

Economic plan

This plan identifies the areas prioritised for economic modelling. The final analysis may differ from those described below. The rationale for any differences will be explained in the guideline.

1 Guideline

Oesophago-gastric cancer: assessment and management in adults

2 List of modelling questions

Review questions by scope area	What are the optimal staging investigations to determine suitability for curative treatment of oesophageal or gastro-oesophageal junctional cancer after diagnosis with endoscopy and whole-body CT scan?
Population	People with newly diagnosed oesophageal or gastro-oesophageal junctional cancer
Interventions and comparators considered for inclusion	<ul style="list-style-type: none"> Staging all patients with endoscopic ultrasound (EUS) Selectively staging patients with EUS
Perspective	NHS and personal social services (PSS)
Outcome	Total and incremental costs Total and incremental QALYs Incremental cost-effectiveness ratio (ICER) measured as cost per QALY.
Type of analysis	Cost-utility analysis
Issues to note	Lack of good quality data to inform some aspects of the model, such as T stage at presentation.
Review questions by scope area	What is the most effective surgical treatment (minimally invasive, open or hybrid approaches) for oesophageal cancer?
Population	People with oesophageal cancer deemed suitable for surgical treatment
Interventions and comparators considered for inclusion	<ul style="list-style-type: none"> Open surgical approach Minimally invasive surgical approach Hybrid surgical approach
Perspective	NHS and personal social services (PSS)
Outcomes	Total and incremental costs Total and incremental QALYs ICER measured as cost per QALY.

4.0.4 DOC Economic Plan

Type of analysis	Cost-utility analysis
Issues to note	Lack of high quality data to inform comparisons and lack of statistically significant differences between interventions.
Review questions by scope area	What is the most effective curative treatment of squamous cell carcinoma of the oesophagus?
Population	People with squamous cell oesophageal cancer suitable for radical treatment (T1b and above).
Interventions and comparators considered for inclusion	Surgery Chemoradiotherapy Chemoradiotherapy followed by surgery Chemotherapy followed by surgery
Perspective	NHS and personal social services (PSS)
Outcomes	Total and incremental costs Total and incremental QALYs ICER measured as cost per QALY.
Type of analysis	Cost-utility analysis
Issues to note	Lack of data meant that it was not possible to model the main comparison of interest, which was chemoradiotherapy followed by surgery in comparison to chemoradiotherapy alone.