IMPROVING CA19-9 MONITORING FOR PATIENTS ON SYSTEMIC ANTI-CANCER THERAPIES FOR PANCREATIC AND BILIARY TRACT CANCER IN A LOCAL HOSPITAL TRUST

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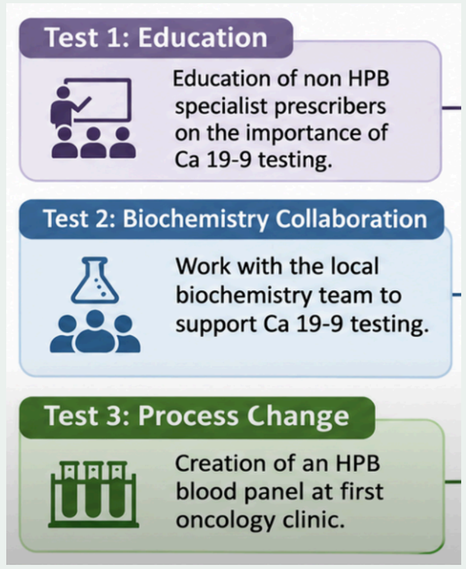
INTRODUCTION

- Pancreatic cancer is the **sixth leading cause of cancer-related deaths** worldwide, with biliary tract cancers having **a less than 20% 5-year survival rate worldwide**
- **Ca 19-9** is a useful biomarker for tracking tumour progression and monitoring treatment response in these cancer sites
- We wanted to evaluate if Ca 19-9 is being monitored for patients being treated for **pancreato-biliary cancers with systemic anti-cancer therapy (SACT) as per protocol (APP) in a local hospital trust** and aim to implement change to improve monitoring of this biomarker

METHODOLOGY

- We analysed all patients treated at the **Gloucestershire Cancer Centre (GCC)** with **Pancreatic cancer and Biliary Tract cancer** who received their first cycle of **systemic anti-cancer therapy (SACT)** from **30th June 2025 – 30th September 2025 using electronic patient records**
- Our protocol guidelines were based on local trust guidelines, which state that a **baseline Ca 19-9 should be checked within 4 weeks of first cycle of SACT and Ca 19-9 checked every 4-6 weeks whilst on SACT.**
- We excluded those patients receiving **adjuvant treatment** or those that had a **normal baseline Ca19-9** from analysis of whether Ca 19-9 checked APP whilst on SACT, as we recognised there may be a clinical reason to not to check this APP
- We implemented **tests of change** (see Fig 1.)
- Re-audit of patients post interventions from **1st August 2026 - 30th September 2026**

FIG 1. TESTS OF CHANGE



DISCUSSION & CONCLUSIONS

We found that our interventions including:

- **Education of non HPB specialist prescribers** on importance of Ca 19-9 testing
- Creation of **HPB blood panel** at first oncology clinic

resulted in **significant improvement in Ca 19-9 testing at our centre**, subsequently enhancing patient care.

We feel these tests of change have driven sustainable improvements and hope that this study can provide a framework for improving biomarker monitoring for other tumour sites and at other centres

RESULTS - DEMOGRAPHICS

Demographics	Baseline analysis	1st Cycle
Time frame	30th June 2025 – 30th September 2025	1st August 2026 - 30th September 2026
Number of patients	17	13
Age range	50-81	55-80
SACT indication	Metastatic pancreas (41%)	Metastatic pancreas (46%)
Most common SACT	Modified FOLFIRINOX (23%)	Modified FOLFIRINOX (39%)

- We found after analysing baseline data that **47% of patients had a baseline Ca 19-9 Checked and only 2 (18%) of patients had Ca 19-9 Checked as per protocol**
- After implementing our tests of change we found that **100% of patients had a baseline Ca 19-9 checked within 4 weeks of starting 1st line SACT**
- We found 12 patients eligible for subsequent analysis and of these patients **100% of patients had Ca 19-9 checked APP** (see Fig 2)

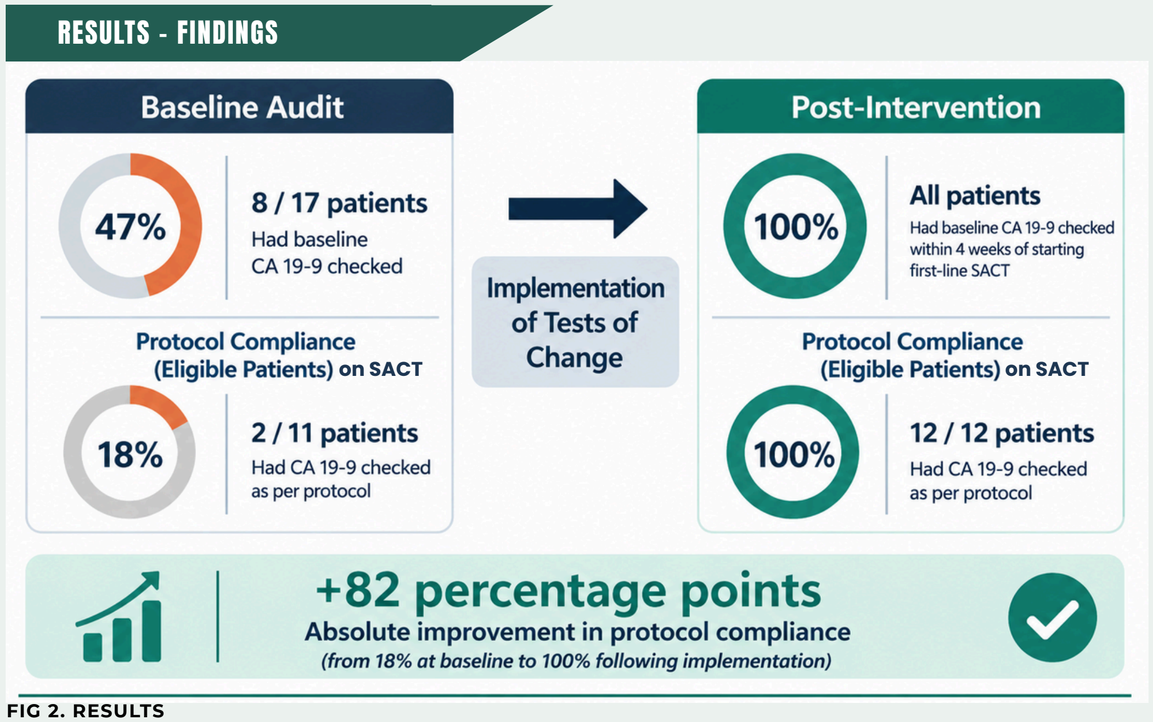


FIG 2. RESULTS