## **Annual Report 2021**

of the Certified Skin Cancer Centres

Audit year 2020 / Indicator year 2019





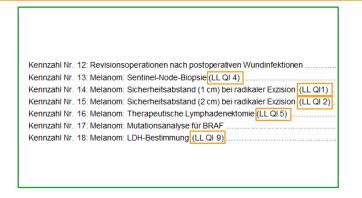


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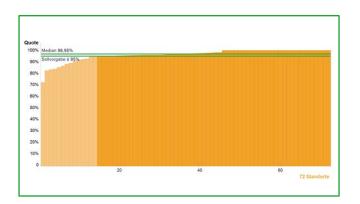
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### **General information**



	Kennzahlendefinition	Alle Standorte 2019		
		Median	Range	Patienten Gesamt
Zähler	Patienten des Nenners, die in der Tumorkonferenz vorgestellt wurden	29,5*	2 - 290	2869
Nenner	Melanom-Patienten mit Stadienshift/Rezidive und Primärfälle mit extrakutanen Melanomen	30*	2 - 299	3031
Quote	Sollvorgabe ≥ 95%	96,95%	72,09% - 100%	94,66%**



### Quality indicators of the guidelines (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 in the context of the guideline programme oncology. Further information: <a href="https://www.leitlinienprogramm-onkologie.de">www.leitlinienprogramm-onkologie.de</a>

### **Basic data indicator:**

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

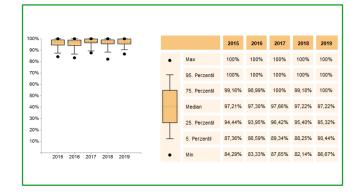
Under Patients Total, the percentage of the total number of patients treated in the centres according to the indicator is given.

## **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.

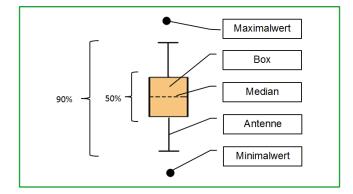
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### **General information**



### **Cohort development:**

Cohort development in the years 2015, 2016, 2017, 2018 and 2019 is presented in a box plot diagram.



### **Box plot:**

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

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## **Status of the certification system for Skin Cancer Centres 2020**

	31.12.2020	31.12.2019	31.12.2018	31.12.2017	31.12.2016	31.12.2015
Ongoing Procedures	3	3	4	2	5	7
Certified Centres	71	70	63	61	55	47
Certified Clinical Sites	73	70	63	61	55	47



### Clinical sites taken into account

	31.12.2020	31.12.2019	31.12.2018	31.12.2017	31.12.2016	31.12.2015
Clinical sites included in the Annual Report	72	67	26	54	52	44
entspricht	98.63%	95.71%	41.27%	88.52%	94.54%	93.61%
Primary cases total*	14,665	13,740	5,423	11,584	10,986	9,872
Primary cases per clinical site (mean)*	203.7	205.1	208.6	215	211.3	224.4
Primary cases per clinical site (median)*	181.5	176.0	163.5	179.5	183.5	190.5

<sup>\*</sup> The numbers refer to the malignant melanomas from the clinical sites included in the Annual Report

This annual report looks at the skin cancer centres certified in the certification system of the German Cancer Society. The basis for the diagrams in the annual report is the data sheet.

The annual report includes 72 of 73 certified center sites. Excluded is 1 sites that was certified for the first time in 2020 (data mapping of the complete calendar year is not mandatory for initial certifications). A total of 14,806 primary cases of malignant melanoma were treated at all 73 sites.

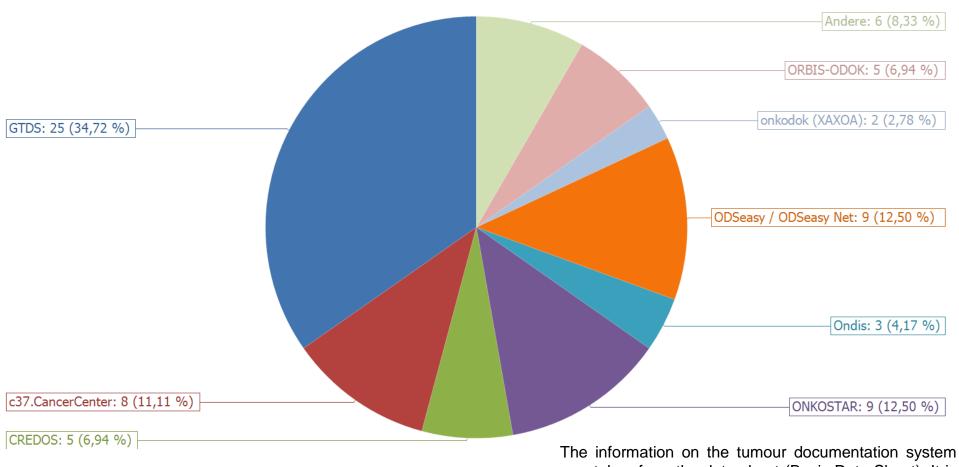
An up-to-date overview of all certified sites is available at www.oncomap.de.

The indicators published here refer to the key figure year 2019 and represent the evaluation basis for the audits conducted in 2020.





## **Tumour documentation systems in the Centre's clinical sites**



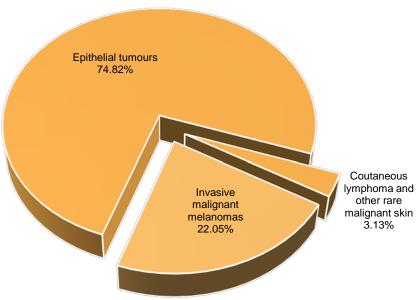
Andere = other

was taken from the data sheet (Basic Data Sheet). It is not possible to specify several systems. In many cases, support is provided by the cancer registries or there may be a direct link to the cancer registry via a specific tumor documentation system.

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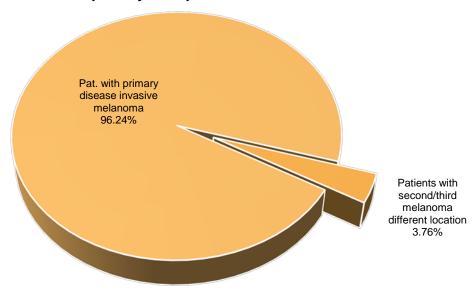
## **Basic data – Stage distribution primary cases**

## **Distribution primary case patients**



Invasive malignant melanomas	14,665 (22.05%)
Epithelial tumours (excl. <i>in situ</i> )	49,756 (74.82%)
Cutaneous lymphomas and other rare malignant skin tumours (angiosarcoma. Merkel, DFSP. etc.)	2,082 (3.13%)
Total	66,503 (100%)

### Distribution primary case patients Invasive melanoma



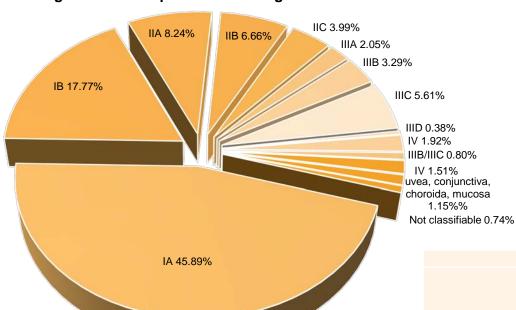
Patients with primary disease invasive melanoma	14,113 (96.24%)
Patients with second/third melanoma different location	552 (3.76%)
Total	14,665 (100%)





## **Basic data – Stage distribution primary cases**

## Stage distribution patients with stage shift/recurrence

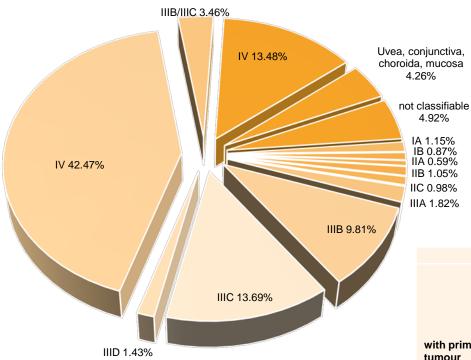


		Audit Year 2020	Audit Year 2019	Audit Year 2018	Audit Year 2017
	IA	6,730 (45.89%)	6.036 (43.93%)	2.410 (44,44%)	4,762 (41.11%)
	IB	2,606 (17,77%)	2,718 (19,78%)	1,059 (19,53%)	2,548 (22.00%)
	IIA	1,208 (8.24%)	1,117 (8.13%)	455 (8.39%)	1,006 (8.68%)
	IIB	976 (6.66%)	948 (6.90%)	370 (6.82%)	745 (6.43%)
With primary	IIC	585 (3.99%)	570 (4.15%)	226 (4.17%)	478 (4.13%)
tumour	IIIA	301 (2.05%)	291 (2.12%)	142 (2.62%)	425 (3.67%)
	IIIB	483 (3.29%)	409 (2.98%)	181 (3.34%)	512 (4.42%)
	IIIC	823 (5.61%)	763 (5.55%)	222 (4.09%)	465 (4.01%)
	IIID	55 (0.38%)	52 (0.38%)	24 (0.44%)	-
	IV	282 (1.92%)	262 (1.91%)	107 (1.97%)	326 (2.81%)
without	IIIB/IIIC	117 (0.80%)	113 (0.82%)	43 (0.79%)	51 (0.44%)
primary tumour	IV	222 (1.51%)	195 (1.42%)	87 (1.60%)	98 (0.85%)
	uvea, conjunctiva, choroida, mucosa	168 (1.15%)	181 (1.32%)	53 (0.98%)	107 (0.92%)
	not classifiable	109 (0.74%)	85 (0.62%)	44 (0.81%)	61 (0.53%)
	Total	14,665 (100%)	13,740 (100%)	5,423 (100%)	11,584 (100%)



## **Basic data – Stage distribution primary cases**

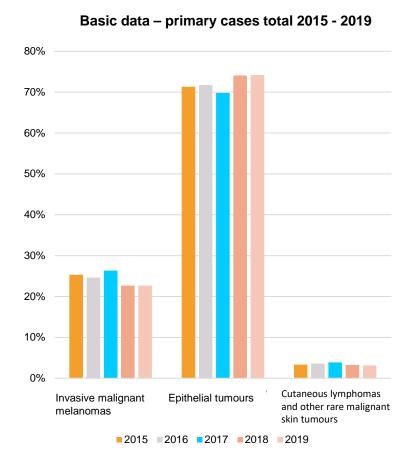
## Stage distribution for patients with stage shift/recurrences

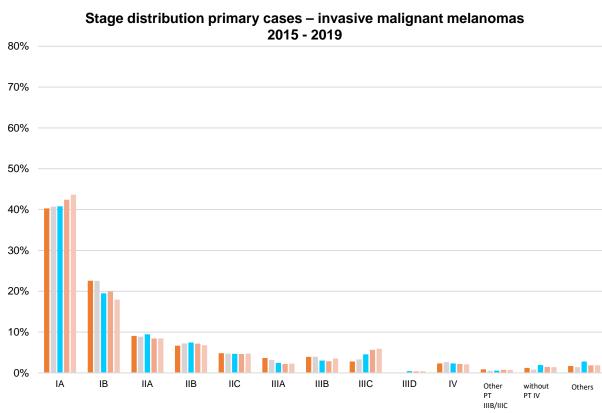


		Audit Year 2020	Audit Year 2019	Audit Year 2018	Audit Year 2017
	IA	33 (1.15%)	19 (0.67%)	9 (0.94%)	22 (0.94%)
	IB	25 (0.87%)	13 (0.46%)	7 (0.73%)	24 (1.02%)
	IIA	17 (0.59%)	18 (0.64%)	8 (0.83%)	34 (1.45%)
	IIB	30 (1.05%)	21 (0.74%)	10 (1.04%)	40 (1.70%)
with primary	IIC	28 (0.98%)	18 (0.64%)	4 (0.42%)	27 (1.15%)
tumour	IIIA	52 (1.82%)	43 (1.52%)	30 (3.13%)	40 (1.70%)
	IIIB	281 (9.81%)	220 (7.78%)	100 (10.43%)	209 (8.90%)
	IIIC	392 (13.69%)	318 (11.24%)	123 (12.83%)	272 (11.58%)
	IIID	41 (1.43%)	17 (0.60%)	13 (1.36%)	-
	IV	1,216 (42.47%)	1,574 (55.64%)	533 (55.58%)	1,326 (56.45%)
without primary	IIIB/IIIC	99 (3.46%)	127 (4.49%)	67 (6.99%)	87 (3.70%)
tumour	IV	386 (13.48%)	171 (6.04%)	48 (5.01%)	120 (5.11%)
	uvea, conjunctiva, choroida, mucosa	122 (4.26%)	110 (3.89%)	4 (0.42%)	65 (2.77%)
	not classifiable	141 (4.92%)	160 (5.66%)	3 (0.31%)	83 (3.53%)
	Total	2,863 (100%)	2,829 (100%)	959 (100%)	2,349 (100%)



## Basic data - Stage distribution primary cases 2015 - 2019





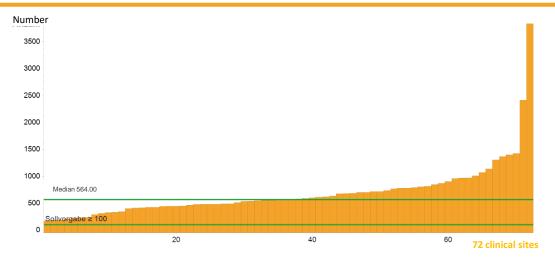
**2015 2016 2017 2018 2019** 



<sup>\*</sup> others: uvea, conjunctiva, choroida, mucosa / not classifiable

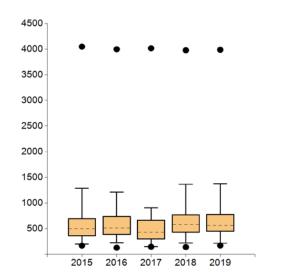


### 1.1. Epithelial tumours (excl. in situ, incl. inter alia basal cell carcinomas, squamous cell carcinomas)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Number	Primary cases (Def. see 1.1.3)	564	173 – 3,987	49,756
	Target value ≥ 100			

Sollvorgabe = target value





Clinical sites with evaluable data		Clinical sites r the target valu	•
Number %		Number	%
72	100.00%	72	100.00%

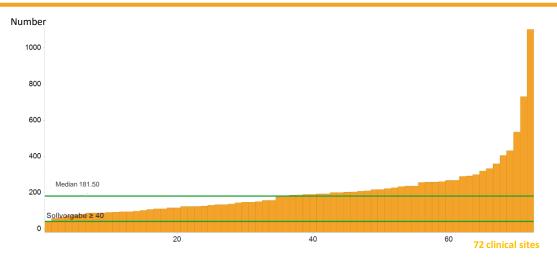
#### Notes:

As in previous years, all centres clearly achieved the target of at least 100 primary cases with epithelial tumours. The total number of patients treated in the centres has increased by a further 3,307 primary cases following a sharp rise in the previous year (due to the complete changeover to the new TNM classification at that time).



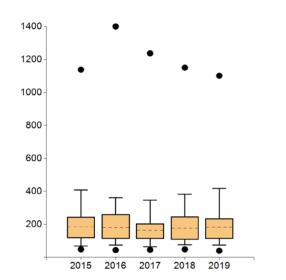


## 1.2. Invasive malignant melanomas (incl. malignant uveal. conjunctival. choroidal and mucosal melanomas)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Number	Primary cases (Def. see 1.1.3)	181.5	40 - 1101	14,665
	Target value ≥ 40			

Sollvorgabe = target value





Clinical sites with evaluable data		Clinical sites n	•
Number %		Number	%
72	100.00%	72	100.00%

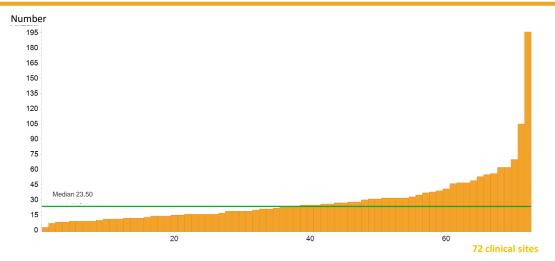
#### Notes:

Also for the minimum number of primary cases with malignant melanoma to be treated, all centres achieve the required minimum number of cases of 40. The median has increased compared to the previous year, the total number of primary cases increases by 925 (6.7%) to now 14,665 primary cases.



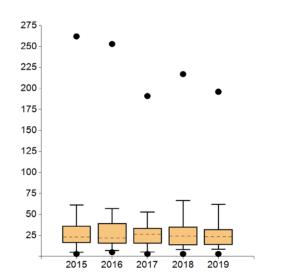


## 1.3. Cutaneous lymphoma and other rare, malignant skin tumours (angiosarcoma, Merkel cell carcinoma, etc.)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Number	Primary cases (Def. see 1.1.3)	23.5	3 - 196	2,082
	No target value			

### Sollvorgabe = target value





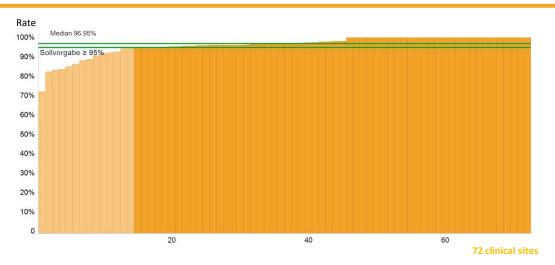
Clinical sites with evaluable data		Clinical sites r the target valu	•
Number	%	Number	%
72	100.00%		

#### Notes:

The median of other skin tumors treated in the skin cancer centers remains approximately constant. No target value exists. The range between the individual centers continues to be very wide, ranging from 3 to 196 primary cases. The total number of primary cases across all centers has increased by 58 primary cases (+2.9%).

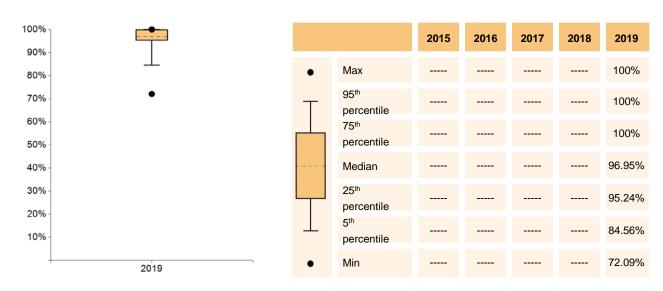
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## 2. Melanoma: Discussion of cases (GL Melanoma QI 3)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Patients who were presented in the tumour board	29.5*	2 - 290	2,869
Denomintor	Patients with stage shift / recurrence and primary cases with extracutaneous melanoma	30*	2 - 299	3,031
Rate	Target value ≥ 95%	96.95%	72.09% - 100%	94.66%**

### Sollvorgabe = target value



Clinical sites with evaluable data		Clinical sites n the target valu	•
Number	%	Number	%
72	100.00%	58	80.56%

#### Notes:

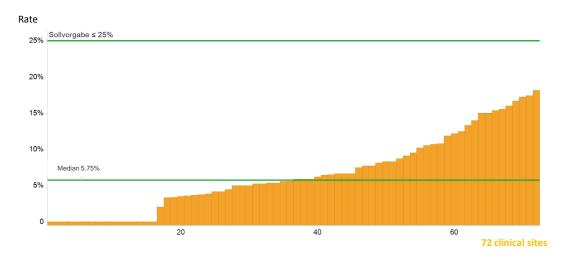
Due to the adjustment of the denominator (previously: only newly occurred distant metastases), a comparison with previous years is not possible. About 4 out of 5 centres succeed in presenting at least 95% of melanoma patients with stage shift/recurrence or primary cases with extracutaneous melanoma in the tumour board. The remaining 14 centres justified this as follows: Refusal of any further treatment, primary melanomas of the eye without metastasis, local or in situ recurrence or death before presentation to the tumour board. In the audits, consistent presentation of all extracutaneous melanomas and recurrences was encouraged (also in the case of refusal of further treatment), e.g. by developing corresponding SOPs.



<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

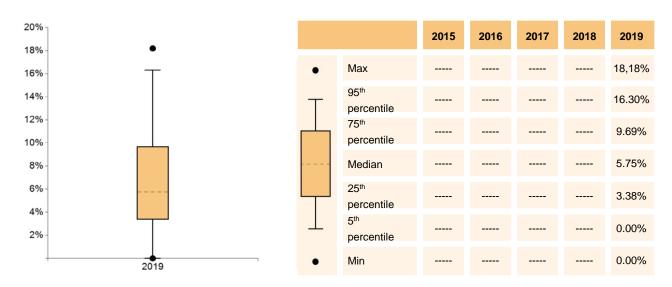
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

## 3. Melanoma: Therapy deviation from recommendation tumour board



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Patients who were involved in a therapy deviation	2*	0 - 18	179
Denomintor	Patients with stage shift / recurrence and primary cases with extracutaneous melanoma which were presented in the tumour board (= numerator Indicator 2)	29.5*	2 - 290	2,869
Rate	Target value ≤ 25%	5.75%	0.00% - 18.18%	6.24%**

### Sollvorgabe = target value



Clinical sites with evaluable data		Clinical sites n the target value	•
Number	%	Number	%
72	100.00%	72	100.00%

#### Notes

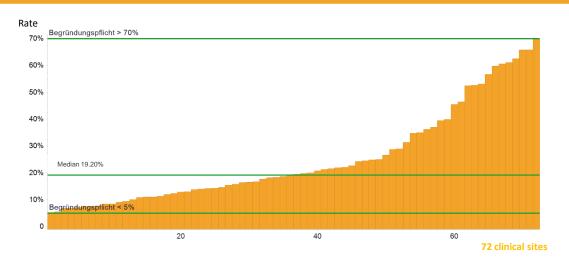
In analogy to the changes in indicator 2, no comparison with the previous year is possible due to the changed patient collective in the denominator. As in the previous year, all centres met the target, 16 of them did not deviate from the tumour board recommendation in any case. The most frequent reason for a deviation from the therapy recommendation was the patient's wish.



<sup>\*</sup> The indication of the median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

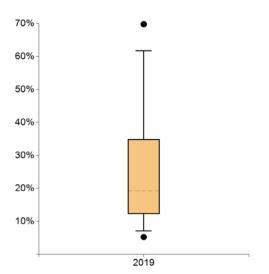
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

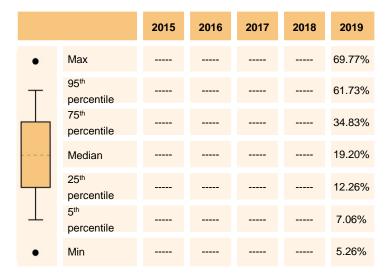
## 4. Melanoma: Psycho-oncological care



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Patients that received psycho-oncological counselling in an inpatient or outpatient setting (session ≥ 25 Min)	40*	6 - 330	4,240
Denomintor	Primary cases ( = Indicator 1.2) + patients with stage shift / recurrence (=basic data R34)	210.5*	43 – 1,282	17,528
Rate	Justification requirement*** <5% and >70%	19.20%	5,26% - 69.77%	24.19%**

### Sollvorgabe = target value Begründungspflicht = Justification requirement





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

### Notes:

Due to the new formulation of the denominator (previously: primary cases + new distant metastases), no comparison with the previous year is possible, even though the indicator itself has been established for years. All centres are within the plausibility limits, although the spread of care rates is high. On average, almost 25% of all patients with initial diagnosis and stage shift/recurrence of melanoma receive psycho-oncological care.

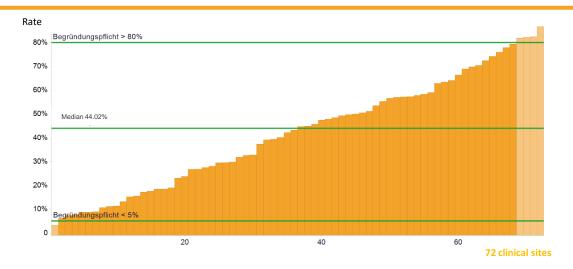
<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

<sup>\*\*\*</sup> In the case of values outside the plausibility limit(s), the centres are obliged to provide justification.

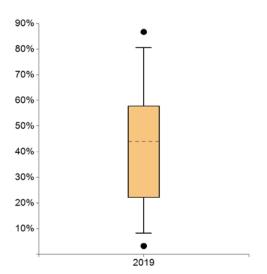
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## 5. Melanoma: Counselling social services (GL Melnaoma QI 6)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Patients which received social services counselling in an inpatient or outpatient setting	76*	2 - 430	6,862
Denomintor	Primary cases ( = Indicator 1.2) + patients with stage shift / recurrence (=basic data R34)	210.5*	43 – 1,282	17,528
Rate	Justification requirement*** <5% and >80%	44.02%	3.28% - 86.67%	39.15%**

Sollvorgabe = target value Begründungspflicht = Justification requirement





Clinical sites with evaluable data		Clinical sites n the target value	•
Number	%	Number	%
72	100.00%	67	93.06%

### Notes:

The denominator was adjusted in the same way as for indicator 4. 5 centres were outside the plausibility limits in the audit year 2020, with only 1 centre falling below the quota of 5%. This centre is located in Switzerland, where other responsibilities for social counselling apply. In addition, it attributed its own result to a high number of outpatients with non-serious illnesses, but at the same time established an action plan to increase the counselling rate.



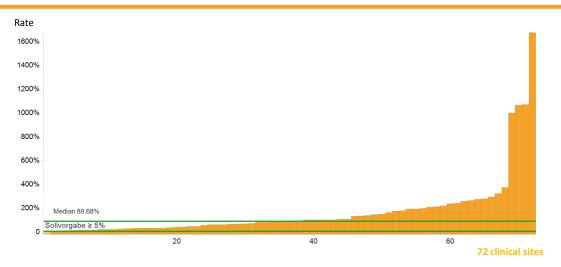
<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

<sup>\*\*\*</sup> In the case of values outside the plausibility limit(s), the centres are obliged to provide justification.

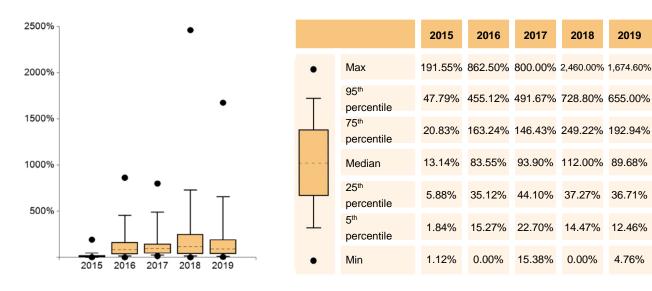
## Certification

### 6. Melanoma: Share of study patients



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Patients with a melanoma who were included in a study with an ethical vote	21.5*	1 – 1,055	4,034
Denomintor	Primary cases with a melanoma stages III - IV	27.5*	6 - 160	2,347
Rate	Target value ≥ 5%	89.68%	4.76% - 1,674.60%	171.88%**

### Sollvorgabe = target value



Clinical sites with evaluable data		Clinical sites n the target valu	•
Number	%	Number	%
72	100.00%	71	98.61%

2017

44.10%

15.38%

2018

93.90% 112.00% 89.68%

14.47%

0.00%

2019

36.71%

12.46%

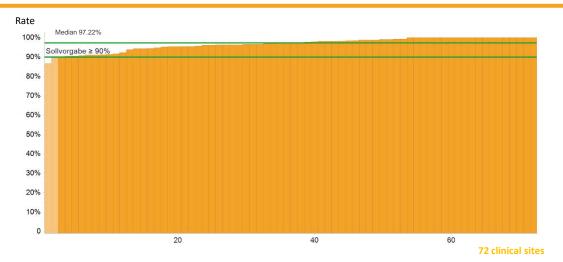
4.76%

The enormous dispersion of the previous year, which was caused by a high number of register and biobank studies, has decreased somewhat. Only 1 centre fell just short of the target. This centre reported problems in identifying suitable patients or winning them over for study participation. As a result, it agreed on measures to improve the clarification and feasibility of studies in the audit with the subject matter expert.

<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

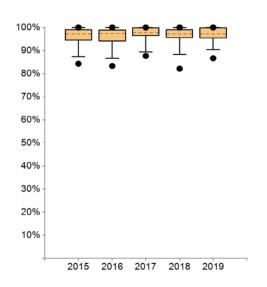
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

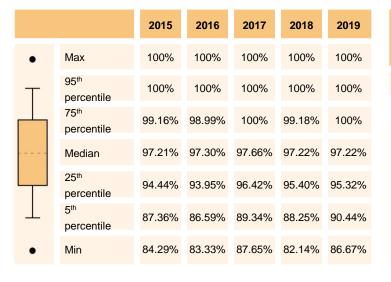
### 7. Sentinel node biopsy (SNB)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	SNB surgeries with sentinel lymph node confirmed intraoperatively	72.5*	21 - 297	6,264
Denomintor	SNB surgeries (multiple mentioning per patient possible)	77*	23 - 315	6,478
Rate	Target value ≥ 90%	97.22%	86.67% - 100%	96.70%**

### Sollvorgabe = target value





Clinical sites with evaluable data		Clinical sites n	•
Number	%	Number	%
72	100.00%	70	97.22%

#### Notes:

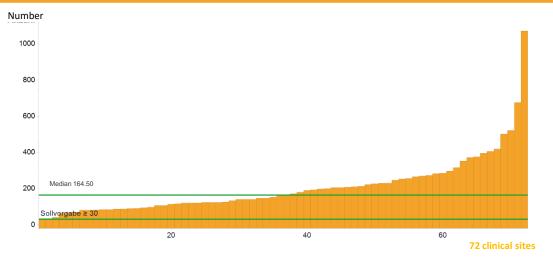
70 of 72 centres actually detected sentinel lymph nodes in at least 90% of SNB operations. The remaining two centres failed to meet the target due to a single case. A systematic error could not be identified in the audits. Overall, compliance with this indicator is at a consistently high level.



<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

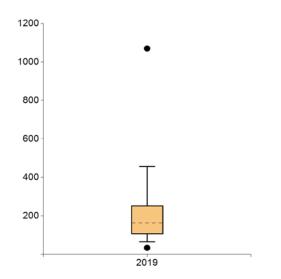
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

## 8. Surgical interventions with safety margin defined in the guideline



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Number	Surgical interventions with safety margin in primary cases (no interventions with micrographically controlled surgery) (= malignant melanomas, Merkel cell carcinomas, sarcomas and other rare malignant skin tumours	164.5	34 – 1,070	14,786
	Target value ≥ 30			

### Sollvorgabe = target value





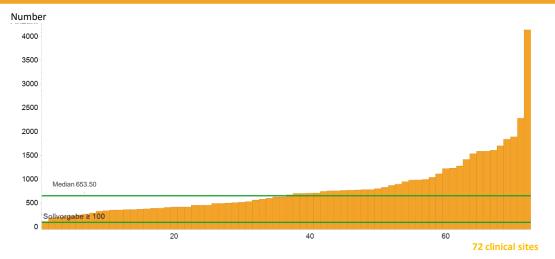
Clinical sites with evaluable data		Clinical sites r the target valu	•
Number	%	Number	%
72	100.00%	72	100,00%

#### Notes

From the indicator year 2019, this indicator refers to primary cases with melanoma and rare skin tumours and no longer to all operations performed with a safety margin for these tumour entities. Therefore, the data of the pre-indicator year are not listed here. Despite the change in the indicator , the total number of interventions has increased by 440. All centres fulfil the requirement of at least 30 interventions. This was already the case in the previous year.

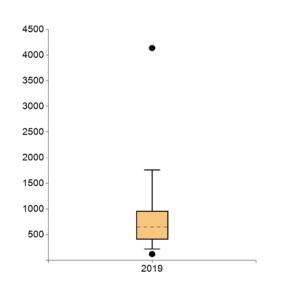


## 9. Surgical interventions with histological margin control



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Number	Surgical interventions with histological margin control in primary cases (no partial biopsies, no interventions with safety margin) (= epithelial tumours)	653.5	122 – 4,140	57,094
	Target value ≥ 100			

### Sollvorgabe = target value





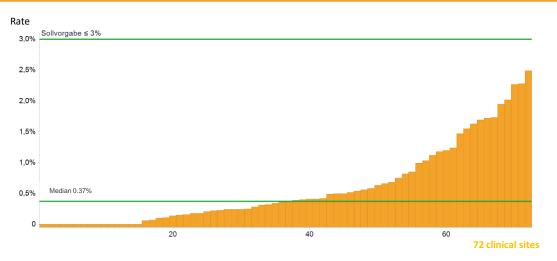
Clinical sites with evaluable data		Clinical sites n	•
Number	%	Number	%
72	100.00%	72	100.00%

#### Notes:

Since the indicator year 2019 the indicator only refers to operations for epithelial tumours for primary cases of the centre. Therefore comparison with the previous indicator years is not possible in this evaluation. The total number of procedures performed at all centres has therefore fallen slightly (by 5.18%). All centres achieved the target without any problems.

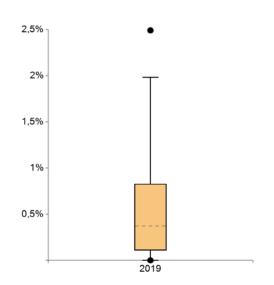


## 10. Revision surgery after secondary bleeding



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Revision surgery (OPS: 5- 983) because of intra- or post-operative secondary bleeding (T81.0) after surgeries of the denominator	3*	0 - 47	454
Denominto r	Sum numerators Indicators 8 + 9	843*	184 – 5,210	71,880
Rate	Target value ≤ 3%	0.37%	0.00% - 2.49%	0.63%**

### Sollvorgabe = target value





Clinical sites with evaluable data		Clinical sites n	•
Number	%	Number	%
72	100.00%	72	100.00%

### Notes:

Due to the changes in the populations of indicators 8 and 9, comparability with previous years is not possible. Nevertheless, the indicator is consistently well fulfilled by the centres. Not a single centre failed to meet the target of a maximum of 3% post-operative haemorrhages requiring intervention. 15 centres did not have a single post-operative haemorrhage of this kind.

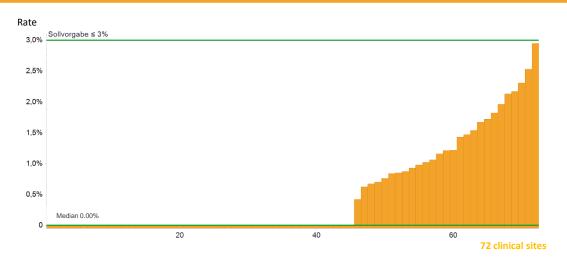


<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

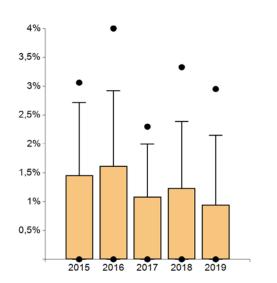


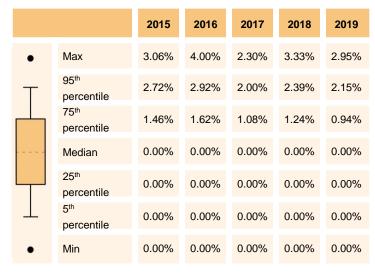
### 11. Revision surgery in the case of secondary bleeding after SNB and LAD



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Revision surgery (OPS: 5-893) because of post- operative secondary bleeding (T81.0) after surgeries of the denominator	0*	0 - 12	49
Denomintor	SNB surgeries ( = denominator indicator 7) + therapeutic LADs for stages III (multiple mentioning per patient possible)	82.5*	23 - 428	7,540
Rate	Target value ≤ 3%	0.00%	0.00% - 2.95%	0.65%**

### Sollvorgabe = target value





Clinical sites with evaluable data		Clinical sites r the target valu	•
Number	%	Number	%
72	100.00%	72	100.00%

#### Notes:

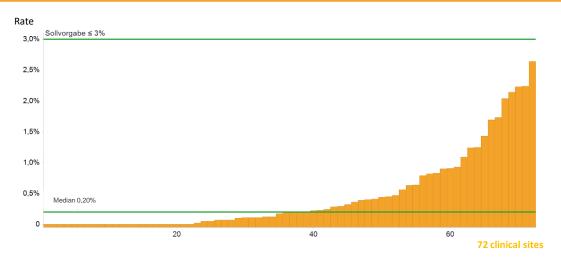
In analogy to indicator 10, post-operative bleeding here refers to SNB operations and lymphadenectomies. All centres are within the target, whereby 45 centres did not record any post-operative bleeding according to the numerator definition. The trend in the development of results over time continues to be positive overall.



<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

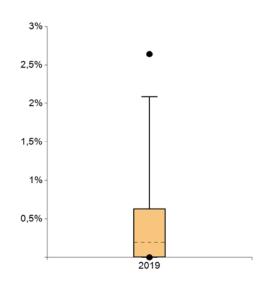
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

### 12. Revision surgery after post-operative wound infections



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Revision surgery (OPS: 5-893) because of post- operative wound infections (T81.4) after surgeries of the denominator	1.5*	0 - 46	295
Denomintor	Sum numerators Indicators 8 + 9	843*	184 - 5210	71,880
Rate	Target value ≤ 3%	0.20%	0.00% - 2.64%	0.41%**

### Sollvorgabe = target value





Clinical sites with evaluable data		Clinical sites n	•
Number	%	Number	%
72	100.00%	72	100.00%

### Notes:

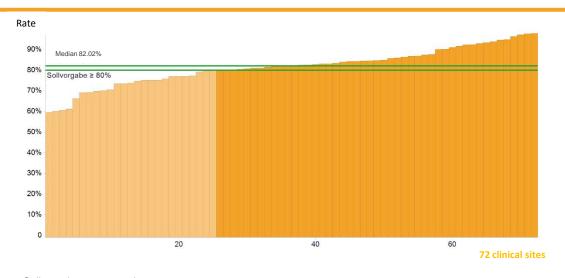
The previous year's comparison is not applicable for this indicator due to the changes in indicator 8 and 9, which now only refers to primary cases and to wound infections requiring revision (previously: presence of a wound infection). Therefore, the number of potential events relevant for the numerator decreases in the indicator year 2019. The target is met by all centres. 22 centres did not record any events in the numerator. In the previous year, 5 centres failed to meet the target.

<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

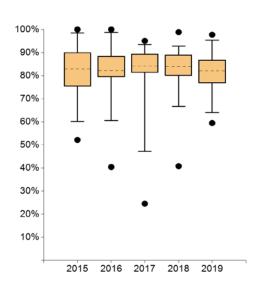
## 13. Melanoma: Sentinel node biopsy (GL Melanoma QI 4)

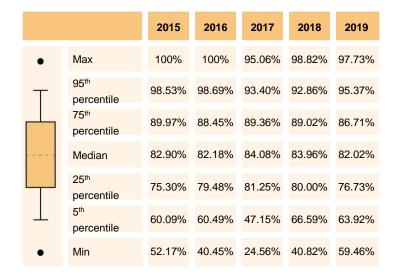




	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Primary cases of the denominator where SNB is carried out	49*	8 - 235	4,513
Denomintor	Primary cases cutaneous melanoma with a tumour density ≥ pT2a and no sign of locoregional or remote metastasis (cN0, cM0)	64.5*	10 - 283	5,535
Rate	Target value ≥ 80%	82.02%	59.46% - 97.73%	81.54%**

### Sollvorgabe = target value





Clinical sites with evaluable data		Clinical sites n the target value	•
Number	%	Number	%
72	100.00%	47	65.28%

#### Notes:

25 centres (previous year: 16 out of 67) fail to meet the target, although the values at the lower end of the scale have improved. This guideline QI measures the correct indication for an SNB. The centres below the target explained their SNB rates primarily by high age, comorbidities and/or patient refusal. However, non-detectable sentinel lymph nodes, metastasised second malignancies or externally treated patients were also causal factors. This could be plausibilised in the audits.

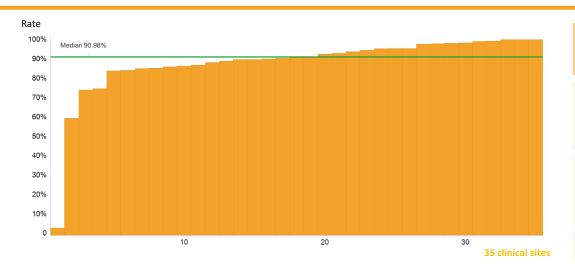


<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

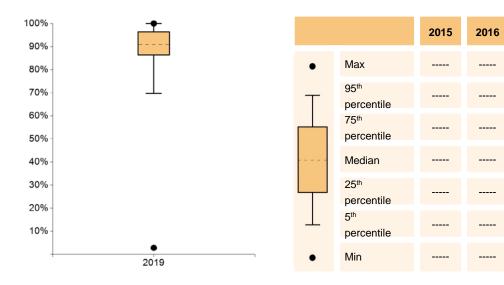
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.



## 14. Melanoma: Safety margin (1 cm) in the case of radical excision (GL Melanoma QI 1)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Primary cases with radical excision with a safety margin of 1 cm	95*	2 - 609	3,841
Denomintor	Primary cases cutaneous melonoma with a curative radical excision in case of a tumour density ≤ 2 mm	97*	30 - 701	4,325
Rate	No target value	90.98%	2.82% - 100%	88.81%**



Clinical sites with evaluable data		Clinical sites r the target valu	
Number	%	Number	%
35	48.61%		

#### Notes:

2017

2018

----

2019

100%

100%

96.56%

90.98%

86.15%

69.64%

2.82%

This indicator (as well as the following indicators 15 to 18), which is derived from the S3 guideline on melanoma, was collected for the first time and thus voluntarily in the indicator year 2019. 35 centres collected the safety margin for curative radical excision of cutaneous melanomas. For melanomas with a tumour thickness  $\leq$  2 mm, all centres but one achieved a rate of 59.38 to 100% with a safety margin of 1 cm. One centre stood out with a rate of 2.82%. As the survey was voluntary, nothing is known about the reasons for this.

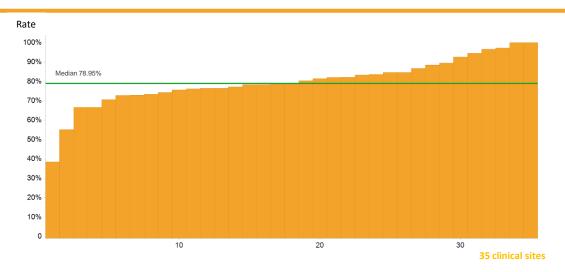


<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

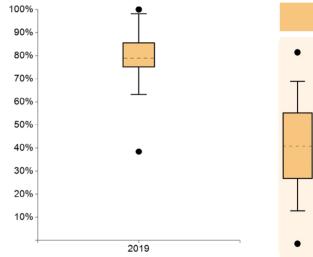
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

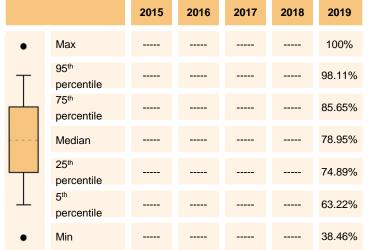


## 15. Melanoma: Safety margin (2 cm) in the case of radical excision (GL Melanoma QI 2)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Primary cases o with radical excision with a safety margin of 2 cm	26*	5 - 215	1,262
Denomintor	Primary cases cutaneous melonoma with a curative radical excision in case of a tumour density > 2 mm	34*	13 - 243	1,549
Rate	No target value	78.95%	38.46% - 100%	81.47%**





Clinical sites with evaluable data		Clinical sites n	•
Number	%	Number	%
35	48.61%		

### Notes:

In analogy to indicator 14, melanomas with a tumour thickness of > 2mm and a safety distance of 2 cm were considered here. However, the range of the rates is somewhat smaller: Here, too, one of the centres stands out with a rate of 38.46%. This is a different centre from the one that has the lowest rate for ratio 14. Here, too, more information on the background will be available in the future with the mandatory survey in the indicator year 2020.

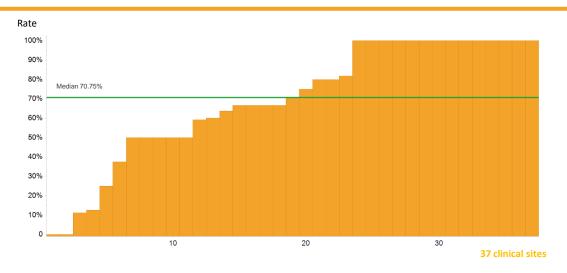


<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

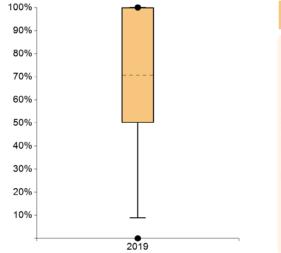
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

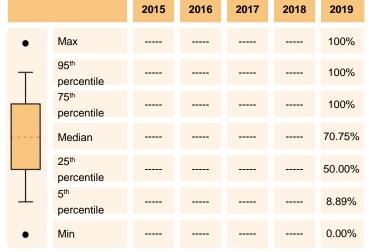
## 16. Melanoma: Lymphadenectomy (GL Melanoma QI 5)





	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Primary cases with therapeutic LAD	2*	0 - 75	197
Denomintor	Primary cases with melanoma with each pT and c/pN1b or c/pN2b or c/pN3b and M0	4*	1 - 106	388
Rate	No target value	70.75%	0.00% - 100%	50.77%**





Clinical sites with evaluable data		Clinical sites r the target valu	
Number	%	Number	%
37	51.39%		

#### Notes:

This indicator, which is still optional in the indicator year 2019, addresses the indication for therapeutic lymphadenectomy. The 37 centres that voluntarily collected this indicator show a wide range from 0% to 100%. 14 centres achieved a rate of 100%, 2 indicated 0% (one of them again with only 3 patients in the denominator). In the first year of the survey, difficulties in understanding on the part of the centres cannot be ruled out. More valid figures are expected to be available in the next annual report.

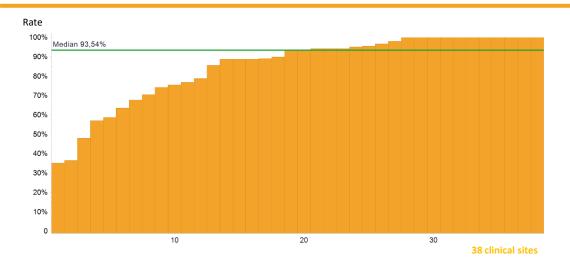


<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

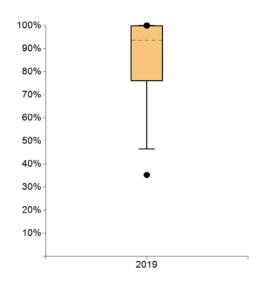
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

## DKG GERMAN CANCER SOCIETY Certification

### 17. Melanoma: Mutation analysis for BRAF



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Primary cases with therapeutic LAD	20.5*	6 - 119	1,035
Denomintor	Primary cases with melanoma with each pT and c/pN1b or c/pN2b or c/pN3b and M0	25*	9 - 160	1,213
Rate	No target value	93.54%	35.29% - 100%	85.33%**





Clinical sites with evaluable data		Clinical sites r the target valu	
Number	%	Number	%
38	52.78%		

### Notes:

This indicator is a modified quality indicator of the guideline that refers to BRAF mutation analysis in cutaneous melanoma from stage III. The 38 centres voluntarily participating in data collection screened a total of 85.33% of eligible patients for BRAF. While 3 centres were below 50%, 26 centres managed a rate of over 80%.

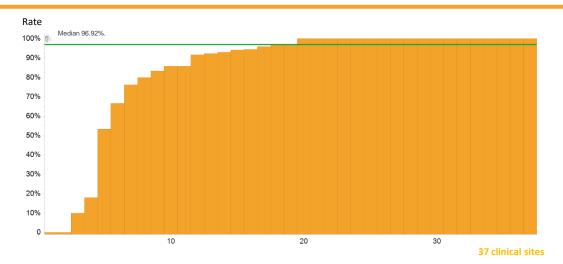


<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

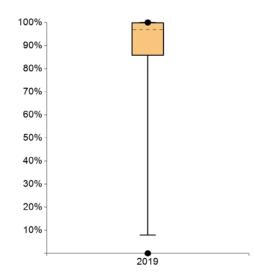
<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

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### 18. Melanoma: LDH determination (GL Melanoma QI 9)



	Indicator definition	All Clinical sites 2019		
		Median	Range	Patients total
Numerator	Patients with LDH determination	22*	0 - 79	851
Denomintor	Primary cases and patients with a stage shift/recurrence with melanoma developing into stage IV	24*	3 - 79	1,028
Rate	No target	96.92%	0.00% - 100%	82.78%**





Clinical sites with evaluable data		Clinical sites n the target valu	
Number	%	Number	%
37	51.39%		

#### Notes:

37 centres, i.e. a good half, voluntarily collected the new key figure for LDH determination in stage IV melanoma in the indicator year 2019. Overall, the LDH determination was carried out in 82.78% of the relevant patients. While 30 centres achieved at least 80% at the first attempt, 4 centres remained below 50%. As with the other new indicators, more valid results, including reasons for missing the target, can be expected with the mandatory survey from the indicator year 2020.



<sup>\*</sup> The median for numerator and denominator does not refer to an existing centre, but reflects the median of all numerators of the cohort and the median of all denominators of the cohort.

<sup>\*\*</sup> Percentage of total patients treated in centres according to the indicator.

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