Gastrointestinal neuroendocrine tumors (NETs) are rare neoplasms that originate from the secretory cells of the gastrointestinal tract and produce peptides and neuropeptides causing characteristic hormonal syndromes, including carcinoid syndrome. 1 Non-Naïve, non-randomized NETs include those arising from the stomach, thymus, thyroid, and testis (i.e., germ cell tumor) cell.

The emergence of new therapies has improved the options available to patients, although current treatment guidelines lack specificity in some clinical areas. 2,3,4 Treatment consensus obtained in this study is concordant with existing guidelines informing and building on existing guidelines because they were not just from randomized controlled trials.

The Delphi panel approach resulted in a detailed consensus statement that provides the development of treatment guidelines and may also guide clinicians in their clinical care decision-making for patients with non-midgut NETs.

STOP

CONCLUSIONS

The Delphi panel approach did not result in new information; observational and/or prospective studies may also be useful in further evaluating appropriateness of various treatment references.

LIMITATIONS

The panelists relied on information from a variety of data sources not just from randomized controlled trials.

Although the Delphi panel method has been shown to be reproducible, all panelists were from academic settings, and a different panel composition may have derived slightly different consensus statements.

The Delphi panel process does not develop new information; observational and/or prospective studies may be useful in further evaluating appropriateness of various treatment references.

The panelists self-identified themselves as being part of an academic practice. Panelists had practiced between 6-33 years and self-reported on average that 49% of their time was devoted to patient care. The 10 panelists had a mean age of 50.4 years. The mean age of all participating panelists was 50 years (SD = 10 years). All analyses were performed using SAS 9.2 software (SAS Institute, Cary, NC).

The Delphi panel process did not result in new information; observational and/or prospective studies may be useful in further evaluating appropriateness of various treatment references.