

Annual Report 2019

of the Certified Prostate Cancer Centres

Audit year 2018 / Indicator year 2017

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General information

Indicator No. 14: Diagnostic report – Punch biopsy (Q1)

Indicator No. 15: Diagnostic report – Lymph nodes (Q2)

Indicator No. 16: Percutaneous RT with hormone ablation therapy for locally progressed PCa (Q6)

Indicator No. 17: Percutaneous RT with hormone ablation therapy for PCa with lymph node metastases (Q7)

Indicator No. 18: Salvage-radiotherapy (SRT) for recurrent prostate cancer (Q8)

Indicator No. 20: Postoperative complications after radical prostatectomy (RPE) (Q10)

Indicator No. 21: Complications after radiotherapy (Q11)

Quality indicators of the guidelines (LL QI):

In the table of contents and in the respective headings the indicators, which correspond to the quality indicators of the evidence-based guidelines are specifically identified. The quality indicators identified in this way are based on the strong recommendations of the guidelines and were derived from the guidelines groups of the guidelines programme oncology. Further information: www.leitlinienprogramm-onkologie.de

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	All patients presented in the pre-therapeutic conference	121*	26 – 2,255	20,963
Denominator	All patients who presented themselves to the health care providers I (urology/ radiotherapy) (e.g. via referral) and have been diagnosed as primary cases in line with EB 1.2.1 (without primary M1)	125*	44 – 2,413	21,679
Rate	Target value $\geq 95\%$	99,00%	43.33% - 100%	96.70**

Basic data indicator:

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

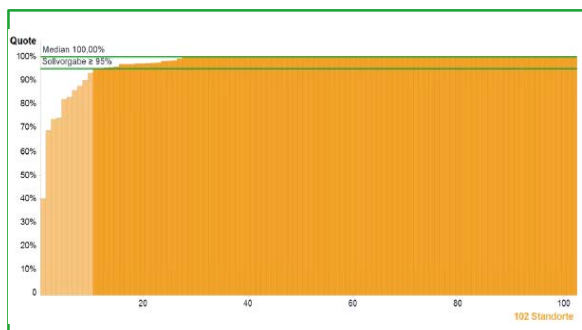
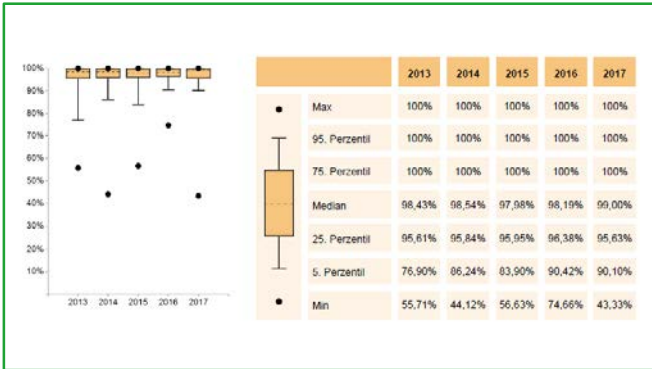


Diagram:

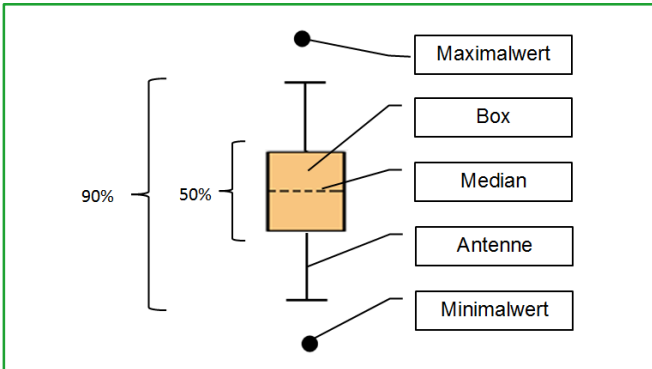
The x-axis indicates the number of Centres, the y-axis gives the values in percent or number (e.g. primary cases). The target value is depicted as a horizontal green line. The median, which is also depicted as a green horizontal line, divides the entire group into two equal halves.

General information



Cohort development:

The cohort development in the years 2013, 2014, 2015, 2016 and 2017 is presented in a box plot diagram.



Boxplot:

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 90th percentile area/range. The extreme values are depicted here as dots.

Status of the certification system: Prostate Cancer Centres 2018

	31.12.2018	31.12.2017	31.12.2016	31.12.2015	31.12.2014	31.12.2013
Ongoing procedures	3	9	7	5	5	4
Certified centres	122	112	103	97	94	94
Certified clinical sites	123	113	104	98	95	95

General information

	31.12.2018	31.12.2017	31.12.2016	31.12.2015	31.12.2014	31.12.2013
Clinical sites included in the Annual Report	115	106	95	94	91	88
Equivalent to	93.5%	93.8%	91.3%	95.9%	95.8%	92.6%
Primary cases total*	27,160	23,677	20,643	18,684	18,288	19,558
Primary cases per centre (mean)*	236	223	217	199	201	222
Primary cases per centre (median)*	165	165	159	139	149	159

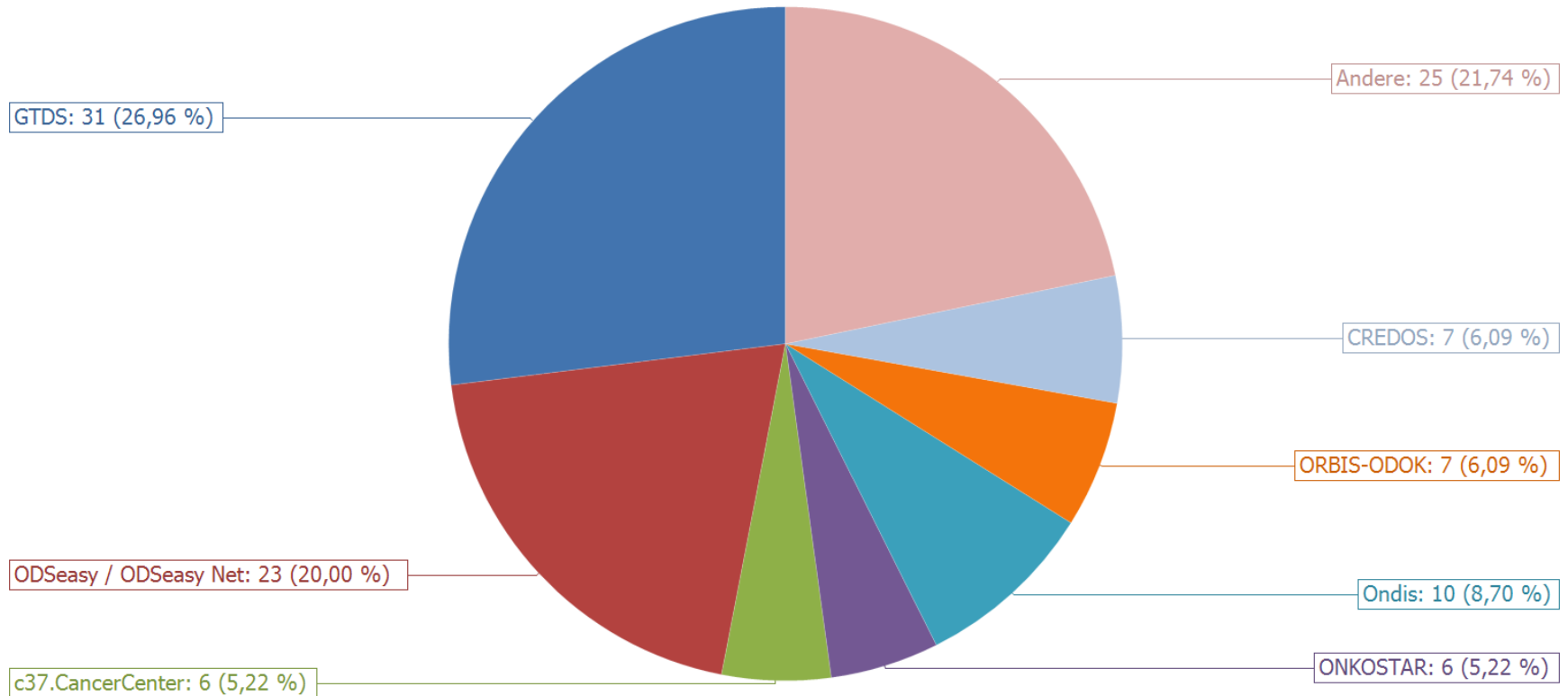
*The figures are based on the clinical sites listed in the Annual Report.

This Annual Report looks at the Prostate Cancer Centres certified in the Certification System of the German Cancer Society. The Indicator sheet which is part of the Catalogue of Requirements (Catalogue of Requirements Certification) is the basis for the diagrams.

The Annual Report covers 115 of 123 certified sites. 5 sites were not included. 5 sites were certified for the first time in 2018 (data depiction of a full calendar year is not mandatory for initial certification) and 3 clinical sites did not complete its verification of data in time due to clinic internal reasons (change of tumour documentation system). In all 123 sites a total amount of 28,242 primary cases of PCa have been treated. www.oncomap.de provides an updated overview of all certified centres.

The indicators published here refer to the indicator year 2017. They are the basis for the audits conducted in 2018.

Tumour documentation systems used in Prostate Cancer Centres

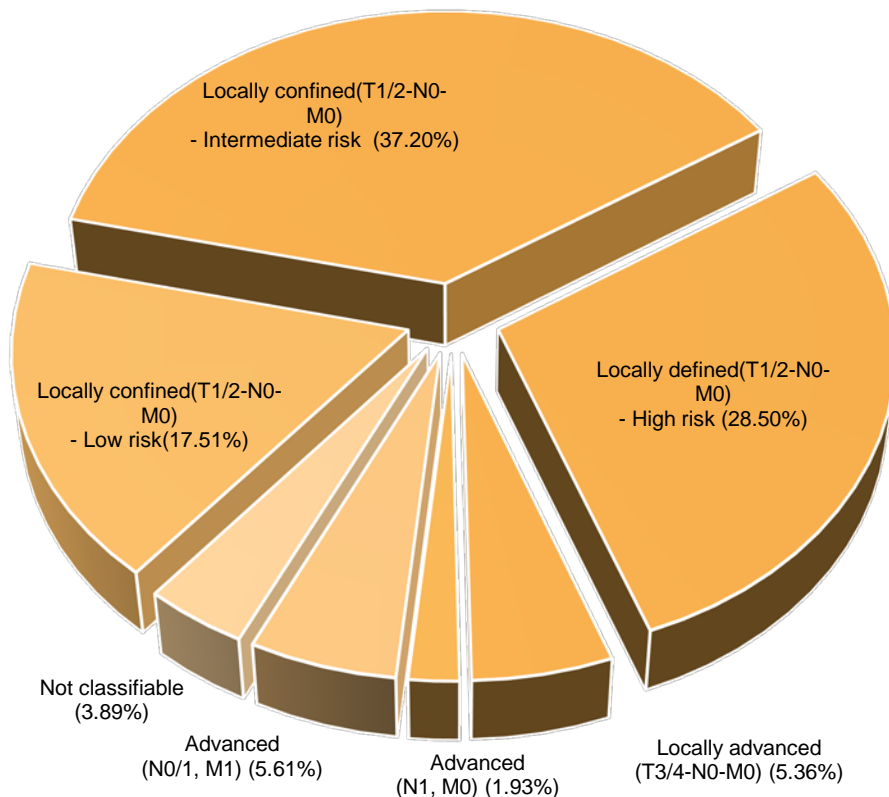


The details on the tumour documentation system were taken from the EXCEL annex to the Data Sheet (spreadsheet basic data). It is not possible to depict several systems. In many cases support is provided by the cancer registries or there may be a direct connection to the cancer registry via a specific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

Legende:	
Andere („others“)	System used in ≤ 3 clinical sites

Basic data – Primary cases PCa

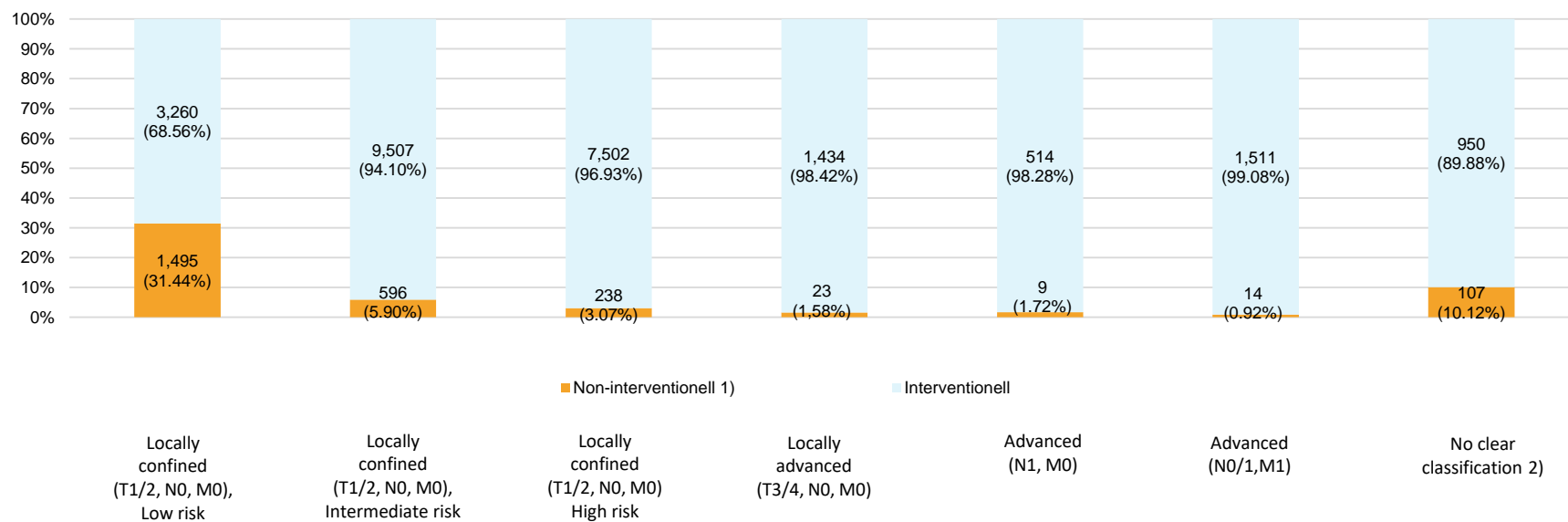
Total primary cases



	Total primary cases
Locally confined (T1/2, N0, M0), Low risk	4,755 (17,51%)
Locally confined (T1/2, N0, M0), Intermediate risk	10,103 (37,20%)
Locally confined (T1/2, N0, M0), High risk	7,740 (28,50%)
Locally advanced (T3/4, N0, M0)	1,457 (5,36%)
Advanced (N1, M0)	523 (1,93%)
Advanced (N0/1, M1)	1,525 (5,61%)
No clear classification	1,057 (3,89%)
Total primary cases	27,160

Basic data

Non-interventional / interventional primary cases



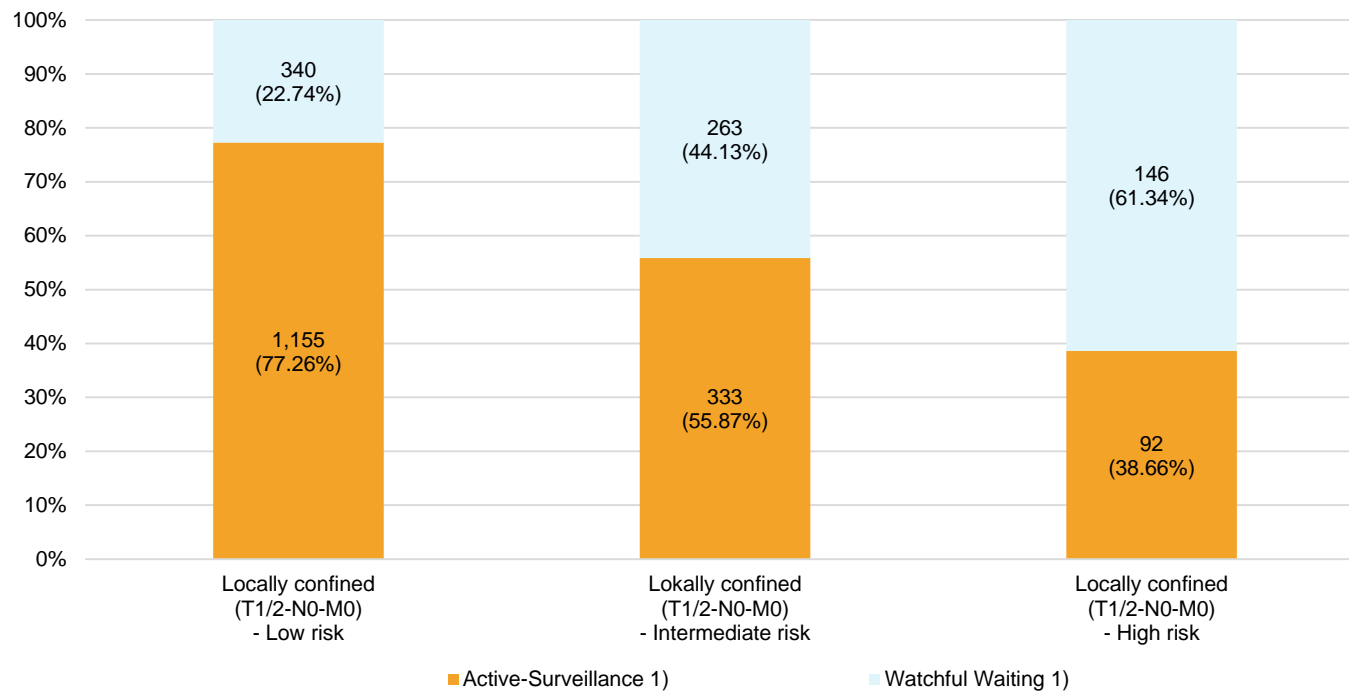
	Non interventional ¹⁾	Interventional	Total
Locally confined (T1/2, NO, M0), Low risk	1,495 (31.44%)	3,260 (68.56%)	4,755 (100%)
Locally confined (T1/2, NO, M0), Intermediate risk	596 (5.90%)	9,507 (94.10%)	10,103 (100%)
Locally confined (T1/2, NO, M0), High risk	238 (3.07%)	7,502 (96.93%)	7,740 (100%)
Locally advanced (T3/4, NO, M0)	23 (1.58%)	1,434 (98.42%)	1,457 (100%)
Advanced (N1, M0)	9 (1.72%)	514 (98.28%)	523 (100%)
Advanced (N0/1, M1)	14 (0.92%)	1,511 (99.08%)	1,525 (100%)
No clear classification ²⁾	107 (10.12%)	950 (89.88%)	1,057 (100%)
Total primary cases	2,482	24,678	27,160

1) Non-interventional: active surveillance or watchful waiting, precondition: histologically confirmed Pca

2) No clear classification: Nx, Mx, coincidental diagnosis after radical cysto-proctectomy

Basic data

Non-interventional primary cases (locally confined) – Distribution of therapies

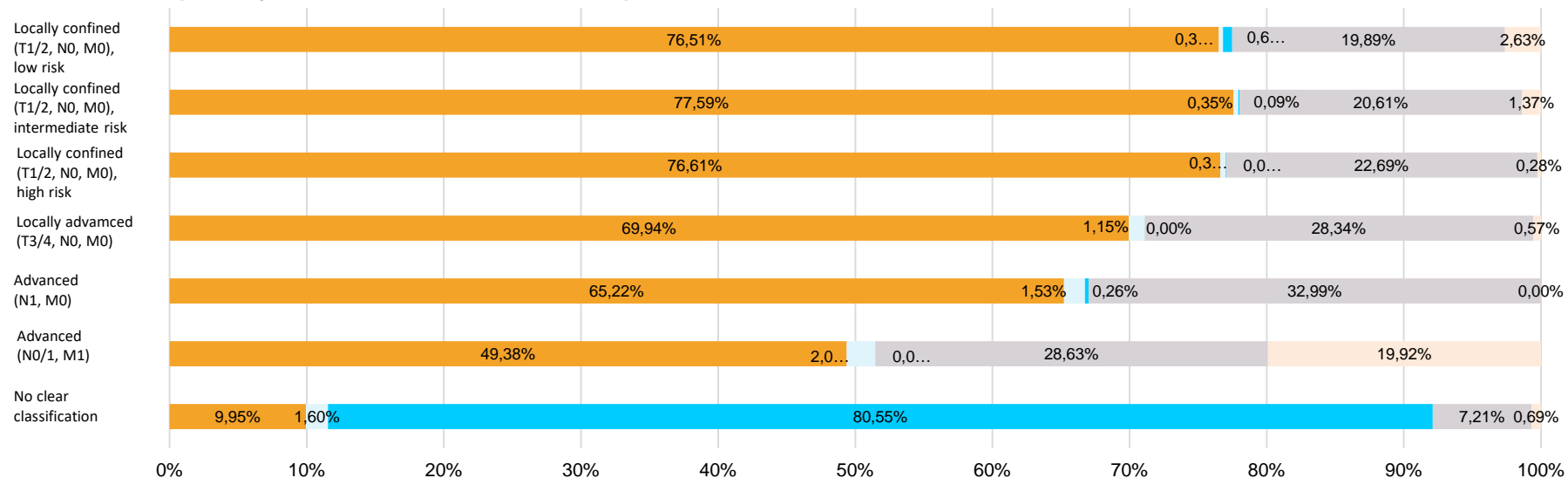


	Non-interventional ¹⁾		Total
	Active-Surveillance ¹⁾	Watchful Waiting ¹⁾	
Locally confined (T1/2, N0, M0), Low risk	1,155 (77.26%)	340 (22.74%)	1,495
Locally confined (T1/2, N0, M0), Intermediate risk	333 (55.87%)	263 (44.13%)	596
Locally confined (T1/2, N0, M0), High risk	92 (38.66%)	146 (61.34%)	238
Total primary cases (locally confined)	1,580	749	2,329

1) Non-interventional: active surveillance or watchful waiting. precondition: histologically confirmed PCa

Basic data

Interventional primary cases – Distribution of therapies



	Interventional – local prostate treatment							Total
	RPE ³⁾	RCE ⁴⁾ due to PCa	Incidental finding after RCE ⁴⁾	Definitive percutaneous radiotherapy	LDR-Brachytherapy	HDR-Brachytherapy	Other local therapy ¹⁾	
Locally confined (T1/2, N0, M0), Low risk	2.446 (76,51%)	10 (0,31%)	21 (0,66%)	447 (13,98%)	172 (5,38%)	17 (0,53%)	84 (2,63%)	3.197 (100%)
Locally confined (T1/2, N0, M0), Intermediate risk	7.187 (77,59%)	32 (0,35%)	8 (0,09%)	1.756 (18,96%)	80 (0,86%)	73 (0,79%)	127 (1,37%)	9.263 (100%)
Locally confined (T1/2, N0, M0), High risk	5.271 (76,61%)	27 (0,39%)	2 (0,03%)	1.479 (21,50%)	7 (0,10%)	75 (1,09%)	19 (0,28%)	6.880 (100%)
Locally advanced (T3/4, N0, M0)	854 (69,94%)	14 (1,15%)	0 (0,00%)	336 (27,52%)	1 (0,08%)	9 (0,74%)	7 (0,57%)	1.221 (100%)
Advanced (N1, M0)	255 (65,22%)	6 (1,53%)	1 (0,26%)	127 (32,48%)	0 (0,00%)	2 (0,51%)	0 (0,00%)	391 (100%)
Advanced (N0/1, M1)	119 (49,38%)	5 (2,07%)	0 (0,00%)	68 (28,22%)	0 (0,00%)	1 (0,41%)	48 (19,92%)	241 (100%)
No clear classification ²⁾	87 (9,95%)	14 (1,60%)	704 (80,55%)	50 (5,72%)	7 (0,80%)	6 (0,69%)	6 (0,69%)	874 (100%)
Total primary cases	16.219	108	736	4.263	267	183	291	22.067

1) Other local treatment: i.e. HIFU,...

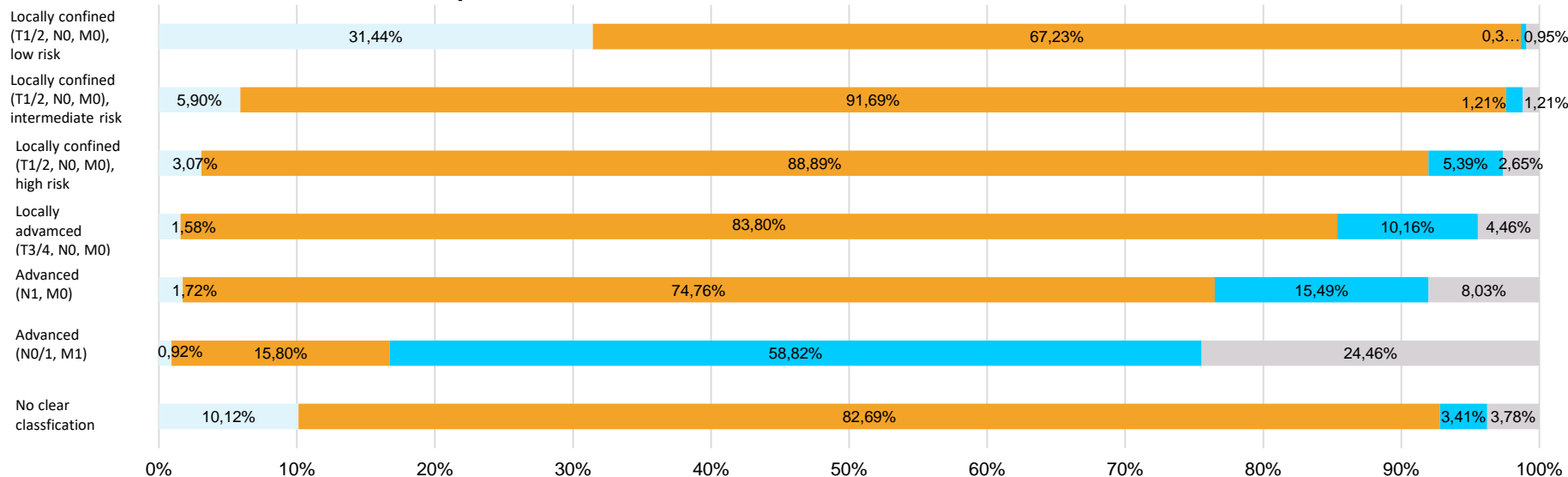
2) No clear classification: Nx, Mx, coincidental diagnosis after radical cysto-proctectomy

3) Radical prostatectomy

4) Radical cystoprostatectomy

Basic data

Primary cases – Distribution of therapies



	Non-interventional	Interventional – local therapy of prostate ¹⁾	Interventional – exclusive systemic therapies	Interventional – other non-local therapies ²⁾	Total
Locally confined (T1/2, N0, M0) Low risk	1,495 (31.44%)	3,197 (67.23%)	18 (0.38%)	45 (0.95%)	4,755 (100%)
Locally confined (T1/2, N0, M0) Intermediate risk	596 (5.90%)	9,263 (91.69%)	122 (1.21%)	122 (1.21%)	10,103 (100%)
Locally confined (T1/2, N0, M0) High risk	238 (3.07%)	6,880 (88.89%)	417 (5.39%)	205 (2.65%)	7,740 (100%)
Locally advanced (T3/4, N0, M0)	23 (1.58%)	1,221 (83.80%)	148 (10.16%)	65 (4.46%)	1,457 (100%)
Advanced (N1, M0)	9 (1.72%)	391 (74.76%)	81 (15.49%)	42 (8.03%)	523 (100%)
Advanced (N0/1, M1)	14 (0.92%)	241 (15.80%)	897 (58.82%)	373 (24.46%)	1,525 (100%)
No clear classification ³⁾	107 (10.12%)	874 (82.69%)	36 (3.41%)	40 (3.78%)	1,057 (100%)
Total primary cases	2,482	22,067	1,719	892	27,160

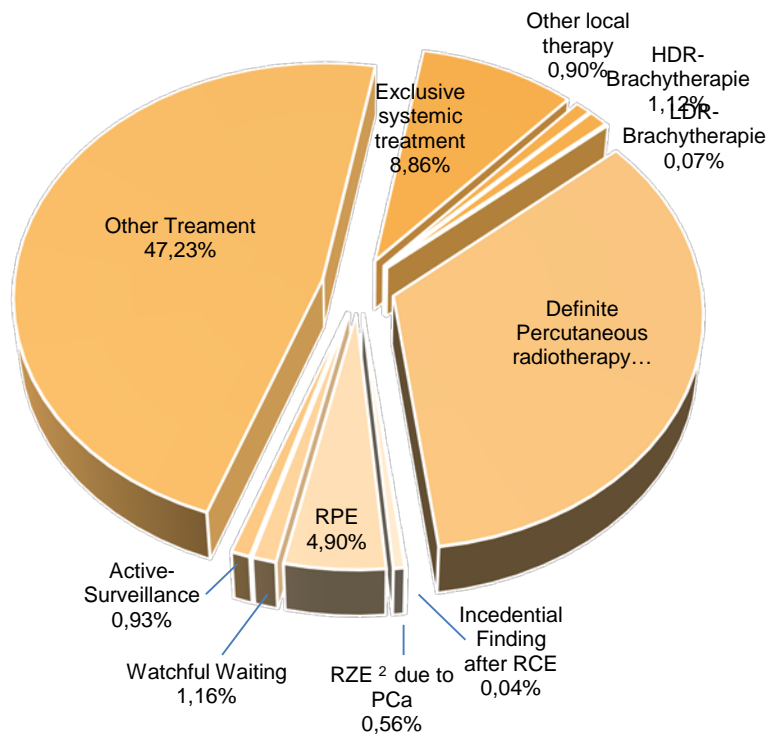
1) Interventional – local therapy of the prostate: radical prostatectomy, radical cysto-prostatectomy, definitive percutaneous radiotherapy, Brachytherapy, other local therapy

2) Interventional – other non-local therapies, i.e. palliative radiation of bone metastasis.

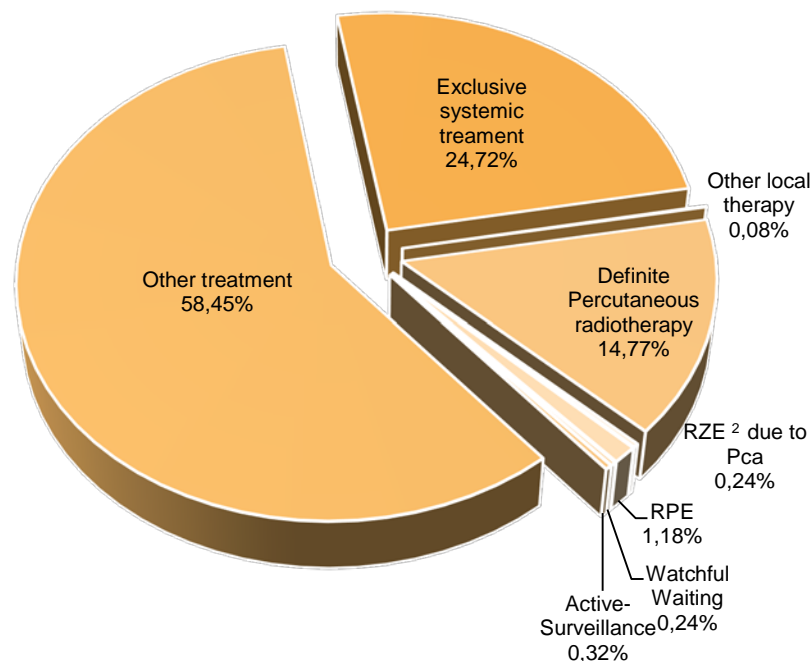
3) No clear classification: Nx, Mx, coincidental diagnosis after radical cysto-prostatectomy

Basic data

Newly diagnosed recurrence – distribution of therapies



Newly diagnosed remote metastasis – distribution of therapies

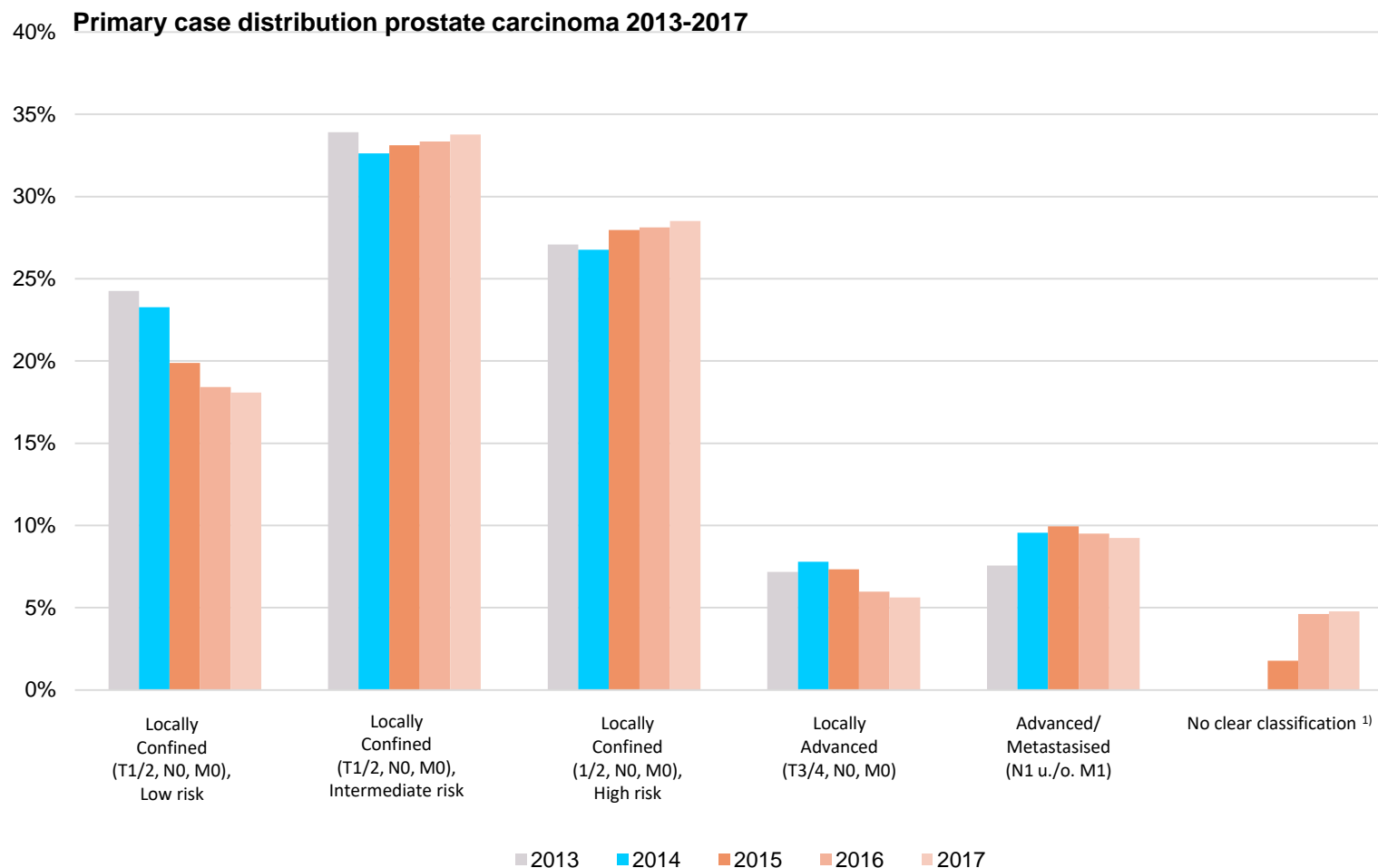


	Active-Surveillance	Watchful Waiting	RPE ¹	RZE ² due to Pca	Incidental finding after RCE	Definitive percuaneous radiotherapy	LDR-Brachytherapy	HDR-Brachytherapy	other local Therapie ³	Exclusive systemic therapy	Other therapy ⁴⁾	Total
Pat. with newly diagnosed recurrence	25 (0.93%)	31 (1.16%)	131 (4.90%)	15 (0.56%)	1 (0.04%)	916 (34.23%)	2 (0.07%)	30 (1.12%)	24 (0.90%)	237 (8.86%)	1.264 (47.23%)	2.676 (100%)
Pat. with newly diagnosed remote metastasis	4 (0.32%)	3 (0.24%)	15 (1.18%)	3 (0.24%)	0 (0.00%)	187 (14.77%)	0 (0.00%)	0 (0.00%)	1 (0.08%)	313 (24.72%)	740 (58.45%)	1.266 (100%)

1) Other therapy: i.e. radiotherapy of bone metastases
2) Radical cystoprostatectomy

3) Other local therapies, i.e. HIFU, ...
4) Other treatment: radiotherapy bone metastasis

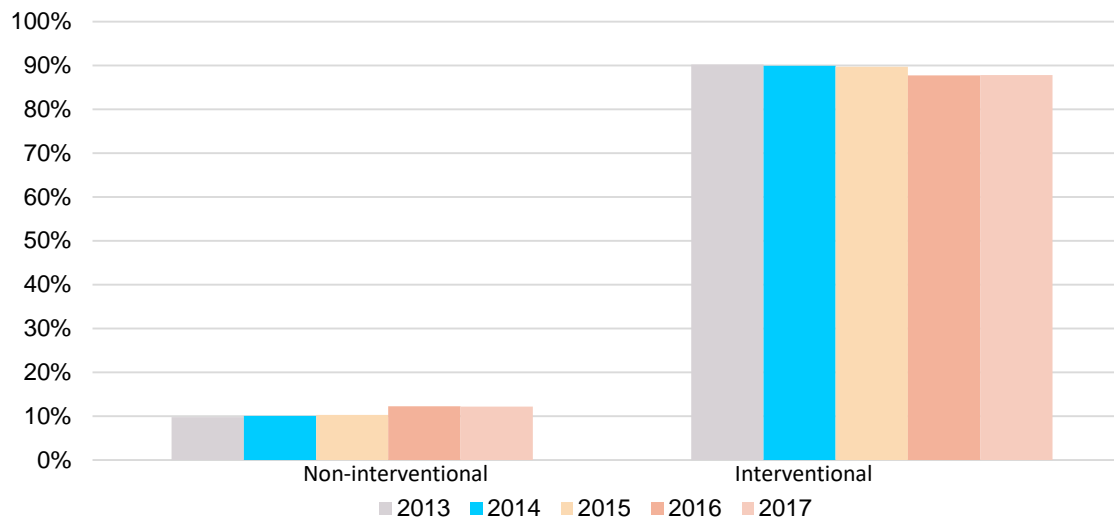
Basic data – Primary case distribution in the indicator years 2013-2017



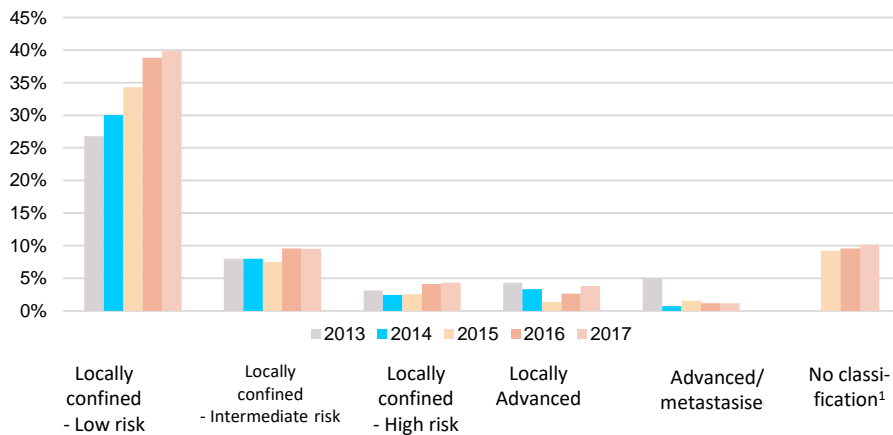
1) No clear classification: Nx, Mx, coincidental diagnosis after radical cysto-proctectomy

Basic data – Primary case distribution in the indicator years 2013-2017

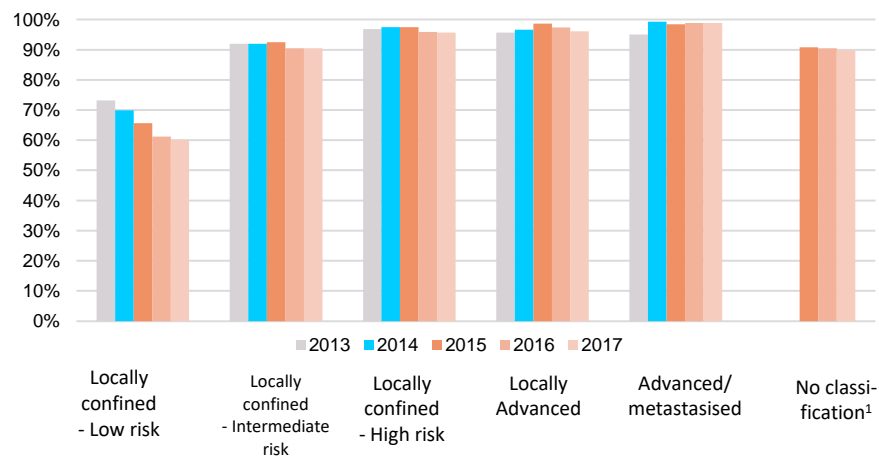
Distribution interventional / non-interventional primary cases 2013-2017



Distribution non-interventional primary cases 2013-2017

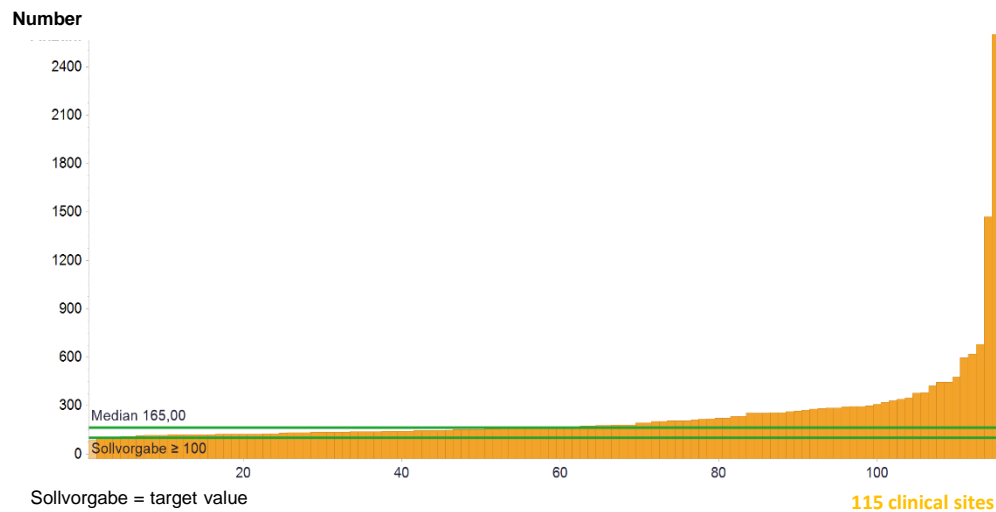


Distribution interventional primary cases prostate cancer 2013-2017

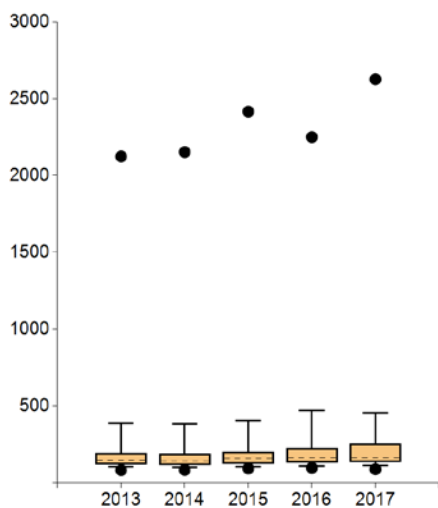


1) No clear classification: Nx, Mx, coincidental diagnosis after radical cysto-proctectomy

1a. Number of primary cases of prostate carcinoma



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients total
Number	Primary cases	165	89 – 2,626	27,160
	Target value ≥ 100			



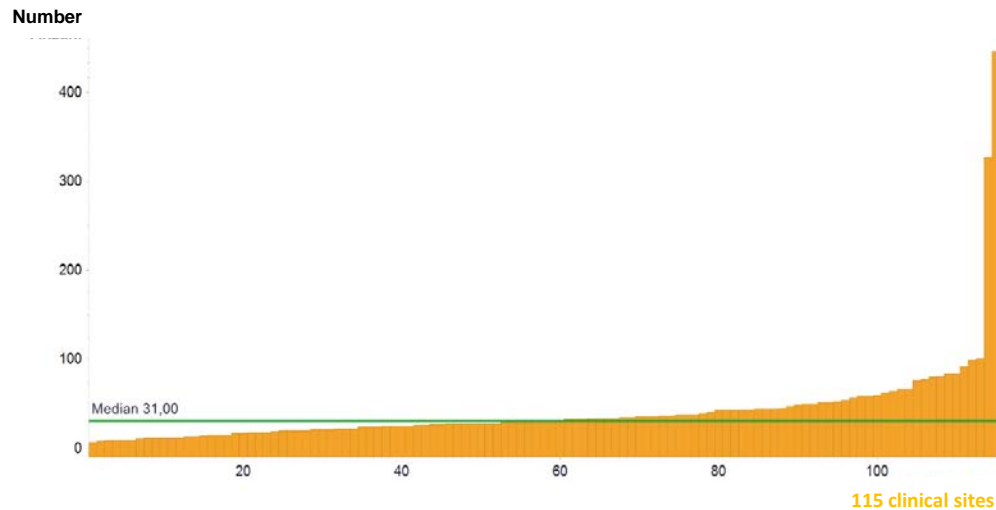
	2013	2014	2015	2016	2017
Max	2,124.00	2,153.00	2,416.00	2,250.00	2,626.00
95 th percentile	386.50	383.10	405.80	468.25	454.60
75 th percentile	192.00	187.75	200.50	225.50	254.50
Median	149.00	139.00	159.00	165.00	165.00
25 th percentile	119.50	117.00	122.50	131.00	134.50
5 th percentile	104.00	101.00	105.70	108.25	112.10
Min	83.00	84.00	94.00	98.00	89.00

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	114	99.13%

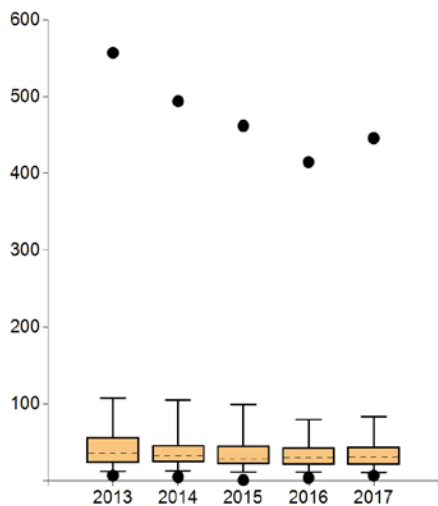
Comment

The median of primary cases in the Centres was the same as the previous year. All Centres met the target value. All the Centres that were also included in the report for the previous year, increased their primary case number (from 23,544 to 25,383). In 2017 25,181 primary cases with prostate cancer were treated in the German Centres. This was equivalent to 43.9% of patients throughout Germany with an initial diagnosis of prostate cancer (incidence prostate cancer in Germany in 2014: 57,368 [www.krebsdaten.de, accessed on 18.04.2019]).

1b1. Distribution of primary cases with locally confined prostate carcinoma and low risk



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients total
Number	Primary cases with locally confined PCa and low risk (PSA ≤ 10ng/ml and cT category ≤ 2a)	31	7 - 446	4,755
	No target value			



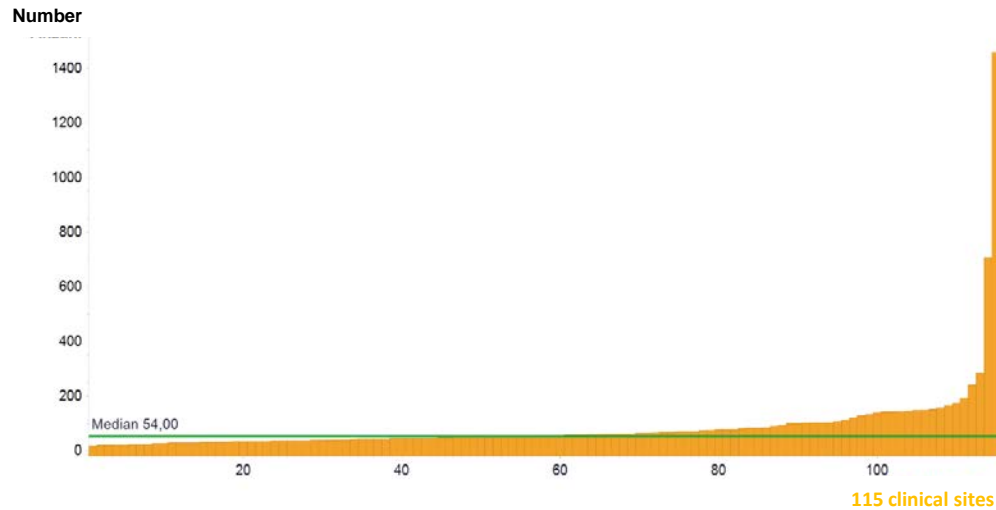
	2013	2014	2015	2016	2017
● Max	557.00	494.00	462.00	415.00	446.00
95 th percentile	107.50	105.30	99.30	80.00	84.00
75 th percentile	56.50	46.00	45.50	43.50	44.00
Median	36.00	32.50	29.00	30.50	31.00
25 th percentile	23.00	24.00	21.50	21.00	21.00
5 th percentile	12.50	13.30	11.70	11.25	10.40
● Min	7.00	5.00	1.00	4.00	.,00

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
116	100.00%	-----	-----

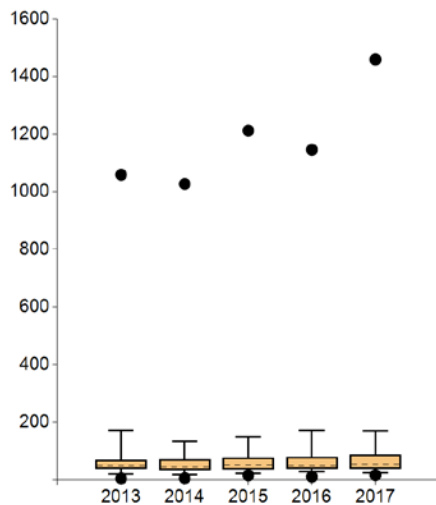
Comment

The median of the number of primary cases with locally limited prostate cancer and a low risk was unchanged compared to the previous year. Their proportion in prostate cancer overall fell steadily over the course of the years (indicator year [IY] 2017: 17.51%, IY 2016: 18.01%, IY 2015: 20.19%, IY 2014: 23.54%) and there was a shift towards advanced sub-groups (see also Indicators 1b2 and 1b3).

1b2. Distribution of primary cases with locally confined prostate carcinoma and intermediate risk



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Number	Primary cases with locally confined PCa and intermediate risk (PSA > 10-20 ng/ml or Gleason-Score 7 or cT 2b)	54	17 – 1,459	10,103
	No target value			



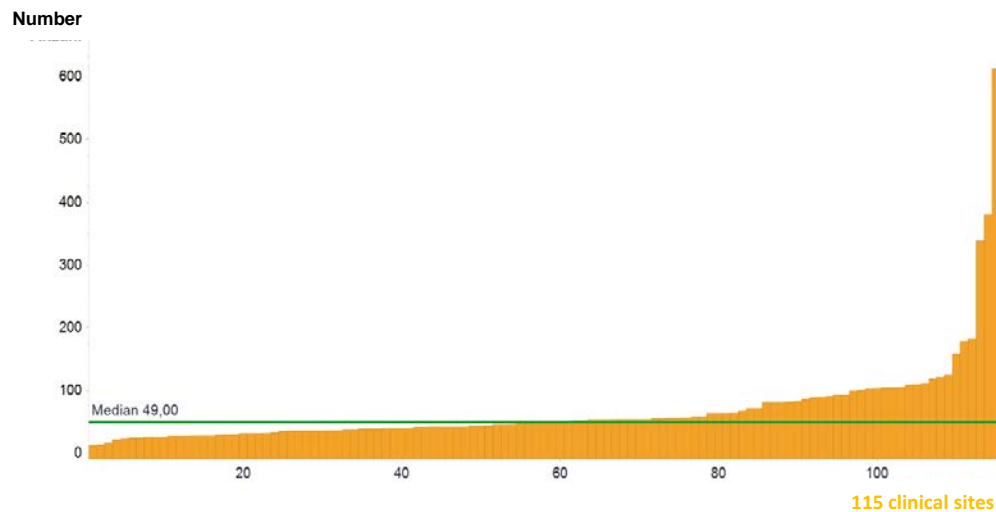
	2013	2014	2015	2016	2017
Max	1,059.00	1,027.00	1,212.00	1,146.00	1,459.00
95 th percentile	171.50	135.00	149.20	171.75	169.70
75 th percentile	67.50	71.25	77.50	78.75	87.50
Median	50.00	46.00	51.00	49.00	54.00
25 th percentile	38.00	35.00	37.00	39.25	38.50
5 th percentile	20.50	18.00	21.70	27.25	23.70
Min	5.00	6.00	16.00	11.00	17.00

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
106	100.00%	----	----

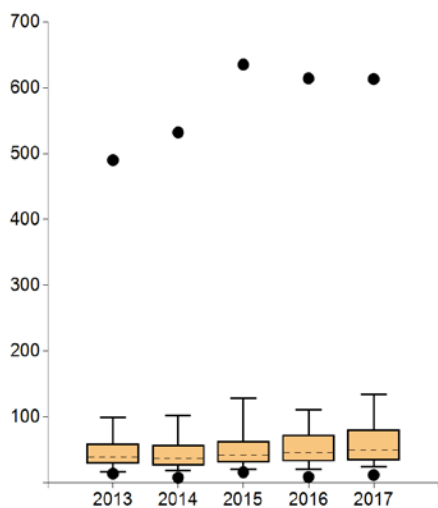
Comment

The median of the primary case number with locally limited prostate cancer and a moderate risk increased compared to indicator year (IY) 2016. The Centres that were also included in the annual report for the previous year, increased their case number for this sub-group from 8,592 (IY 2016) to 9,493 (IY 2017). The proportion of carcinomas with a moderate risk in total primary cases also increased (IY 2016: 36.49%, IY 2017: 37.20%). n audit year 2017.

1b3. Distribution of primary cases with locally confined prostate carcinoma and high risk



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Number	Primary cases with locally confined PCa and high risk (PSA > 20 ng/ml or Gleason-Score ≥ 8 or cT2c)	49	12 - 613	7.740
	No target value			



	2013	2014	2015	2016	2017
Max	490.00	532.00	635.00	614.00	613.00
95 th percentile	99.00	102.10	128.20	110,75	134,50
75 th percentile	59.50	57.75	63.50	72.75	81.00
Median	39.00	37.00	42.00	46.00	49.00
25 th percentile	29.50	26.25	31.00	33.00	35.00
5 th percentile	17.00	19.30	21.00	20.50	24.00
Min	14.00	8.00	16.00	9.00	12.00

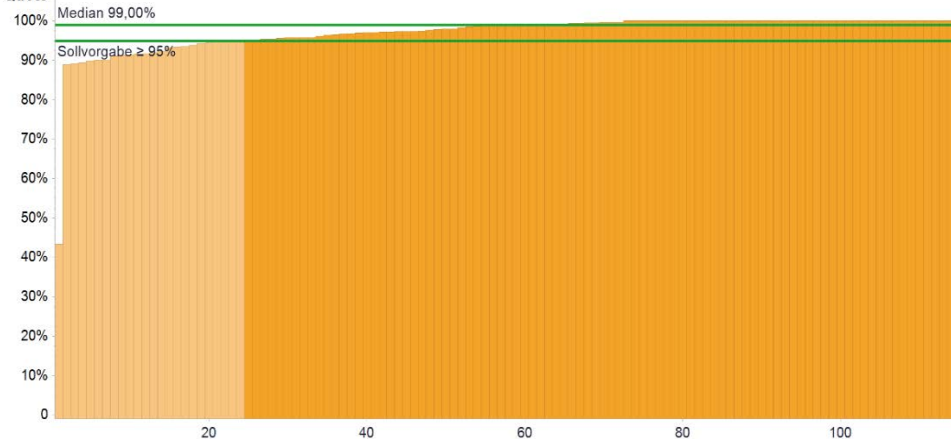
Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	----	----

Comment

For the sub-group of primary cases with locally limited prostate cancer and a high risk, there was a picture similar to that for the carcinomas with a moderate risk (Indicator 1b2). Compared to indicator year (IY) 2016 the median increased and the Centres that were also included in the annual report for the previous year, increased their case number (IY 2016: 6,658, indicator year 2017: 7,201).

2a. Presentation at the weekly pre-therapeutic conference – Urology

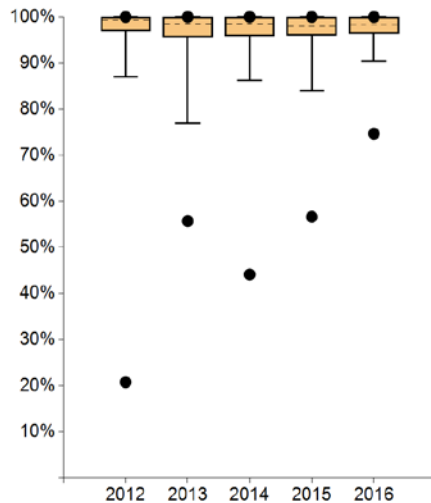
Number



Sollvorgabe = target value

115 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	All patients presented in the pre-therapeutic conference	121*	26 – 2,255	20,963
Denominator	All patients who presented themselves to the health care providers I (urology/ radiotherapy) (e.g. via referral) and have been diagnosed as primary cases in line with EB 1.2.1 (without primary M1)	125*	44 – 2,413	21,679
Rate	Target value ≥ 95%	99,00%	43.33% - 100%	96.70**



	2012	2013	2014	2015	2016
Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	99.27%	98.43%	98.54%	97.98%	98.19%
25 th percentile	96.89%	95.61%	95.84%	95.95%	96.38%
5 th percentile	87.01%	76.90%	86.24%	83.90%	90.42%
Min	20.77%	55.71%	44.12%	56.63%	74.66%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	91	79.13%

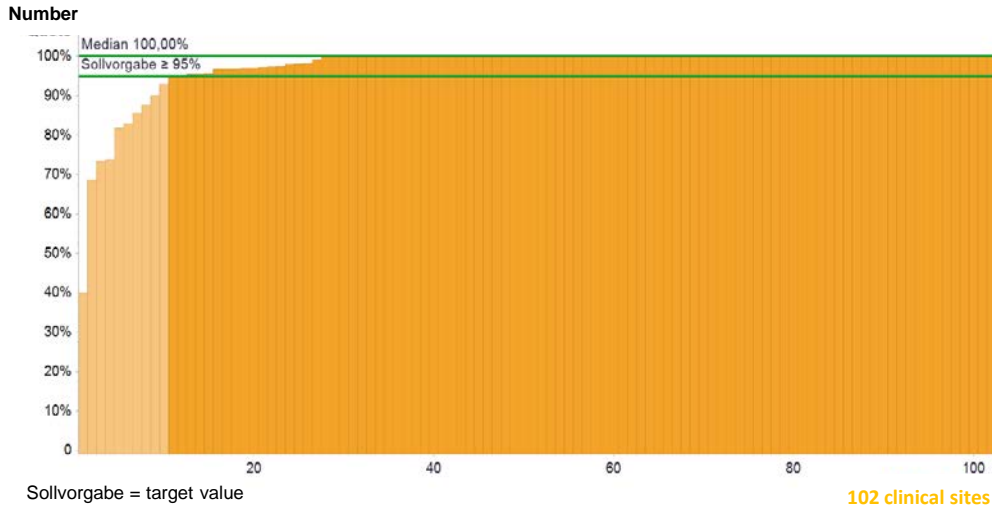
Comment

The standard operating procedure (SOP) for the presentation in the pre-therapeutic conference was again very well implemented in the Centres. The median was constant at >97%. The majority of the Centres were able to maintain or increase their rate compared to the previous year. The reasons given by the Centres that failed to meet the target value were incidental diagnoses for cystoprostatectomies or the failure to undertake an interdisciplinary case presentation in the case of external referral. The Centre with the lowest rate has drawn up new standard operating procedures (SOPs) and protocol templates to improve the presentation rate.

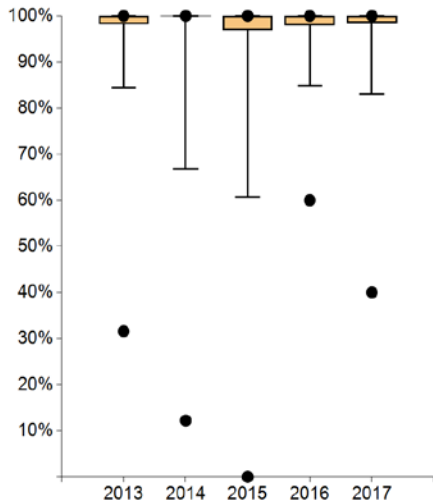
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** For values outside the plausibility limit(s) the Centres must give the reasons.

2b. Presentation at the weekly pre-therapeutic conference – Radiotherapy



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	All patients presented in the pre-therapeutic conference	26.5*	1 - 146	3,143
Denominator	All patients who presented themselves to the health care providers I (urology/ radiotherapy) (e.g. via referral) and have been diagnosed as primary cases in line with EB 1.2.1 (without primary M1)	28*	1 - 153	3,230
Rate	Target value ≥ 95%	100%	40.00 % - 100%	97.31**



	2013	2014	2015	2016	2017
● Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 th percentile	98.25%	100%	96.93%	98.00%	98.42%
5 th percentile	84.50%	66.67%	60.64%	84.83%	83.00%
● Min	31.58%	12.22%	0.00%	60.00%	40.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
102	88.70%	92	90.20%

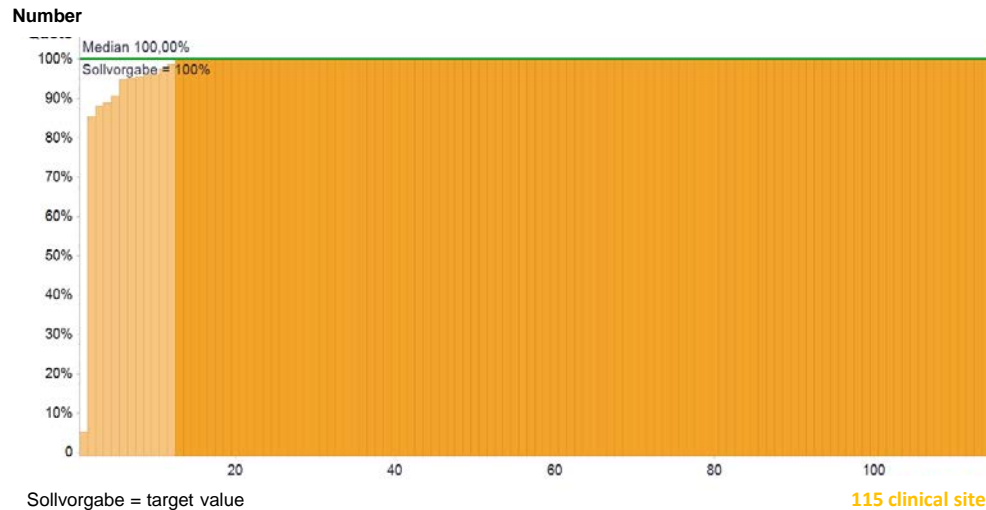
Comment

The presentation of pre-therapeutic cases of radiotherapy patients was again very well implemented in the Centres. The median was constant at 100%. 90.2% of the Centres met the target value (previous year: 89.9%). The main reason given by the Centres for failing to meet the target value was coordination difficulties between the cooperation partners. SOPs were introduced or revised to improve cooperation. In the Centre with lowest rate, there was no interdisciplinary discussion of 3 out of 5 radiotherapy patients prior to therapy..

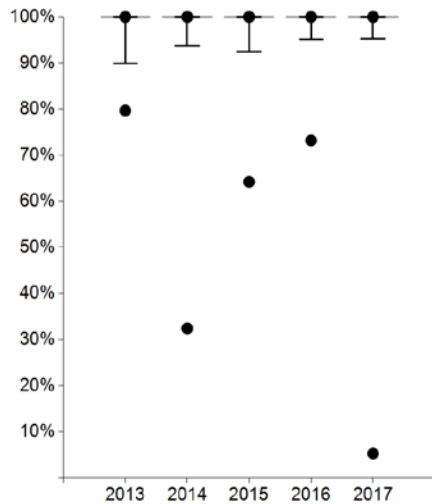
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** For values outside the plausibility limit(s) the Centres must give the reasons.

3a. Presentation in the monthly tumour conference – Postoperative Primary cases



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patienten Gesamt
Numerator	All patients presented in the post-therapeutic conference	25*	1 - 618	5,125
Denominator	Primary cases > pT3a and/or R1 and/or pN+	26*	4 - 723	5,276
Rate	Target value = 100%	100%	5.26% - 100%	97.14%**



	2013	2014	2015	2016	2017
Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 th percentile	100%	100%	100%	100%	100%
5 th percentile	89.91%	93.69%	92.35%	95.09%	95.15%
Min	79.66%	32.43%	64.21%	73.18%	5.26%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	103	89.57%

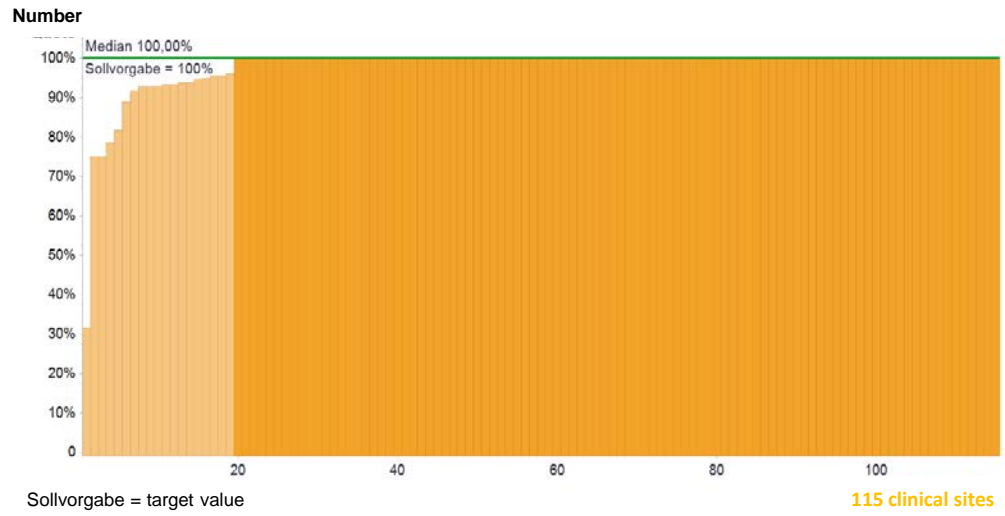
Comment

Post-operative case presentation was also very well implemented in the Centres. Most of the Centres increased or maintained their rate compared to the previous year (96 out of 105). The main reason given by the Centres for failing to meet the target were organisational problems. Some patients refused the case presentation. The Centre with the lowest rate explained that there had been a systematic error in patient identification. After detecting the error, the patients were then correctly selected for post-operative case review.

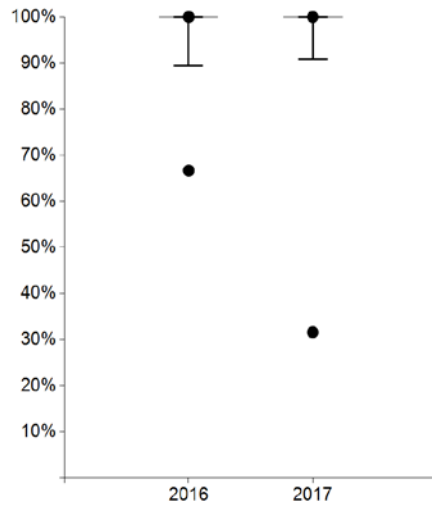
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** For values outside the plausibility limit(s) the Centres must give the reasons.

3b. Presentation in the monthly tumour conference – Primary cases with primary M1



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	All patients presented in the tumour conference (pre-therapeutically; primary M1)	11*	1 - 67	1,566
Denominator	Primary cases with M1	12*	1 - 67	1,602
Rate	Target value = 100%	100%	31.58% - 100%	97.75%**



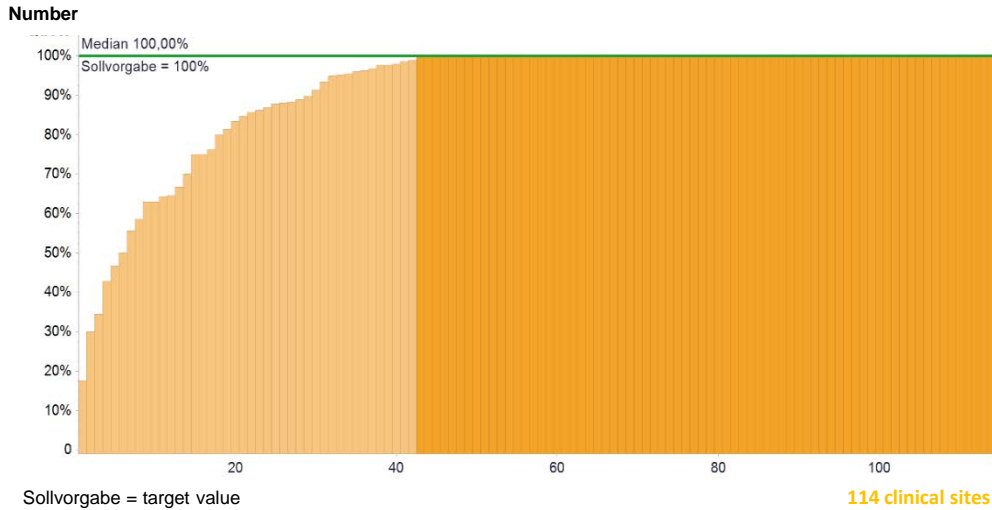
	2013	2014	2015	2016	2017
Max	----	----	----	100%	100%
95 th percentile	----	----	----	100%	100%
75 th percentile	----	----	----	100%	100%
Median	----	----	----	100%	100%
25 th percentile	----	----	----	100%	100%
5 th percentile	----	----	----	89.40%	90.84%
Min	----	----	----	66.67%	31.58%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	96	83.48%

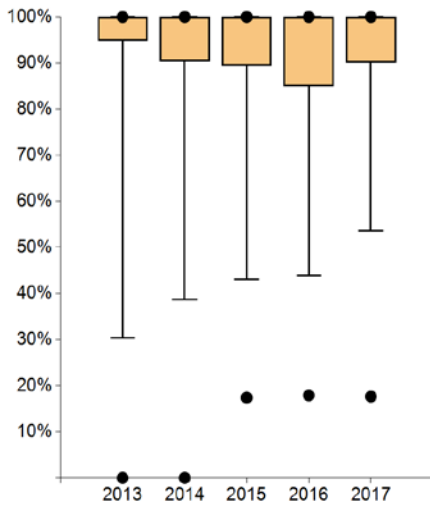
Comment
 There was also good implementation of the indicator for pre-therapeutic case presentation of patients with primary distant metastasis in the Centres. The median was again 100%. In total, 97.75% of primary cases with M1 were discussed prior to therapy in the tumour conference. The reasons frequently given by the Centres for failing to reach the target value were that patients were not presented by outpatient cooperation partners or died prematurely. In most Centres that failed to meet the target value, only one patient had not been presented prior to therapy.

*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.
 ** For values outside the plausibility limit(s) the Centres must give the reasons.

3c. Presentation in the monthly tumour conference – Recurrence/ metastases



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	All patients presented in the tumour conference (pre-therapeutic; newly diagnosed, recurrence and/or distant metastases)	22*	2 - 189	3,665
Denominator	All patients with primary diagnosis, recurrence and/or distant metastases	26*	3 - 189	3,942
Rate	Target = 100%	100%	17.65% - 100%	92.97%**



	2013	2014	2015	2016	2017
Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 th percentile	94.74%	90,8%	89.38%	85.00%	90.11%
5 th percentile	30.35%	38.68%	43.09%	43.88%	53.61%
Min	0.00%	0.00%	17.39%	17.91%	17.65%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
114	99.13%	72	63.16%

Comment

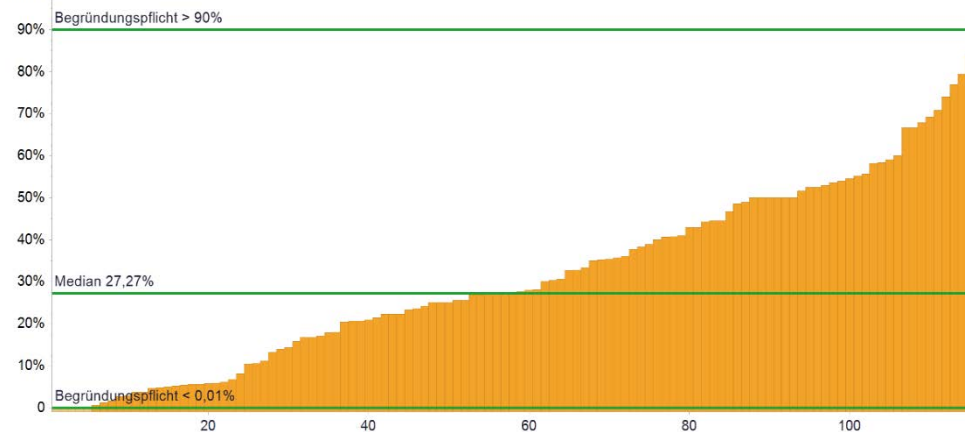
Compared to the previous year the indicator had improved: the median remained the same (100%) and the 25th and 5th percentiles increased. Overall, in indicator year (IY) 2017, 92.97% of recurrent patients in the Centres were presented in the tumour conference prior to therapy (IY 2016: 90.62%). The main reason given by the Centres for failing to meet the target value was that recurrent patients from cooperating practices were not presented. These Centres wish to improve cooperation and increase their rate by means of quality circles and changes to the registration procedures.

*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.

** For values outside the plausibility limit(s) the Centres must give the reasons.

4. Active Surveillance (AS)

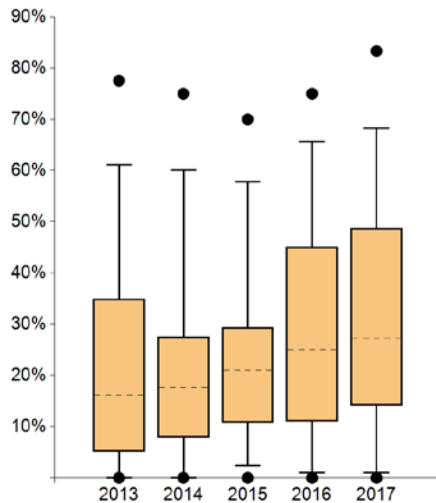
Number



Begründungspflicht = mandatory statement for reason

115 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases under AS	8*	0 - 44	1,155
Denominator	Primary cases with locally confined PCa and low risk(PSA ≤ 10ng/ml and Gleason-Score 6 and cT category ≤ 2a)	31*	7 - 446	4,755
Rate	Mandatory statement of reasons*** <0.01% and >90%	27.27%	0,00 % - 83.33 %	24.29%**



	2013	2014	2015	2016	2017
● Max	77,55%	75,00%	70,00%	75,00%	83,33%
95 th percentile	61,18%	60,00%	57,78%	65,65%	68,27%
75 th percentile	34,89%	27,51%	29,29%	45,03%	48,71%
Median	16,13%	17,65%	21,05%	25,00%	27,27%
25 th percentile	5,21%	7,94%	10,76%	10,98%	14,12%
5 th percentile	0,00%	0,00%	2,43%	0,94%	1,02%
● Min	0,00%	0,00%	0,00%	0,00%	0,00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	110	95.65%

Comment

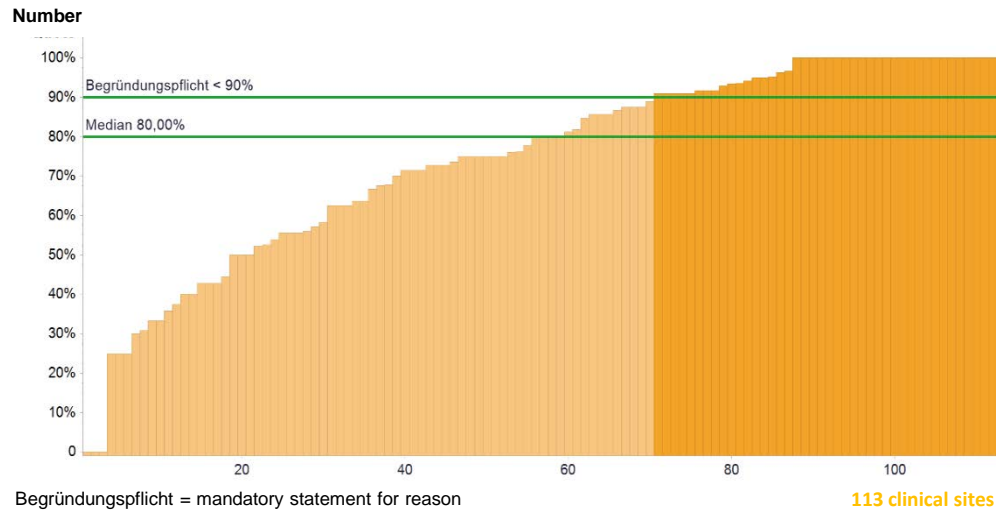
The median of the indicator for patients under active surveillance (AS) increased steadily over the last four years. 5 Centres did not record any AS patients in IY 2017. The reasons given were that patients refused the AS strategy and that patients under AS were mainly treated in outpatient settings which are not part of the Centre infrastructure.

*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.

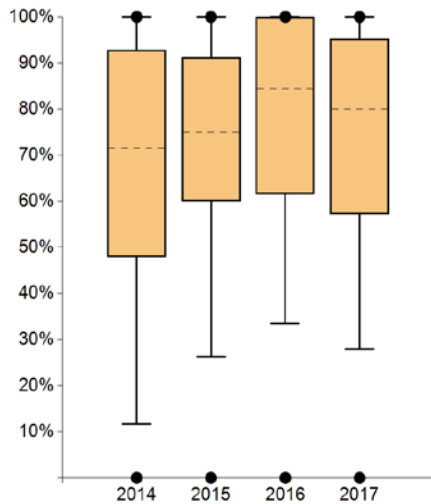
** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

5. Percutaneous radiotherapy with hormone ablation therapy for locally confined PCa with high risk (GL QI 4)



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with additional neo- and/or adjuvant hormone ablation therapy	8*	0 - 32	1,104
Denominator	Primary cases with prostate carcinoma T1-2 NO M0 with high risk (PSA >20ng/ml or Gleason-Score ≥ 8 or cT category 2c) and percutaneous radiotherapy	11*	1 - 45	1,479
Rate	Mandatory statement of reasons*** <90% and =100%	80.00 %	0,00% - 100%	74.65%**



	2013	2014	2015	2016	2017
● Max	----	100%	100%	100%	100%
95 th percentile	----	100%	100%	100%	100%
75 th percentile	----	92.86%	91.26%	100%	95.24%
Median	----	71.43%	75.00%	84.52%	80.00%
25 th percentile	----	48.00%	60.05%	61.63%	57.14%
5 th percentile	----	11.64%	26.25%	33.54%	33.54%
● Min	----	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
113	98.26%	43	38.05%

Comment

The median of the quality indicator in the Guideline fell compared to the previous year. The rate of the total number of patients treated in line with the Guideline was constant (indicator year [IY] 2016: 75.42%, IY 2017: 74.65%). Centres with a rate requiring substantiation stated that hormone ablation therapy was not carried out because of patient wishes or comorbidities. Another frequent reason was the lack of information on patients treated in an outpatient setting. The 3 Centres with a rate of 0% had low denominators (n=1-3)..

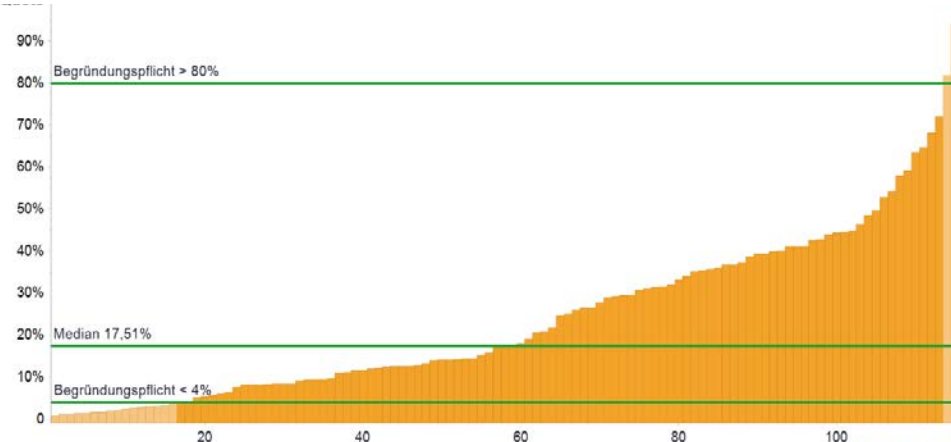
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

6. Psycho-oncologic care

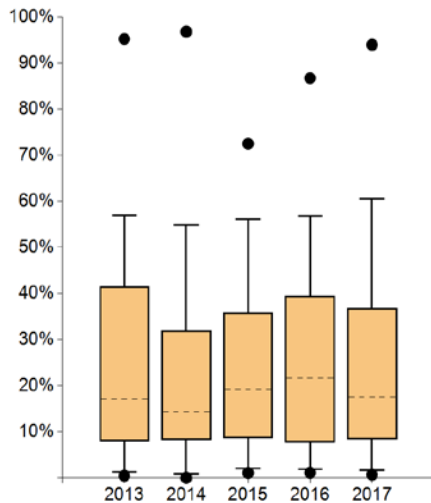
Number



Begründungspflicht = mandatory statement for reason

115 clinical sites

	Definition of indicator	All clinical sites 2017		
		Range	Median	Patients Total
Numerator	Patients who received psycho-oncologic care (in- or outpatient setting) (duration of consultation \geq 25 min)	38*	2 - 701	6,648
Denominator	Primary cases (= indicator 1a) and patients with first manifestation of local recurrence and/or metastases (= indicator 3b)	193*	99 - ,2652	31,102
Rate	Mandatory statement of reasons*** <4% and >80%	17.51 %	0,70% - 93.94%	21.37%**



	2013	2014	2015	2016	2017
● Max	95.21%	96.77%	72.50%	86.71%	93.94%
95 th percentile	56.96%	54.82%	56.11%	56.79%	60.47%
75 th percentile	41.46%	31.95%	35.73%	39.48%	36.82%
Median	17.06%	14.40%	19.25%	21.62%	17.51%
25 th percentile	8.04%	8.24%	8.65%	7.66%	8.39%
5 th percentile	1.27%	0.80%	2.06%	1.94%	1.58%
● Min	0.45%	0.00%	1.08%	1.12%	0.70%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	97	84.35%

Comment

The median of the psycho-oncological counselling rate fell compared to the previous year. The rate of the total number of patients who received psycho-oncological counselling fell from indicator year (IY) 2016 to 2017 (from 22.71% to 21.37%). A frequent reason given by the Centres with a low care rate was that the patients had a limited need for counselling despite the low-threshold offering and consistent screening. The improvement measures they indicated included higher staffing levels or changes to their screening strategy.

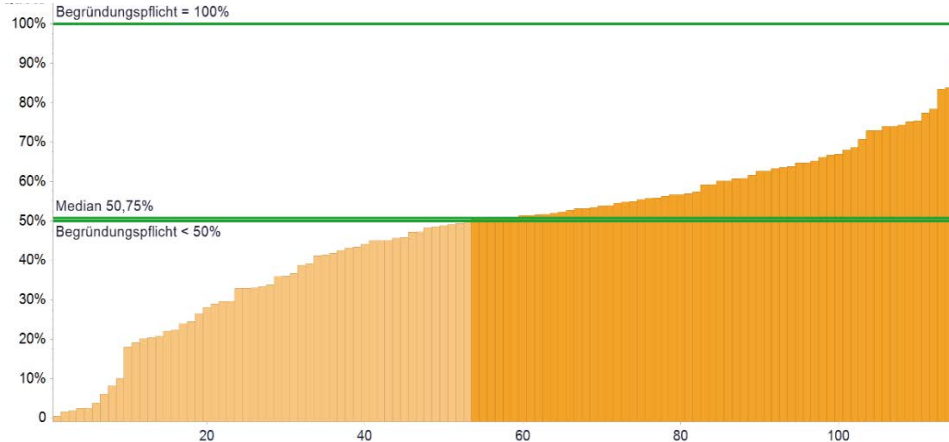
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

7. Social service counselling

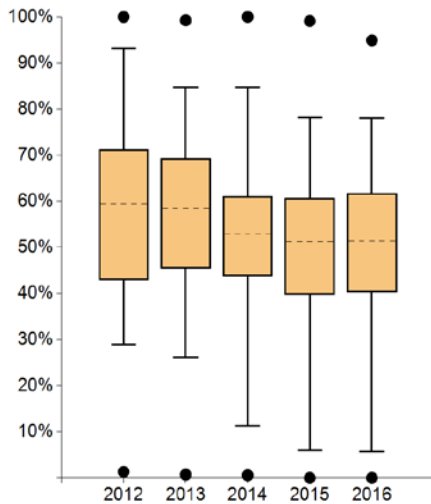
Number



Begründungspflicht = mandatory statement for reason

115 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Patients who received social service counselling (in- or outpatient setting)	87*	1 - ,1453	1,5540
Denominator	Primary cases (= indicator 1a) and patients with first manifestation of local recurrence and/or metastases (= indicator 3b)	193*	99 – 2,652	31,102
Rate	Mandatory statement of reasons*** <50% and =100%	50.75%	0,40% - 89.87%	49.96%**



	2013	2014	2015	2016	2017
● Max	99.25%	100%	99.10%	94.90%	89.87%
● 95 th percentile	84.79%	84.67%	78.13%	78.01%	75.22%
● 75 th percentile	69.23%	61.09%	60.64%	61.76%	60.42%
● Median	58.40%	52.88%	51.23%	51.40%	50.75%
● 25 th percentile	45.50%	43.73%	39.76%	40.29%	35.94%
● 5 th percentile	26.08%	11.35%	5.96%	5.77%	5.36%
● Min	0.71%	0.57%	0.00%	0.00%	0.40%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	62	53.91%

Comment

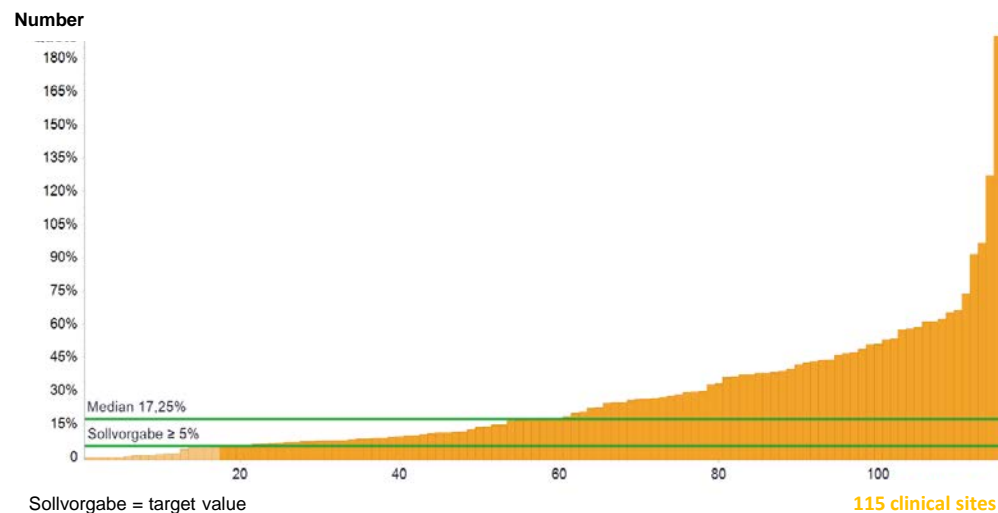
The indicator for social services counselling has remained steady over the course of the last few years. Compared to indicator year (IY) 2016, the median was almost unchanged. More than half (27/48) of the Centres who had a rate requiring substantiation the previous year, were able to increase their rate. One of the reasons given by the Centres who had a low rate in IY 2017, was the limited demand from patients. The 8 Centres with the lowest rates were all located in German-speaking regions outside Germany. There, the statutory foundations for social work are different. .

*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.

** Percentage of centre patients who were treated according to the indicator.

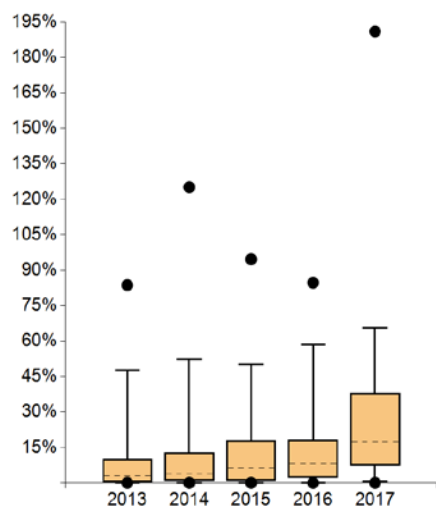
*** If value is outside the plausibility corridor, centres have to give an explanation.

8. Clinical trial participation



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Patients included in a clinical trial subject to an ethics vote	30*	0 – 1,521	8,039
Denominator	Primary cases (= indicator 1a)	165*	89 – 2,626	27,160
Rate	Target value ≥5%	17.25%	0.00% - 190.94%	29.60%**

Sollvorgabe = target value



	2013	2014	2015	2016	2017
Max	83,61%	125,08%	94,58%	84,69%	190,94%
95 th percentile	47,53%	52,19%	50,22%	58,46%	65,54%
75 th percentile	10,12%	12,81%	17,80%	18,25%	38,07%
Median	2,91%	3,78%	6,23%	8,12%	17,25%
25 th percentile	0,22%	0,82%	0,81%	2,10%	7,24%
5 th percentile	0,00%	0,00%	0,00%	0,00%	0,62%
Min	0,00%	0,00%	0,00%	0,00%	0,00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	98	85.22%

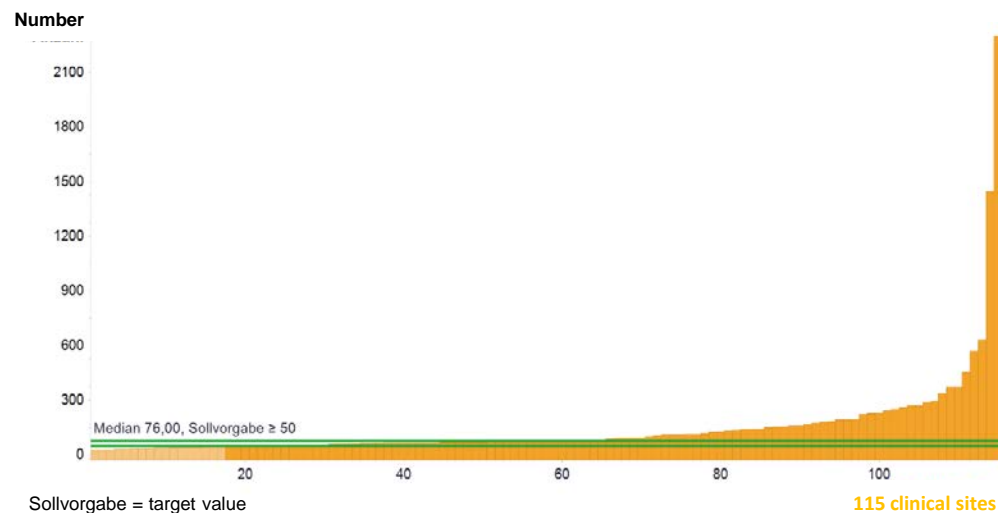
Comment

The median of the indicator for study participation increased markedly compared to indicator year (IY) 2016. The main reason for this is that Centres included more patients in the Prostate Cancer Outcome (PCO) study in IY 2017. Far more Centres reached the target value than the previous year (IY 2016: 64.15%). Most of the Centres that failed to meet the target value in IY 2017 stated they were preparing their participation in the PCO study, which means that a further improvement in the indicator is to be expected.

*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.

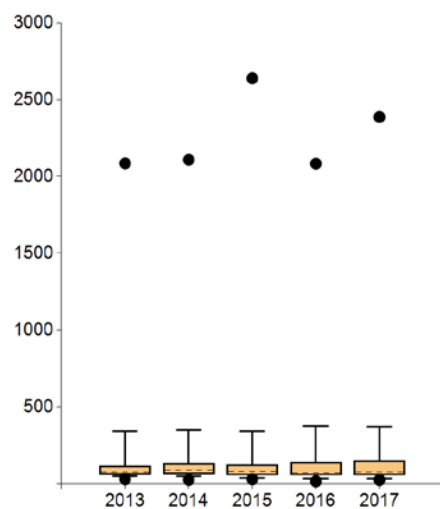
** For values outside the plausibility limit(s) the Centres must give the reasons.

9. Number of prostatectomies – Centre



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Number	Total number of radical prostatectomies/ cystoprostatectomies (see basic data)	76	26 – 2,387	17,227
	Target value ≥ 50			

Sollvorgabe = target value



	2013	2014	2015	2016	2017
Max	2086.00	2109.00	2639.00	2084.00	2387,00
95 th percentile	343.50	349.35	344.70	374.25	372,30
75 th percentile	116.50	133.75	122.50	140.00	151,00
Median	78.00	89.50	79.00	73.50	76,00
25 th percentile	59.00	66.50	58.00	56.25	56,00
5 th percentile	49.00	48.65	37.10	34.50	34,00
Min	31.00	27.00	31.00	17.00	26,00

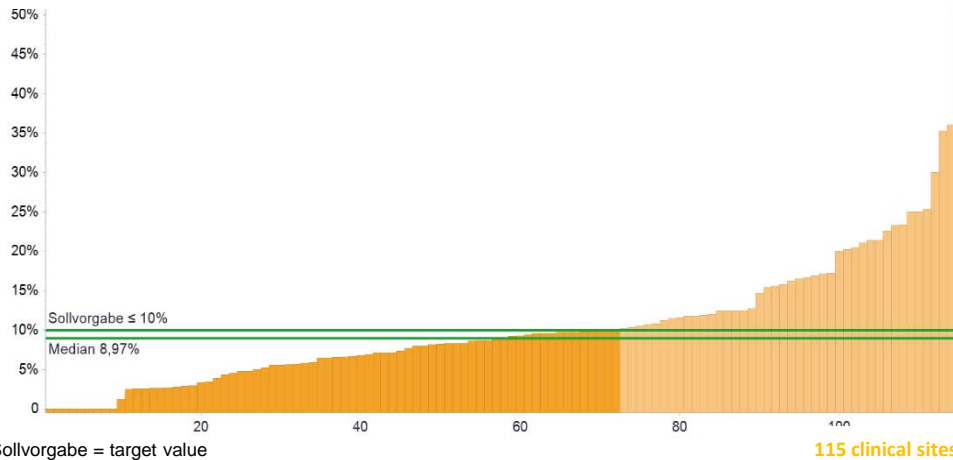
Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	98	85.22%

Comment

The median for the number of prostatectomies increased in the Centres. Most of the Centres were able to increase the number of surgical interventions compared to the previous year. Overall 17,227 patients (63.4% referred to the primary cases) in the Centres underwent a prostatectomy in indicator year (IY) 2017. In 2016 14,941 prostatectomies were performed (63.1%). 17 Centres failed to meet the target value in indicator year 2017. In these Centres case-by-case decisions with an unrestricted recommendation for a certificate extension were taken in line with Chapter 5.2.1 of the Catalogue of Requirements.

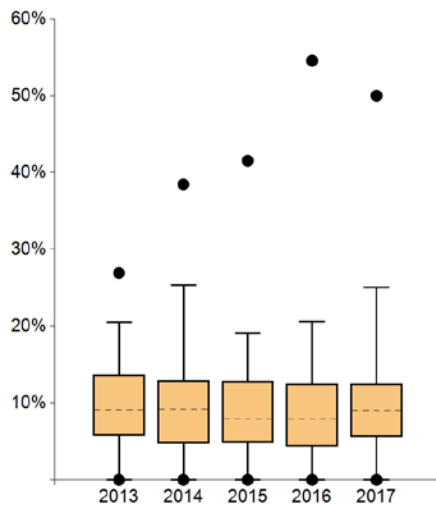
10. Record of R1 resections for pT2 c/pN0 or Nx M0

Number



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Operations with R1 status for primary cases with pT2 c/pN0 or Nx M0	4*	0 - 114	826
Denominator	Operations on primary cases with pT2 c/pN0 or Nx M0	41*	10 – 1,372	9,440
Rate	Target value ≤ 10%	8.97%	0.00% - 50.00%	8.75%**

Sollvorgabe = target value



	2013	2014	2015	2016	2017
Max	26.92%	38.46%	41.54%	54.55%	50.00%
95 th percentile	20.53%	25.39%	19.05%	20.57%	25.00%
75 th percentile	13.69%	12.89%	12.85%	12.50%	12.50%
Median	9.09%	9.15%	7.89%	7.95%	8.97%
25 th percentile	5.71%	4.79%	4.87%	4.31%	5.56%
5 th percentile	0.00%	0.00%	0.00%	0.00%	0.00%
Min	0.00%	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	72	62.61%

Comment

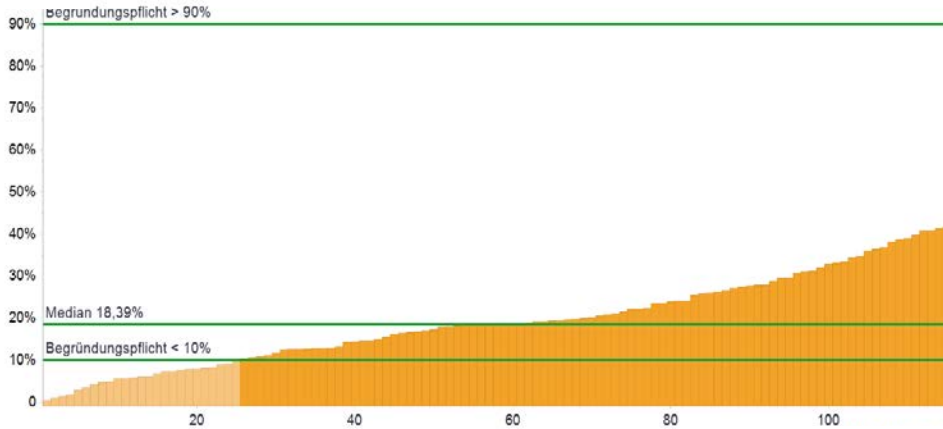
Over the course of time the indicator for recording R1 resection rates was almost unchanged. The median increased slightly compared to the previous year. 27 out of the 35 Centres that exceeded the target value in indicator year (IY) 2016, were able to lower their R1 resection rate in IY 2017. In IY 2017 43 Centres failed to meet the target value. Some of the reasons they gave were changes in surgical techniques or the introductory training of new surgeons. The auditors formulated deviations and made remarks. To improve the rate, training sessions and training circles were for instance staged with the pathologists.

*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.

** For values outside the plausibility limit(s) the Centres must give the reasons.

11. Definitive radiotherapy

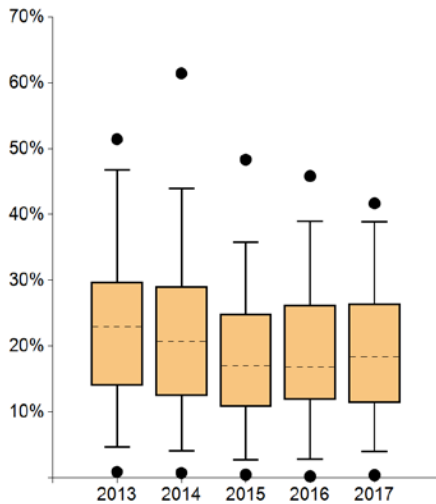
Number



Begründungspflicht = mandatory statement for reason

115 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with definitive radiotherapy	34*	2 - 148	4,263
Denominator	Primary cases (= indicator 1a)	165*	89 – 2,626	27,160
Rate	Mandatory statement of reasons*** <10% and >90%	1,39%	0.41% - 41.67%	15.70%**



	2013	2014	2015	2016	2017
Max	51.41%	61.40%	48.33%	45.81%	41.67%
95 th percentile	46.71%	43.94%	35.77%	38.91%	38.81%
75 th percentile	29.77%	29.03%	24.85%	26.24%	26.44%
Median	22.89%	20.73%	16.95%	16.81%	18.39%
25 th percentile	14.05%	12.46%	10.80%	11.89%	11.42%
5 th percentile	4.63%	4.12%	2.70%	2.86%	3.97%
Min	0.91%	0.76%	0.48%	0.23%	0.41%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	90	78.26%

Comment

The indicator for definitive radiotherapy was almost the same over the course of the last 5 years and the median increased slightly. The share of patients with definitive radiotherapy was 15.7% in indicator year (IY) 2017 and 15.48% in IY 2016. The reason given by the Centres with low rates was mainly the wish of patients. Furthermore, they commented that radiotherapy treatments were often carried out in an outpatient setting which means that these patients are not covered by the documentation in the Centre.

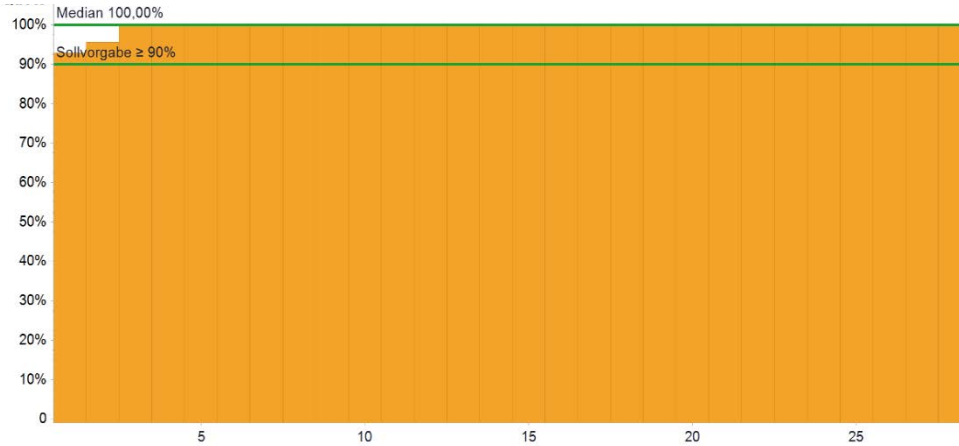
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

12. Permanent seed implantation - D 90 > 130 Gy

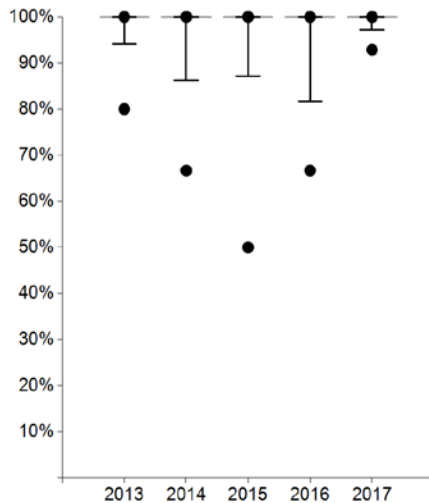
Number



Sollvorgabe = target value

28 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases for whom D90 > 130 Gy was achieved	6,5*	1 - 39	265
Denominator	Primary cases with permanent seed implantation	6,5*	1 - 39	267
Rate	Target value ≥ 90%	100%	9.86% - 100%	99.25%**



	2013	2014	2015	2016	2017
Max	100%	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%	100%
Median	100%	100%	100%	100%	100%
25 th percentile	100%	100%	100%	100%	100%
5 th percentile	94.11%	86.14%	87.11%	81.67%	97.17%
Min	80.00%	66.67%	50.00%	66.67%	92.86%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
28	24.35%	28	100.00%

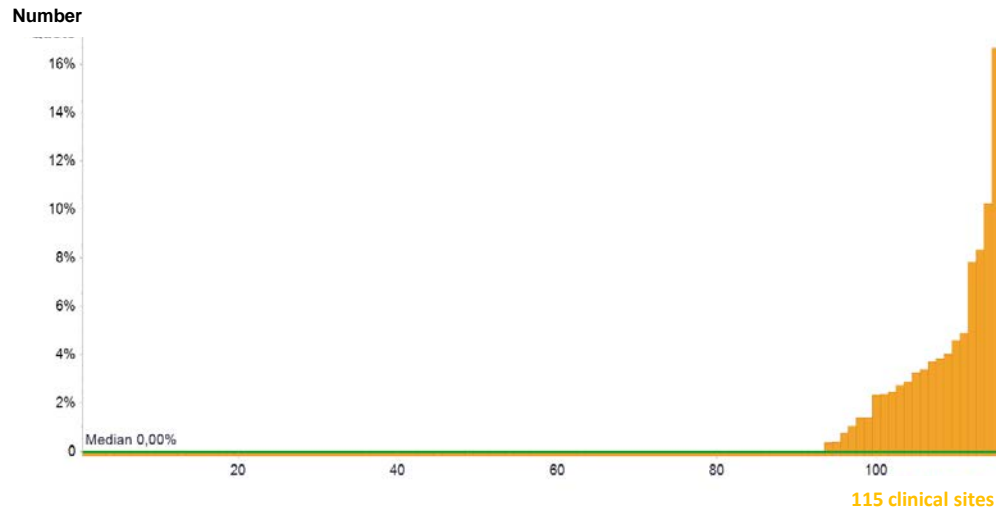
Comment

The indicator for the radiation dose to be achieved with permanent seed implantation was implemented in an excellent manner in the Centres. All Centres met the target value. The median was constant at >100%, the 5th percentile and the minimum value increased compared to the previous year. Permanent seed implantations were performed at 28 clinical sites in indicator year 2017. Only these Centres were included in the evaluation.

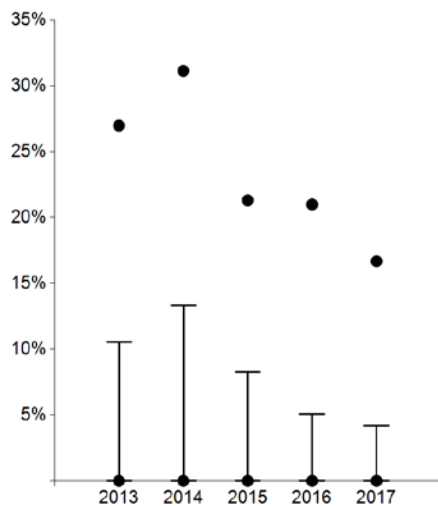
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** For values outside the plausibility limit(s) the Centres must give the reasons.

13. HDR brachytherapy



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with HDR brachytherapy	0*	0 - 37	183
Denominator	Primary cases (= indicator 1a)	165*	89 – 2,626	27,160
Rate	No target value	0.00%	0.00% - 16.67%	0.67%**



	2013	2014	2015	2016	2017
Max	26.97%	31.13%	21.30%	20.98%	16.67%
95 th percentile	10.54%	13.30%	8.27%	5.07%	4.20%
75 th percentile	0.00%	0.00%	0.00%	0.00%	0.00%
Median	0.00%	0.00%	0.00%	0.00%	0.00%
25 th percentile	0.00%	0.00%	0.00%	0.00%	0.00%
5 th percentile	0.00%	0.00%	0.00%	0.00%	0.00%
Min	0.00%	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
106	100.00%	-----	-----

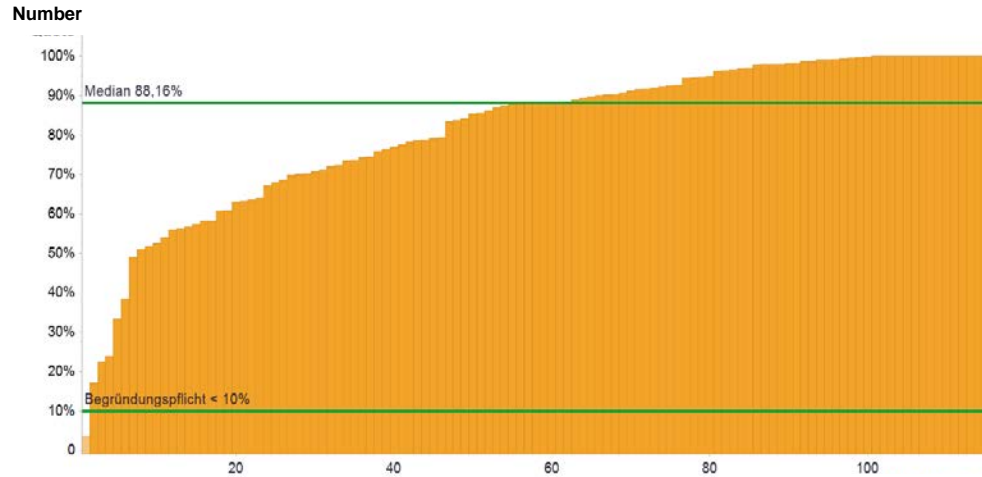
Comment

In 22 out of the 115 Centres HDR brachytherapies were performed (= numerator > 0) in indicator year (IY) 2017 (2016: 19 Centres). Overall, the indicator was unchanged over the course of the years (same median and 25th and 75th percentiles). Most of the Centres that performed brachytherapies had a downward rate in comparison to IY 2016.

*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.

** For values outside the plausibility limit(s) the Centres must give the reasons.

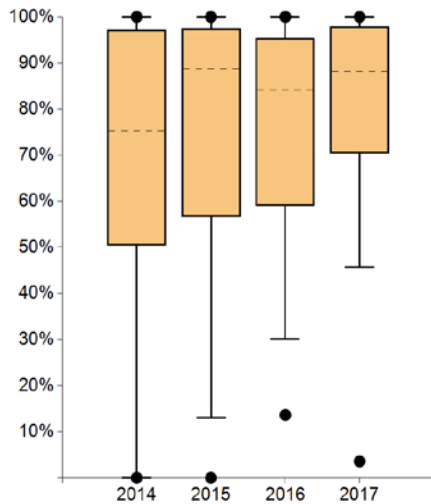
14. Diagnostic report – Punch biopsy (GL QI 1)



Begründungspflicht = mandatory statement for reason

115 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with complete diagnostic report	113*	4 – 1,250	16,078
Denominator	Primary cases with prostate carcinoma and vacuum biopsy	131*	16 – 2,449	20,861
Rate	Mandatory statement of reasons*** <10% and =100%	88.16%	3.60% - 100%	77.07%**



	2013	2014	2015	2016	2017
● Max	----	100%	100%	100%	100%
95 th percentile	----	100%	100%	100%	100%
75 th percentile	----	97.17%	97.46%	95.32%	97.86%
Median	----	75.27%	88.75%	84.09%	88.16%
25 th percentile	----	50.41%	56.69%	59.04%	70.42%
5 th percentile	----	0.00%	12.96%	30.11%	45.74%
● Min	----	0.00%	0.00%	13.64%	3.60%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	114	99.13%

Comment

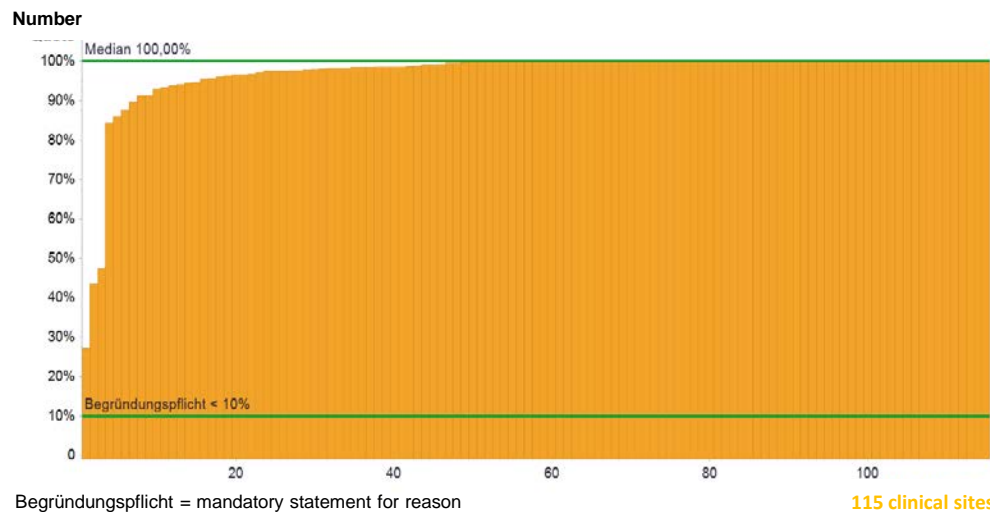
The quality indicator in the Guideline for complete diagnostic reports on punch biopsies has improved over the course of the last few years. The median was higher than the previous year. The 25th and 5th percentiles increased over the course of the last 4 years. The majority of the Centres were able to maintain or increase their rate compared to the previous year (68 out of 105 Centres = 64.8%). The Centre with the lowest rate in indicator year in 2017 changed the templates for the diagnostic reports for 2018.

*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.

** Percentage of centre patients who were treated according to the indicator.

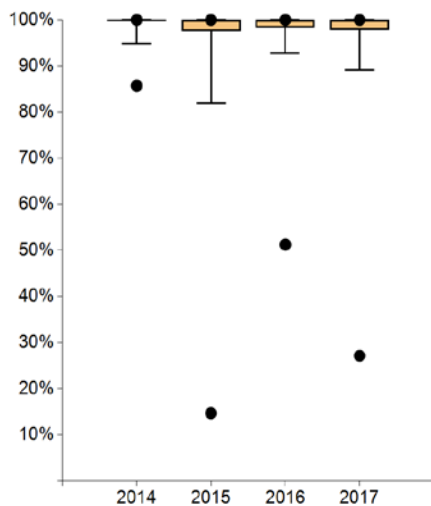
*** If value is outside the plausibility corridor, centres have to give an explanation.

15. Diagnostic report – Lymph nodes (GL QI 2)



Begründungspflicht = mandatory statement for reason

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with diagnostic reports stating: <ul style="list-style-type: none"> pN category number of affected lymph nodes in relation to resected lymph nodes 	70*	3 – 2,112	15,253
Denominator	Primary cases with prostate carcinoma and lymphadenectomy	71*	3 – 2,132	1,5516
Rate	Mandatory statement of reasons*** <10% and =100%	100%	27.14 % - 100%	98.30%**



	2013	2014	2015	2016	2017
Max	-----	100%	100%	100%	100%
95 th percentile	-----	100%	100%	100%	100%
75 th percentile	-----	100%	100%	100%	100%
Median	-----	100%	100%	100%	100%
25 th percentile	-----	99.96%	97.61%	98.32%	97.89%
5 th percentile	-----	94.76%	81.93%	92.78%	89.03%
Min	-----	85.71%	14.68%	51.24%	27.14%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
115	100.00%	115	100.00%

Comment

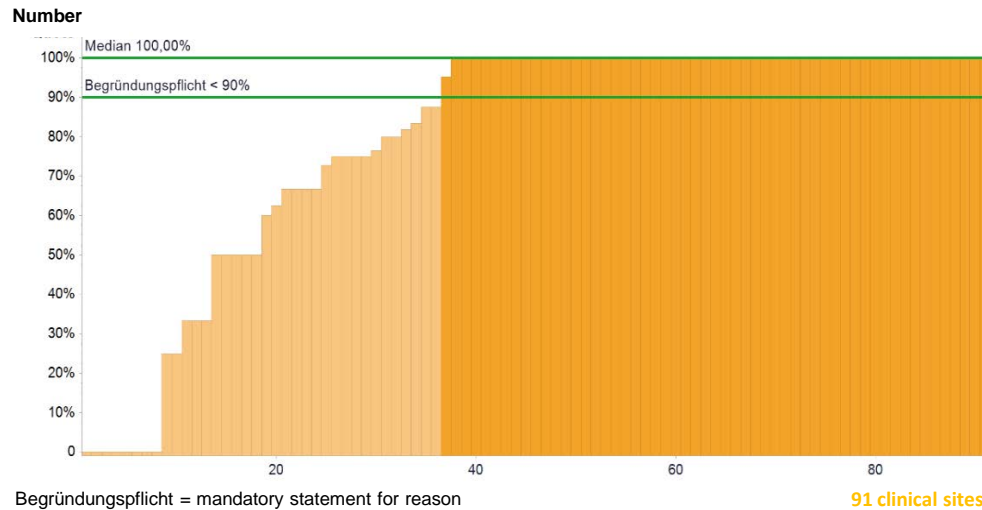
The quality indicator in the Guideline for complete diagnostic reports after lymph node removal was also implemented very well in the Centres. Over the last 4 years the median remained constant at 100%. All Centres had a rate > 10% which means that no Centre was obliged to substantiate the indicator outcome.

*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.

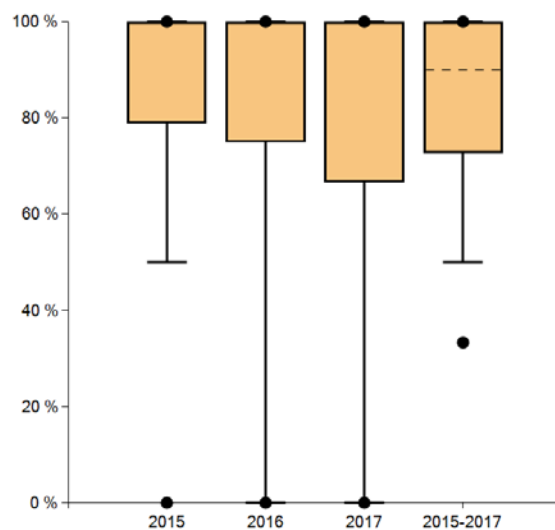
** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

16. Percutaneous radiotherapy with hormone ablation therapy for locally progressed PCa



	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with additional hormone ablation therapy	2*	0 - 20	275
Denominator	Primary cases with PCa T3-4 N0 M0 and percutaneous radiotherapy	3*	1 - 21	336
Rate	Mandatory statement of reasons*** <10% and =100%	100%	0,00% - 100%	81,85%**



	2015	2016	2017	2015-2017
Max	100%	100%	100%	100%
95 th percentile	100%	100	100%	100%
75 th percentile	100%	100%	100%	100%
Median	100%	100%	100%	90.00%
25 th percentile	78.89%	75.00%	66.67%	72.73%
5 th percentile	50.00%	0.00%	0,00%	50.00%
Min	0.00%	0.00%	0,00%	33.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
91	79.13%	55	60.44%

Comment

The indicator was deleted from the set of quality indicators when the Guideline was updated in 2017 because of the difficulty of interpreting a small population. The result for Y 2017 was almost the same as for 2016. The median was constant at 100%. Centres with rates of 0% all had small denominators (1 or 2 patients). The reason given for the low rates was often patients' refusal of hormone ablation therapy.

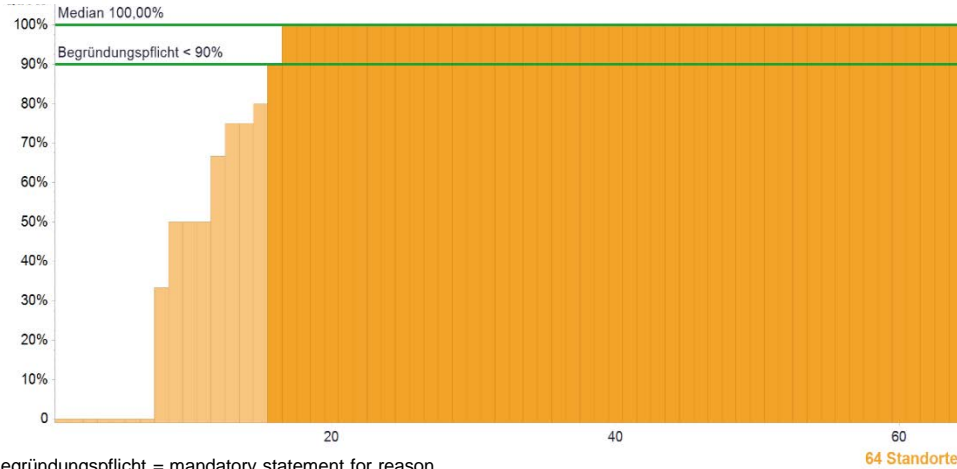
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

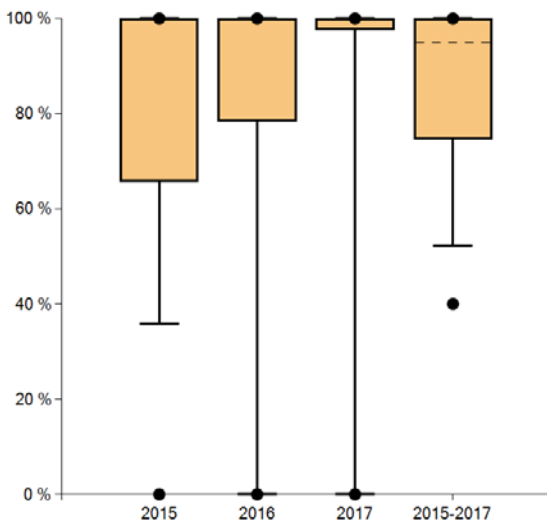
17. Percutaneous radiotherapy with hormone ablation therapy for PCa with lymph node metastases

Number



Begründungspflicht = mandatory statement for reason

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients total
Numerator	Primary cases with additional hormone ablation therapy	2*	0 - 17	156
Denominator	Primary cases with PCa with histologically confirmed lymph node metastases and percutaneous radiotherapy	2*	1 - 17	174
Rate	Mandatory statement of reasons*** <10% and =100%	100%	0,00% - 100%	89,66%**



	2015	2016	2017	2015-2017
● Max	100%	100%	100%	100%
95 th percentile	100%	100%	100%	100%
75 th percentile	100%	100%	100%	100%
Median	100%	100%	100%	95,05%
25 th percentile	65.63%	78.38%	97,50%	74,58%
5 th percentile	35.83%	0.00%	0,00%	52,22%
● Min	0.00%	0.00%	0,00%	40,00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
64	55.65%	49	76.56%

Comment

The indicator was deleted from the set of quality indicators when the Guideline was updated in 2017 because of the difficulty of interpreting a small population. Over the course of the last 4 years the indicator has steadily improved with rising 25th and 5th percentiles. Centres with a low rate had small populations (n=1 or 2) and the reason they gave was patients' refusal of hormone ablation therapy despite a recommendation from the tumour conference.

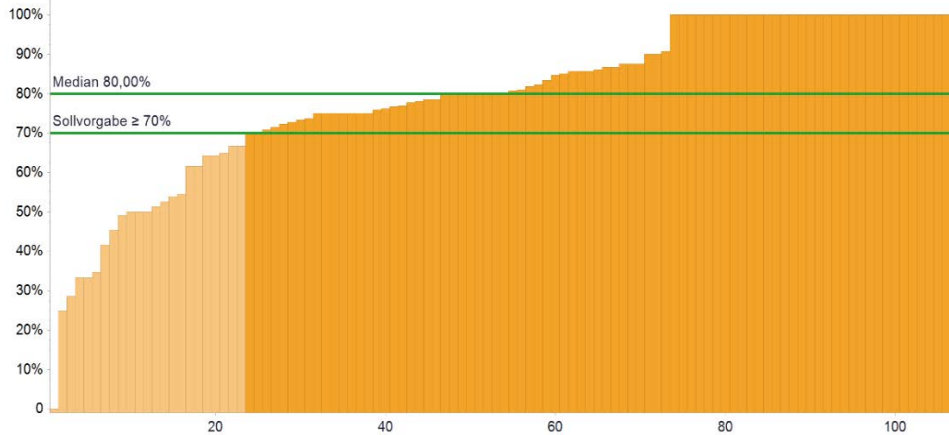
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

18. Salvage-radiotherapy for recurrent prostate cancer (GL QI 8)

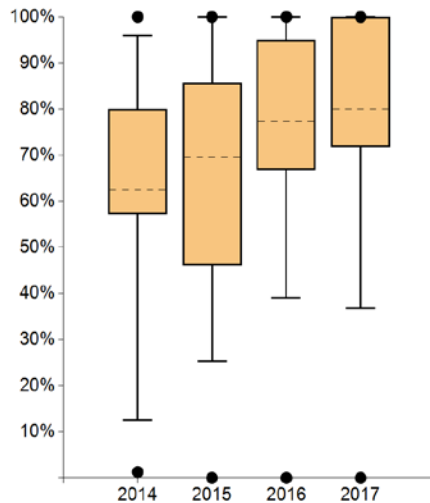
Number



Sollvorgabe = target value

107 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Patients with beginning SRT and PSA <0.5 ng/ml	8*	0 - 62	1,132
Denominator	Patients after RPE and PSA recurrence and SRT	10*	1 - 72	1,467
Rate	Mandatory statement of reasons*** <10% and =100%	80.00 %	0.00% - 100%	77.16%**



	2013	2014	2015	2016	2017
● Max	-----	100%	100%	100%	100%
95 th percentile	-----	96.00%	100%	100%	100%
75 th percentile	-----	80.00%	85.71%	94.92%	100%
Median	-----	62.50%	69.57%	77.26%	80.00%
25 th percentile	-----	57.14%	46.06%	66.67%	71.83%
5 th percentile	-----	12.44%	25.36%	39.09%	36.85%
● Min	-----	1.26%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
96	90.57%	66	68.75%

Comment

The quality indicator in the Guideline showed a welcome improvement over the course of the last few years. From indicator year (IY) 2014 to 2017 the median and the 25th percentiles increased. The proportion of Centres that met the target value was higher than the previous year (IY 2016: 68.75%). The reason frequently given by the Centres that failed to meet the target value in IY 2017 was a late referral of patients with PSA recurrence from an outpatient setting. The Centre with a rate of 0% performed salvage radiotherapy on only 1 patient with RPE and PSA recurrence.

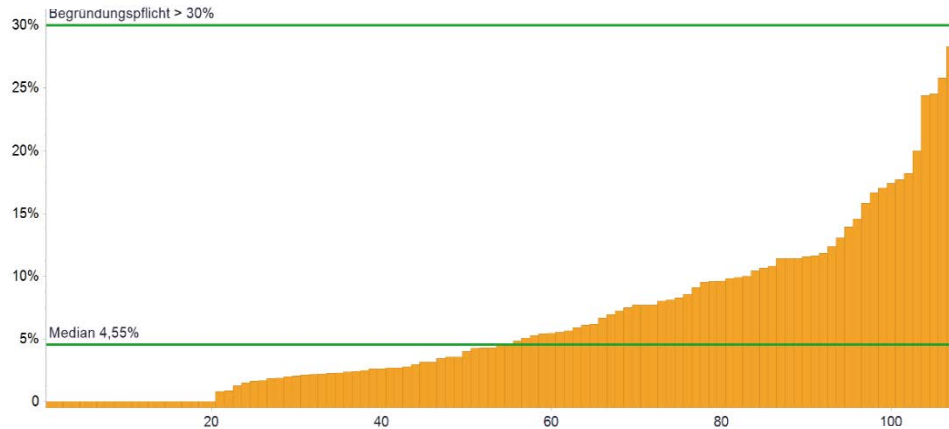
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

20. Postoperative complications after radical prostatectomy (GL QI 9)

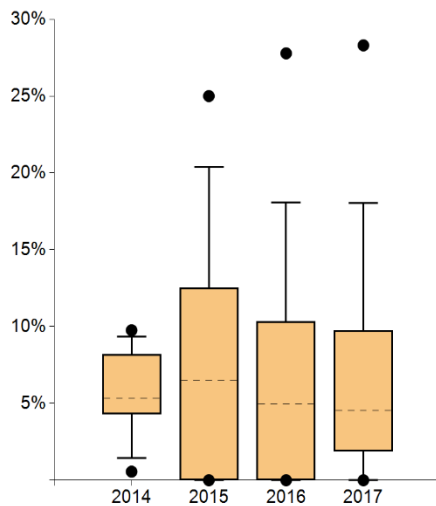
Number



Begründungspflicht = mandatory statement for reason

107 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with complications Clavien-Dindo grade III or IV within the first 6 months after RPE	3*	0 - 108	745
Denominator	Primary cases with PCa T1-2 N0 M0 and RPE (from the previous indicator year)	59*	11 – 2,247	12,805
Rate	Mandatory statement of reasons*** >30%	4.55%	0.00% - 28.30%	5.82%**



	2013	2014	2015	2016	2017
Max	-----	9.76%	25.00%	27.78%	28.30%
95 th percentile	-----	9.33%	20.37%	18.09%	18.03%
75 th percentile	-----	8.21%	12.53%	10.34%	9.73%
Median	-----	5.35%	6.47%	4.98%	4.55%
25 th percentile	-----	4.32%	0.00%	0.00%	1.87%
5 th percentile	-----	1.43%	0.00%	0.00%	0.00%
Min	-----	0.56%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
107	93.04%	107	100.00%

Comment

The median of quality indicator in the Guideline for recording post-operative complications after a radical prostatectomy fell slightly compared to the previous year. Fortunately, most Centres were able to maintain or lower the rate compared to the previous year. 8 out of the 10 Centres with the highest complication rates in indicator year (IY) 2016 were able to lower their rate in IY 2017. Similar to the previous year, all Centres had a rate <30% which means that no Centre was obliged to substantiate the complications rate.

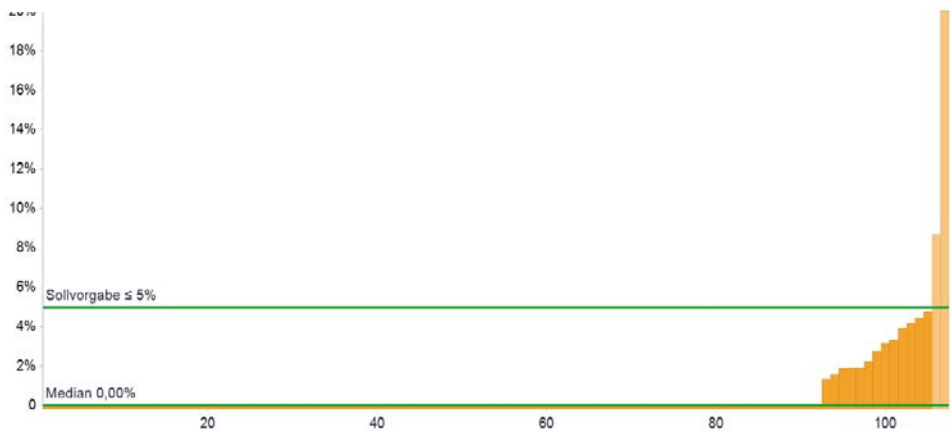
*The medians for numerator and population do not refer to an existing Centre but indicate the median of all cohort numerators and the median of all cohort denominators.

** Percentage of centre patients who were treated according to the indicator.

*** If value is outside the plausibility corridor, centres have to give an explanation.

21. Complications after radiotherapy (GL QI 10)

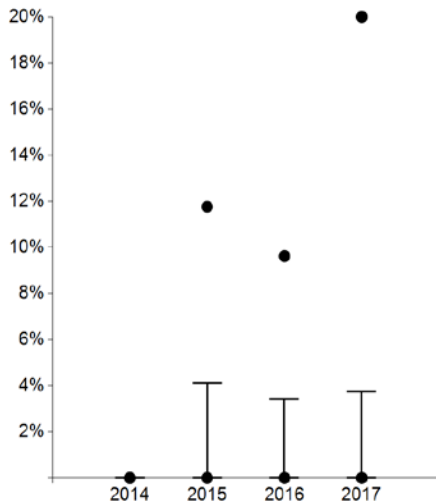
Number



Sollvorgabe = target value

107 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with complications CTCAE grade III or IV within the first 6 months after radiotherapy	0*	0 - 6	27
Denominator	Primary cases with PCa T1-2 N0 M0 and adjuvant radiotherapy (from the previous indicator year)	39*	6 - 129	4,559
Rate	Target value ≤ 5%	0.00%	0.00% - 20.00%	0.59%**



	2013	2014	2015	2016	2017
Max	----	0.00%	11.76%	9.62%	20.00%
95 th percentile	----	0.00%	4.11%	3.42%	3.74%
75 th percentile	----	0.00%	0.00%	0.00%	0.00%
Median	----	0.00%	0.00%	0.00%	0.00%
25 th percentile	----	0.00%	0.00%	0.00%	0.00%
5 th percentile	----	0.00%	0.00%	0.00%	0.00%
Min	----	0.00%	0.00%	0.00%	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
107	93.04%	105	98.13%

Comment

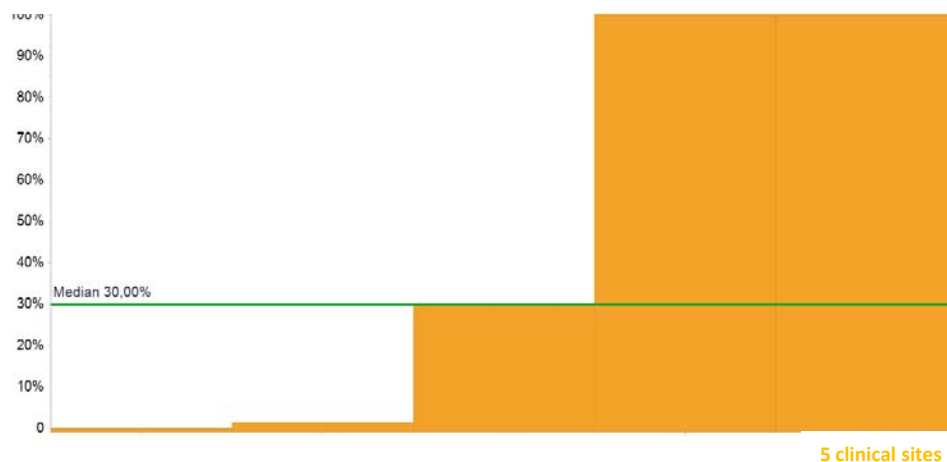
Similar to the previous year, the median of the indicator for recording radiotherapy complications was 0%. Most of the Centres were able to maintain or reduce the complication rate compared to the indicator year (IY) 2016 (86 out of 98 Centres). 2 Centres failed to meet the target value in indicator year 2017. Here the individual cases were analysed and checked for plausibility during the audits. One Centre used an erroneous calculation method and recorded disorders that were already present prior to therapy as complications. The Centre will align its calculation method for the next year

*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.

** For values outside the plausibility limit(s) the Centres must give the reasons.

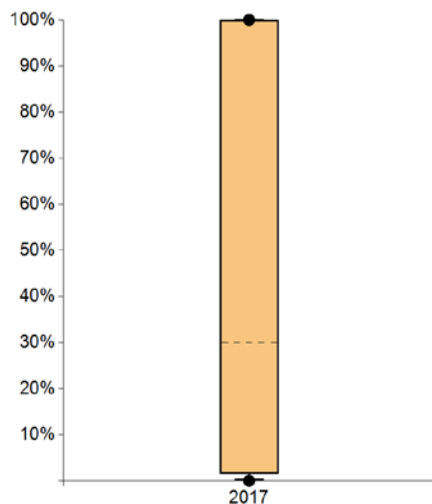
22. Dental examination prior to commencement of bisphosphonate or denosumab therapy (GL QI 8)

Number



5 clinical sites

	Definition of indicator	All clinical sites 2017		
		Median	Range	Patients Total
Numerator	Primary cases with a recommended dental examination prior to commencement of bisphosphonate or denosumab therapy	1*	0 - 3	7
Denominator	All primary cases of bisphosphonate or denosumab therapy	8*	1 - 131	151
Rate	No target value	30,00%	0,00% - 100%	4.64%**



	2013	2014	2015	2016	2017
● Max	----	----	----	----	100%
95 th percentile	----	----	----	----	100%
75 th percentile	----	----	----	----	100%
Median	----	----	----	----	30.00%
25 th percentile	----	----	----	----	1.53%
5 th percentile	----	----	----	----	0.31%
● Min	----	----	----	----	0.00%

Clinical sites with evaluable data		Clinical sites meeting the target	
Number	%	Number	%
5	4.35%	----	----

Comment

The indicator for recommending a dental examination prior to commencement of bisphosphonate or denosumab therapy, was introduced for the first time in indicator year 2017 and could be used on an optional basis by the Centres. 5 Centres evaluated the indicator. Overall, the results were heterogeneous. The process has not yet been implemented in 2 Centres. Each of the 2 Centres with a rate of 100% had only treated 1 patient with bisphosphonates or denosumab. When the Guideline was updated, this indicator was included as a new quality indicator.

*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.

** For values outside the plausibility limit(s) the Centres must give the reasons.

WISSEN AUS ERSTER HAND (FIRST-HAND KNOWLEDGE)



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