



Universiteit
Leiden
The Netherlands

Quality assurance in rectal cancer treatment

Dulk, M. den

Citation

Dulk, M. den. (2009, September 9). *Quality assurance in rectal cancer treatment*. Retrieved from <https://hdl.handle.net/1887/13966>

Version: Corrected Publisher's Version

License: [Licence agreement concerning inclusion of doctoral thesis in the Institutional Repository of the University of Leiden](#)

Downloaded from: <https://hdl.handle.net/1887/13966>

Note: To cite this publication please use the final published version (if applicable).

Chapter 13

Acknowledgements

Curriculum Vitae

List of publications



ACKNOWLEDGEMENTS

I would like to express my gratitude to all persons who gave me the possibility to complete this thesis. First of all, I want to thank all involved co-authors for their help with the analyses, the interpretation of the results, and the preparation of the manuscripts. In this thesis, data of several randomised clinical trials have been used. I would like to use the opportunity to thank all investigators of the Swedish Rectal Cancer trial, Dutch TME trial, German CAO/ARO/AIO-94 trial, EORTC 22921 trial, and Polish Rectal Cancer trial. Besides, I am grateful to all patients who participated in these trials. A special acknowledgement is for Laurence Collette of the EORTC in Brussels: thank you for your lessons in medical statistics and your help with the analyses of both EORTC 22921 trial and the pooled database project.

I am grateful to all employees of both the Comprehensive Cancer Centres South (Eindhoven) and West (Leiden), in particular Pieta Krijnen, Marlies Landheer-Jansen, Lonneke van de Poll-Franse, Valery Lemmens and Jan-Willem Coebergh.

I also would like to thank Elma Meershoek-Klein Kranenburg and all other colleagues of the data centre of the department of Surgery, Leiden University Medical Centre who have helped with the data collection and the analyses of the TME trial. Hein Putter, thank you for your statistical lessons and guidance of the several projects. I am also grateful to Ronald Brand and Hans Vogelaar who helped to create a web based registration project for anastomotic leakage using Promise. To all colleagues of J10 (Leiden University Medical Center): thank you for the support and the discussions we had in our room.

To the colleagues and surgeons of the Department of Surgery of the Haga Hospital in the Hague: thank you for the possibility, help and support to perform the study on anastomotic leakage. Besides, I want to thank all those who are participating in the present anastomotic leakage registration project.

I am grateful and honoured that the European Society of Surgical Oncology (ESSO) provided me a Quality Assurance Fellowship, which I have used to perform the research as described in this thesis. I have enjoyed the collaboration with both the members of the Board and the Educational Committee of the ESSO and hope we can collaborate in the future.

Although I have acknowledged already quite a number of people, it is impossible to thank everybody who has been involved in any of the project used for this thesis. Therefore, I also want to thank all of you who are not yet mentioned before.

To my friends, thank you for your support and hopefully I will have more time to spend with you.

I am very grateful to my parents for their continuous love and support. Papa, as I promised you, I have finished my thesis! I would also like to show my appreciation to my in-laws who have supported me as if they were my parents.

Finally and most importantly, I would like to thank my wife Marjolein for her support, encouragement and love; without you, this thesis would not have been possible.

Jasper and Eveline, quality time is now assured!

CURRICULUM VITAE

Marcel den Dulk was born in Leidschendam on 31 December 1976. He graduated from the Alfrink College (VWO) in Zoetermeer in 1995. In the same year he started with the study Biomedical Science at the Leiden University and passed his propaedeutics *cum laude*. In 1996 he started his study Medicine at the Leiden University and received in 1997 his propaedeutics in medicine *cum laude* and in 2000 his medical Masters degree (*cum laude*). He performed his graduation project on interstitial kidney fibrosis at the Nephrology department of the Leiden University Medical Center under supervision of professor dr. L.A. van Es. In 2000 he was awarded with the Leiden University Medical Center Research Fellowship. In December 2001 Marcel was qualified as a Medical Practitioner (*cum laude*).

The author performed research on transplant immunology at the Centenary Institute/ Royal Prince Alfred Hospital, Sydney, Australia from January 2002 until January 2003. From March 2003, he worked as an AGNIO (surgical resident not in training) at the Leyenburg Hospital in The Hague and in January 2005, he started in the same hospital with his surgical residency (dr. C.M.A. Bruijninx). In December 2005 Marcel began with his research for his thesis on Quality Assurance of Surgical Oncology at the Department of Surgical Oncology at the Leiden University Medical Center under supervision of professor dr. C.J.H. van de Velde. He received a Fellowship of the European Society of Surgical Oncology (ESSO) for one and a half year for this project. In June 2007 he continued with his surgical residency at the Haga Hospital in the Hague (dr. J.W. Merkus; merger between Leyenburg Hospital, Red Cross Hospital and Juliana Children's Hospital, all in the Hague). During his residency he initiated a multicentre project on anastomotic leakage, of which he is, at present, the coordinator and principal investigator. From July 2010 he will continue his residency at the Department of Surgery at Leiden University Medical Center (professor dr. J.F. Hamming).

Marcel and his wife Marjolein den Dulk-Burgers have two children: a son Jasper and a daughter Eveline.

LIST OF PUBLICATIONS

M. den Dulk, M. Verheij, A. Cats, E.P. Jansen, H.H. Hartgrink, C.J.H. van de Velde. The essentials of locoregional control in the treatment of gastric cancer. *Scand J Surg* 2006; 95: 236-242.

M. den Dulk, M. Smit, K.C.M.J. Peeters, E. Meershoek-Klein Kranenbarg, H.J.T. Rutten, T. Wiggers, H. Putter, C.J.H. van de Velde. A multivariate analysis of limiting factors for stoma reversal in patients with rectal cancer entered into the total mesorectal excision (TME) trial: a retrospective study. *Lancet Oncol* 2007; 8: 297-303.

M.M. Lange, M. den Dulk, E.R. Bossema, C.P. Maas, K.C.M.J. Peeters, H.J.T. Rutten, E. Klein Kranenbarg, C.A.M. Marijnen, C.J.H. van de Velde. Risk factors for faecal incontinence after rectal cancer treatment. *Br J Surg* 2007; 94: 1278-1284.

M. den Dulk, C.A.M. Marijnen, H. Putter, H.J.T. Rutten, G.L. Beets, T. Wiggers, I.D. Nagtegaal, C.J.H. van de Velde. Risk factors for adverse outcome in patients with rectal cancer treated with an abdominoperineal resection in the total mesorectal excision trial. *Ann Surg* 2007; 246: 83-90.

M. den Dulk, C.J.H. van de Velde. Considerations and restrictions for non-operative treatment of rectal cancer in selected patients. *Lancet Oncol* 2007; 8: 570-571.

M. den Dulk, L. Collette, C.J.H. van de Velde, C.A.M. Marijnen, G. Calais, L. Mineur, P. Maingon, L. Radosevic-Jelic, A. Daban, J.F. Bosset. Quality of surgery in T3-4 rectal cancer: involvement of circumferential resection margin not influenced by preoperative treatment. Results from EORTC trial 22921. *Eur J Cancer* 2007; 43: 1821-1828.

H.J.T. Rutten, M. den Dulk, V.E.P.P. Lemmens, G.A.P. Nieuwenhuijzen, P. Krijnen, M.L.E.A. Jansen-Landheer, L.V. van de Poll Franse, J.W.W. Coebergh, H. Martijn, C.A.M. Marijnen, C.J.H. van de Velde. Survival of elderly rectal cancer patients not improved: analysis of population-based data on the impact of TME surgery. *Eur J Cancer* 2007; 43: 2295-2300.

L. Collette, J.F. Bosset, M. den Dulk, F. Nguyen, L. Mineur, P. Maingon, L. Radosevic-Jelic, M. Piérart, G. Calais. Patients with curative resection of cT3-4 rectal cancer after preoperative radiotherapy or radiochemotherapy: does anybody benefit from adjuvant fluorouracil-based chemotherapy? A trial of the European Organisation for Research and Treatment of Cancer Radiation Oncology Group. *J Clin Oncol* 2007; 25: 4379-4386.

M. den Dulk, Elma Meershoek-Klein Kranenbarg, C.J.H. van de Velde. Designing Clinical Trials in Surgical Oncology: the importance of quality assurance. Chapter 5, Textbook of Surgical Oncology, Informa Healthcare, London, United Kingdom, 2007.

M. den Dulk, C.J.H. van de Velde. Quality assurance in surgical oncology: the tale of the Dutch rectal cancer TME trial. *J Surg Oncol* 2008; 97: 5-7.

H.J.T. Rutten, M. den Dulk, V.E.P.P. Lemmens, C.J.H. van de Velde, C.A.M. Marijnen. Controversies of total mesorectal excision for rectal cancer in elderly patients. *Lancet Oncol* 2008; 9: 494-501.

M. den Dulk, P. Krijnen, C.A.M. Marijnen, H.J.T. Rutten, L.V. van de Poll-Franse, H. Putter, E. Meershoek-Klein Kranenbarg, M.L.E.A. Jansen-Landheer, J.W.W. Coebergh, C.J.H. van de Velde. Improved overall survival for patients with rectal cancer since 1990: the effects of TME surgery and preoperative radiotherapy. *Eur J Cancer* 2008; 44: 1710-1716.

M. den Dulk, C.J.H. van de Velde. Time to focus on the quality of colon-cancer surgery. *Lancet Oncol* 2008; 9: 815-817.

M. den Dulk, S.L. Noter, E.R. Hendriks, M.A.M. Brouwers, C.H. van der Vlies, R.J. Oostenbroek, A.G. Menon, W.H. Steup, C.J.H. van de Velde. Improved diagnosis and treatment of anastomotic leakage after colorectal surgery. *Eur J Surg Oncol* 2009; 35: 420-426.

M. den Dulk, H. Putter, L. Collette, C.A.M. Marijnen, J. Folkesson, J. F. Bosset, C. Rödel, K. Bujko, L. Pählman, C.J.H. van de Velde. The abdominoperineal resection itself is associated with an adverse outcome: the European experience based on a pooled analysis of five European randomised clinical trials on rectal cancer. *Eur J Cancer* 2009; 45: 1175-1183.

P. Krijnen, M. den Dulk, E. Meershoek-Klein Kranenbarg, M.L.E.A. Jansen-Landheer, C.J.H. van de Velde. Improved survival after resectable non-cardia gastric cancer in the Netherlands: the importance of surgical training and quality control. *Eur J Surg Oncol* 2009; 35: 715-720.

M. den Dulk, C.A.M. Marijnen, L. Collette, H. Putter, L. Pählman, J. Folkesson, J.F. Bosset, C. Rödel, K. Bujko, C.J.H. van de Velde. Anastomotic leakage associated with reduced long-term overall survival: results of a pooled analysis of five European randomised clinical trials on rectal cancer. *Br J Surg* 2009; Accepted.

N.N. Rahbari, J. Weitz, W. Hohenberger, R.J. Heald, B. Moran, T. Holm, W.D. Wong, E. Tiret, Y. Moriya, S. Laurberg, M. den Dulk, C.J.H. van de Velde, M.W. Büchler. Definition and grading of anastomotic leakage following anterior resection of the rectum - A proposal by the International study group of rectal cancer (ISREC). Submitted.

W. van Gijn, P. Krijnen, V.E.P.P. Lemmens, M. den Dulk, C.J.H. van de Velde. Quality assurance in rectal cancer treatment in the Netherlands: a catch up compared to colon cancer treatment. Submitted.