Centres that failed to meet the target value in 2015, were able to improve their rate. The reasons given by the 14 Centres that failed to meet the target were *inter alia*: rejection by patients, advanced age, comorbidity, localisation (headneck area). The auditors made remarks and were able to rule out systematic errors.

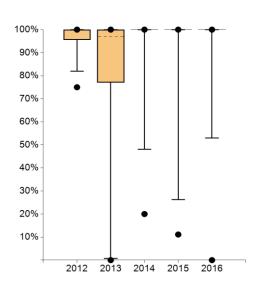


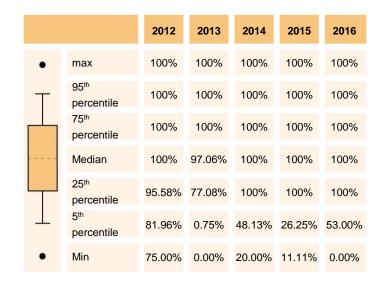
### 14. Malignant melanoma: Post-operative radiotherapy (Guideline QI)



	Indicator definition	All clinical sites 2016	
		Median	Range
Numerator	Primary cases with radiotherapy with an intended total dose 50-60 Gy with conventional fractionation (5x1,8-2.5 Gy/week)	3*	0 - 16
Denominator	Primary cases with malignant melanoma and post- operative radiotherapy of the lymph drainage area	3*	1 - 16
Rate	Target value ≥ 90%	100%	0.00% - 100%

<sup>\*</sup>The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.





Clinical sites with evaluable data		Clinical sites meeting	
		the target value	ue
Number	%	Number	%
47 87.04%		37	78.72%

#### Notes:

The implementation of the quality indicator from the Guideline was unchanged compared with the previous year. Seven Centres did not carry out any post-operative radiotherapy and were not, therefore, included in the assessment. The reasons given for their low rate by the 10 Centres that failed to meet the target value was individual deviating radiotherapy doses (e.g. in the case of progress). Given the low denominator numbers for this indicator, the individual cases had more weight.

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