

ENETS Consensus Guidelines for the Standard of Care in Neuroendocrine Tumors

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The European Neuroendocrine Tumor Society (ENETS) held, in 2005 and 2006, with leading experts in the field, two consecutive consensus conferences resulting in the publication of a highly successful revision of previous guidelines on the clinical management of neuroendocrine tumors (NET) of the digestive tract. As a consequence of these meetings, it became clear that clinical guidelines by themselves give a good overview dealing with NET patients. However, for daily clinical practice some suggestions for the implementation of these consensus guidelines were clearly desirable.

Based on the work already accomplished, the same group of experts convened to develop recommendations for technical and practical details necessary for implementing the consensus guidelines. This third consensus conference was held in Palma de Mallorca, Spain, from November 29 until December 1, 2007.

The Working Format

Fifty experts active in the field of digestive endocrine tumors from 18 countries attended the Mallorca conference. Attendees were invited on the basis of their acumen (proven publication track and clinical practice) in the NET field. The attendees presented all medical speciali-

ties involved in managing patients with gastroenteropancreatic neuroendocrine tumors. They were assigned to four working groups according to their specific clinical experience: Pathology (5), Biochemistry (3), Radiology (4), Nuclear Medicine (3), Surgery (5), Chemotherapy (6), Biotherapy (4), Echocardiography (4) and Follow-Up and Clinical Documentation (3). The complete list is provided at the end of this commentary, as well as at the end of each of the following papers.

The conference was divided into sessions devoted to the specific topics. Ursula Plöckinger prepared a working booklet in advance, asking the basic questions and giving suggestions to each of the possible procedures. She also provided references. The booklet served as a basic structure for the discussion. All questions had to be answered, allowing for more but not less input as already found in the working booklet. The booklet was provided to all the conference participants.

The work was organized such that after a short introduction and presentation of the topic in a plenary session, each working group gathered separately to discuss group-specific questions. A maximum of three working group sessions were organized to run in parallel. The members of the consensus conference were assigned to take part in one of the three parallel sessions.

Each plenary session had a chairperson responsible for the presentation of the contents of the working booklet and for conducting the general assembly toward consensus statements.

Each working group had a group leader responsible for presenting the specific questions and for preparing the group statements for the general assembly. To expedite discussion, chairmen and group leaders received the part of the booklet relevant to their specific session prior to the conference. Once agreement was reached within each group, consensus statements were discussed and approved or rejected by all participants gathered in the general assembly. This procedure was followed for all 11 sessions. The program, the booklet with specific queries and the original files will be made available on the ENETS site (www.neuroendocrine.net).

Following this, the organizing committee defined and approved a specific protocol establishing the design of each paper, the definition of tasks for authors, the general authorship policy and the assignment of different tasks to participants either responsible or most involved in different sessions. The papers are designed to expand the previously published consensus guidelines in giving a 'hands-on' approach. For any technical requirements, statements are provided for the minimal and optimal technical standard required, thus giving a wide range of opportunity to provide 'state-of-the-art' management according to local facilities. The authors were requested to follow the common format used in the working booklet. This form was flexible enough to accommodate different subjects and different authors' views, however, not all papers contain an identical structure. As these are practical guidelines, the papers give a short introduction referring to basic technical requirements, followed by recommendations on how best to use the techniques available. We hope that the papers deliver this message in a practical and user-friendly way.

Achievements and Final Remarks

The following papers are the logical consequence of the first and second ENETS consensus conferences held in Frascati, Italy, in 2005 and 2006 (see *Neuroendocrinology* 2006(suppl 84):151–216 and *Neuroendocrinology* 2008;87:1–63).

A great effort was made by the Society and by all participants, equally and generously devoting their time, experience and enthusiasm to building the following consensus guidelines. We thank the Society's organizational

staff for this long-term endeavour and all participants for their substantial effort and good will. We believe that these practical standards will be especially helpful for those who do not deal with patients with neuroendocrine tumors on a day-to-day basis. We hope that these guidelines may help in handling and interpreting specific techniques and procedures, in improving the quality of care and in avoiding possible technical pitfalls, and that they thus ultimately will have a positive impact on patients' lives.

Acknowledgements

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Complete List of Participants

List of Participants of the Consensus Conference on the ENETS Guidelines for the Standard of Care for the Diagnosis and Treatment of Neuroendocrine Tumors, Held in Palma de Mallorca (Spain), November 28 to December 1, 2007

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