

Anastomotic Leak Following Oesophagectomy: Research Priorities from an International Delphi Consensus Study

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For which topic were research priorities identified?

anastomotic leak outcomes after oesophagectomy for cancer

In which location was the research priority setting conducted?

international

Why was it conducted at all?

Currently, strategies for prevention and management of anastomotic leaks vary across centres internationally, owing to a lack of high-quality RCTs. RCTs have focused on anastomotic techniques, omentoplasty, extent of lymphadenectomy, and surgical approaches. Even then, adoption of these techniques within clinical practice remains an ongoing debate because of lack of quality assurance systems. Hence, streamlining research efforts to reduce anastomotic leaks will help improve the current evidence base.

What was the objective?

to prioritize future research areas of unmet clinical need in randomized controlled trials to reduce anastomotic leaks

What was the outcome?

a ranking list of 10 research questions

How long did the research prioritization take?

No information provided.

Which methods were used to identify research priorities?

Delphi

How were the priorities for research identified exactly?

Step 1: steering committee proposed research topics across six domains, evidence-base mapping to identify relevant RCTs on interventions to reduce anastomotic leaks after oesophagectomy for cancer. Step 2: Delphi round 1: list of 27 research questions, participants asked to rate each research question in terms of priority for future research into anastomotic leak prevention and management and ability to recruit. Step 3: Delphi round 2: participants asked to re-rate questions

Which stakeholders took part?

International oesophageal surgeons. Delphi round 1: 192 participants. Delphi round 2: 137 participants.

How were stakeholders recruited?

Participants were surgeons from the OGAA.

Were stakeholders actively involved or did they just participate?

Stakeholders not only participated but were also actively involved in the research prioritization process: They were part of a steering group. The steering group consisted of OGAA committee, national leads, and engaged clinicians.