

## Brain Tumour Diagnosis: Outcomes in 120 Biopsy and Craniotomy Procedures

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### Background

Brain, central nervous system and intracranial tumours account for the 9th most common cancer type in the UK. At the time of the investigation, University Hospital Coventry & Warwickshire neurosurgical team outlined the standard of a 3-week period between pre-surgery multidisciplinary team (MDT) meeting and the date of the surgical procedure. To analyse whether the trust is meeting its targets relating to craniotomy and biopsy, a retrospective audit of procedures carried out between May 2018 and June 2019 was undertaken.

### Methods

Record identification took place via Clinical Results Reporting System, Refer A Patient and Senior Performance Analyst at the trust. Collated information included date of referral, date of MDT meeting, details of procedure, diagnosis, length of admission and mortality status as of January 2020. Patient data was anonymised, and trends were analysed.

### Results

120 patients were identified, with 38 biopsies and 82 craniotomies performed. The average length between MDT meeting and surgical procedure was 20.53(3-110) days, meeting the trust standard. Analysis of patient data revealed that data recording methods were not systematically uniform. Furthermore, a trend was identified where glioblastoma IV grade was the most common diagnosis at 41%, accounting for 62% of all deaths.

### Key Messages

The audit identified the need to standardise reporting strategies. Further audit cycle implementing a reporting checklist is hoping to better this outcome. In addition, the study enabled focus on glioblastoma, where early-stage identification remains a huge challenge to care. With increased understanding of regional incidence, this can benefit local referral protocols.

