# TRUSTWORTHY CLINICAL PRACTICE GUIDELINE

# Diagnosis and treatment of early colorectal cancer (stages I and II)

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#### Background

Colorectal cancer (CRC) is the third most commonly diagnosed cancer, and the fourth most common cause of cancer death worldwide.

# Objectives

This clinical practice guideline (CPG) is dealing with the best available diagnostic and therapeutic approaches in early colorectal cancer, which will be implemented in the Czech Republic health system.

### **Guideline** areas

- 1. Endoscopy: diagnosis of polyps and CRC
- 2. Endoscopy: therapy of CRC
- 3. Diagnostics: imaging methods
- 4. Preoperative Diagnostics and Surgery
- 5. Adjuvant and Neoadjuvant Therapy
- 6. Dispensarization after cancer treatment

#### Methods

This CPG was developed according to "Czech National Methodology for Clinical Practice Guidelines development," which is based on the GRADE approach. The primary inclusion and exclusion criteria of the guideline objectives were specified in format PICO. A search of existing guidelines was provided in 23 relevant guideline databases and sources using following keywords: colorectal cancer, colorectal neoplasm/s, colorectal carcinoma/s, colorectal tumor/s, colonic neoplasm/s, rectal neoplasm/s, diagnosis, treatment, guideline/s, recommendation/s. Critical appraisal of all relevant guidelines was done using standardized instrument AGREE 2.

#### Results

Based on the comprehensive search, CPGs retrieval, and critical appraisal, there was only one recent and high-quality CPG (see OVERALL GUIDELINE ASSESSMENT in Table 1) suitable for adaptation in Czech healthcare system using standardized instrument ADAPTE "S3-Leitlinie – Kolorektales Karzinom (021/0070L)". All members of CPG team and also multidisciplinary panel agreed to "adopt" this CPG.

**Table 1.** OVERALL GUIDELINE ASSESSMENT using AGREE 2 of "S3-Leit-linie – Kolorektales Karzinom (021/0070L)".

	RATE THE OVERALL QUALITY OF THIS GUIDELINE	I WOULD RECOMMEND THIS GUIDELINE FOR USE.
APPRAISER 1	6	YES
APPRAISER 2	6	YES
APPRAISER 3	6	YES
APPRAISER 4	7	YES
TOTAL	25	YES

Maximum possible score = 7 (strongly agree) x 1 (items) x 4 (appraisers) = 28 Minimum possible score = 1 (strongly disagree) x 1 (items) x 4 (appraisers) = 4 Total Score: 88 %

## Recommendations

Evidence-Based recommendations were formulated and presented using GRADE approach (see example in Table 2).

Consensus recommendations were based on a robust and transparently documented Delbi method in Report of German CPG.

**Table 2.** Example of Evidence-Based recommendation using GRADE.

2.7	EVIDENCE-BASED RECOMMENDATION	
STRONG RECOMMENDATION  ↑↑	In case of positive occult bleeding test or suspicion Colorectal neoplasia (clinical picture, imaging methods) should be performed with total colonoscopy.	
LEVEL OF EVIDENCE 2B	(23-27)	
	Strong consensus	

#### Conclusions

This clinical practice guideline was developed within the "Czech National Guidelines Project" and approved by professional community, relevant stakeholders, including Ministry of Health.

# Relevance to patients and consumers

In the Czech Republic, there are currently high differences in the quality of healthcare between regions and also types of healthcare facilities. Trustworthy developed guidelines for health professionals, patients, and consumers, will significantly decrease heterogeneity and improve quality of provided healthcare among healthcare facilities in the Czech Republic. Chairman of patient council as a part of Ministry of Health was involved in the process of this guideline development as a member of Guarantee committee within the "Czech National Guidelines Project".

#### Relevance to diversity

In the Czech Republic, if we would like to disseminate or implement new evidence of guidelines, we have to translate it into Czech language. So, in case of knowledge translation is crucial language translation. However, because of the worldwide diversity of the health systems, culture, socio-economic situation, etc., recommendations and evidence must be adopted to specificities of national and local diversities.

















