

Oesophageal and gastric cancer overview

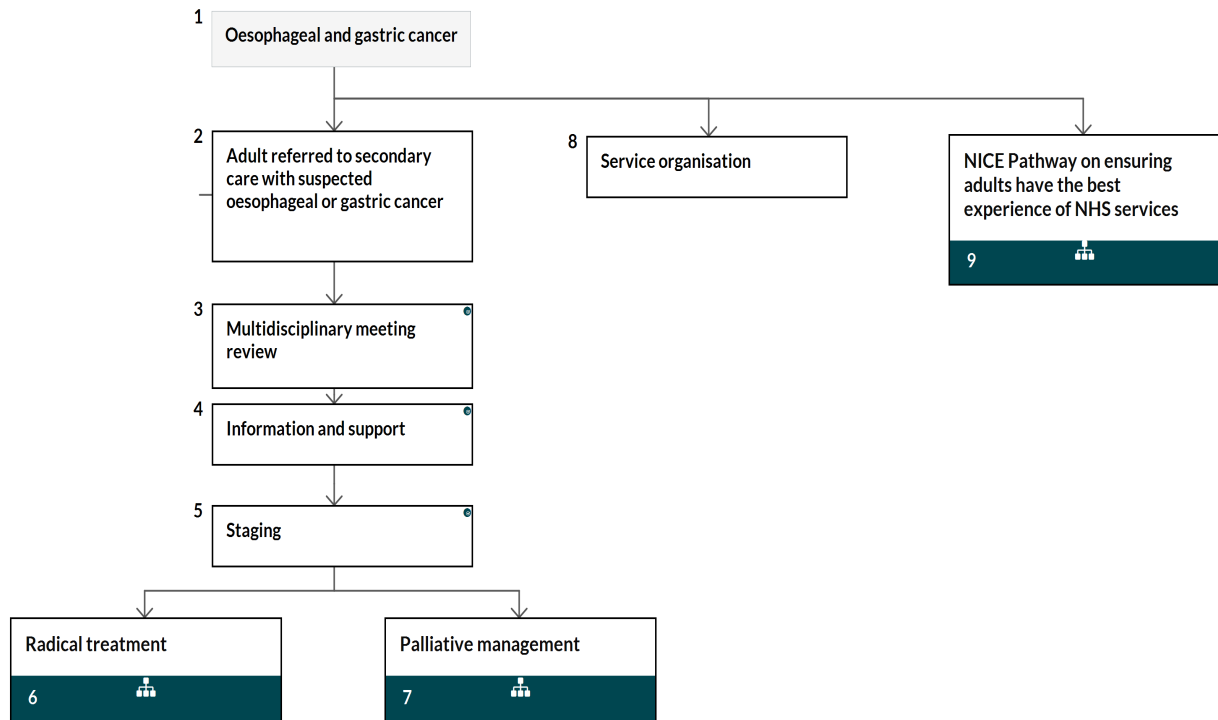
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/oesophageal-and-gastric-cancer>

NICE Pathway last updated: 27 January 2021

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



1 Oesophageal and gastric cancer

No additional information

2 Adult referred to secondary care with suspected oesophageal or gastric cancer

See [gastrointestinal tract \(upper\) cancers in the NICE Pathway on suspected cancer recognition and referral](#).

3 Multidisciplinary meeting review

Review the treatment of people with confirmed oesophago-gastric cancer in a multidisciplinary meeting that includes an oncologist and specialist radiologist with an interest in oesophago-gastric cancer.

Review the treatment of people with confirmed localised, non-metastatic oesophago-gastric cancer in a specialist oesophago-gastric cancer multidisciplinary meeting.

Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

2. Multidisciplinary review

4 Information and support

Offer all people with oesophago-gastric cancer access to an oesophago-gastric clinical nurse specialist through the person's multidisciplinary team.

Make sure the person with oesophago-gastric cancer is given information, in a format that is appropriate for them, to take away and review in their own time after you have spoken to them about their cancer and care.

Inform people with oesophago-gastric cancer about peer-to-peer local or national support groups for them to join if they wish.

Provide psychosocial support to the person with oesophago-gastric cancer and those important to them (as appropriate). Cover:

- the potential impact on family life, changing roles and relationships
- uncertainty about the disease course and prognosis
- concerns over heredity of cancer, recovery and recurrence
- where they can get further support.

Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

1. Clinical nurse specialist

5 Staging

Determining suitability for radical treatment after endoscopy and whole-body CT scan diagnosis

Histologically-confirmed oesophageal or gastro-oesophageal junctional cancer

Offer F-18 FDG PET-CT to people with oesophageal and gastro-oesophageal junctional tumours that are suitable for radical treatment (except for T1a tumours).

Do not offer endoscopic ultrasound only to distinguish between T2–T3 tumours in people with oesophageal and gastro-oesophageal junctional tumours.

Only offer endoscopic ultrasound to people with oesophageal and gastro-oesophageal junctional cancer when it will help guide ongoing management.

Only consider staging laparoscopy for people with oesophageal or gastro-oesophageal junctional cancer when it will help guide ongoing management.

Histologically-confirmed gastric cancer

Offer staging laparoscopy to all people with potentially curable gastric cancer.

Only consider endoscopic ultrasound for people with gastric cancer if it will help guide ongoing management.

Only consider F-18 FDG PET-CT in people with gastric cancer if metastatic disease is suspected and it will help guide ongoing management.

HER2 testing in metastatic oesophago-gastric adenocarcinoma

Offer HER2 testing to people with metastatic oesophago-gastric adenocarcinoma (see [trastuzumab for HER2-positive metastatic gastric cancer in first-line palliative chemotherapy](#)).

Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

3. Assessment after endoscopy and CT scan

6 Radical treatment

[See Oesophageal and gastric cancer / Radical treatment for people with oesophageal and gastric cancer](#)

7 Palliative management

[See Oesophageal and gastric cancer / Palliative management for people with oesophageal and gastric cancer](#)

8 Service organisation

NICE has published a [cancer service guideline on improving supportive and palliative care for adults with cancer](#).

9 NICE Pathway on ensuring adults have the best experience of NHS services

[See Patient experience in adult NHS services](#)

Sources

Oesophago-gastric cancer: assessment and management in adults (2018) NICE guideline NG83

Your responsibility

Guidelines

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Technology appraisals

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the

recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Medical technologies guidance, diagnostics guidance and interventional procedures guidance

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.