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CONVEGNO ECM



FOLLOW UP OF EARLY BREAST CANCER: WORKING FOR A 2023 CONSENSUS

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STEFANIA GORI



PROGETTO DI FORMAZIONE DEL CONSENSO



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“The integration of best research evidence with **clinical expertise** and patient values”

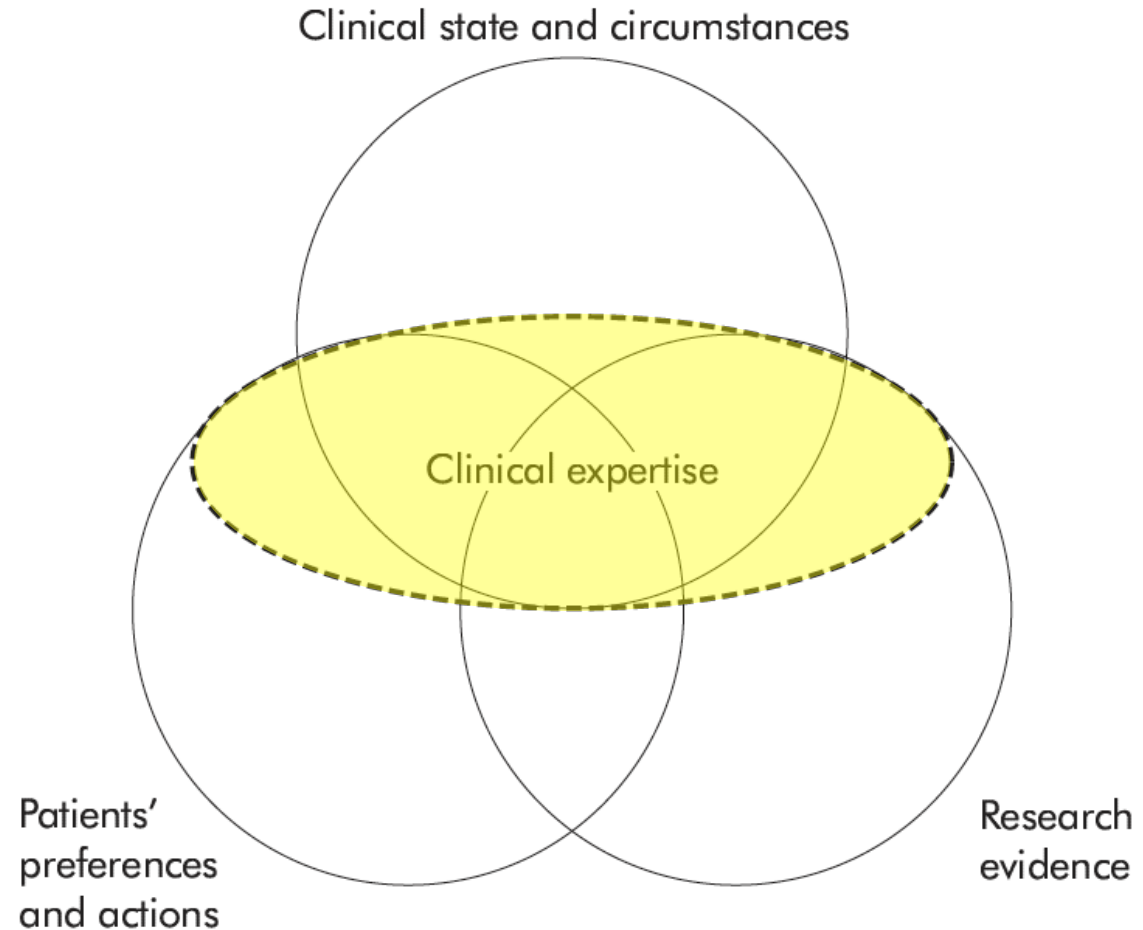
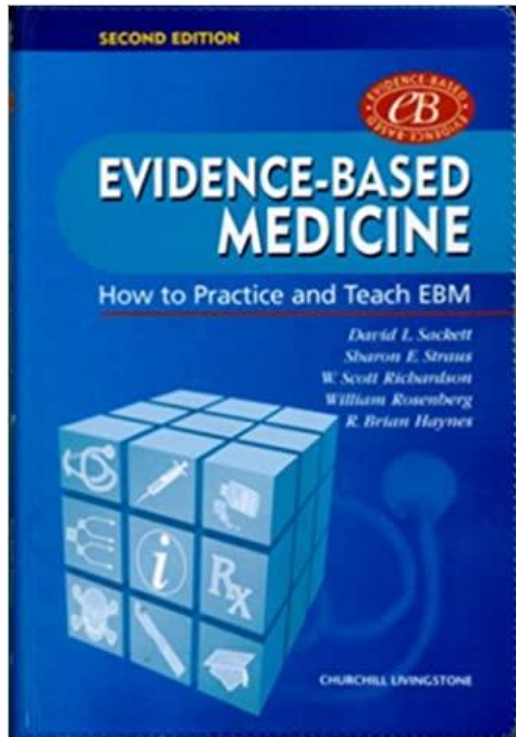


Figure 2 An updated model for evidence-based clinical decisions.

Forewarning, Cognitive Responding, and Resistance to Persuasion

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The effects of forewarning of the content of impending discrepant communications on involving topics were investigated in two experiments. In Experiment 1, it was found that regardless of whether or not a warning was provided, subjects showed evidence of anticipatory counterarguments to the message. In Experiment 2, it was found that subjects who were warned of the content of the message showed evidence of cognitive responding and resistance to persuasion; and unwarned subjects showed evidence of cognitive responding and resistance to persuasion. Together, these results suggest that forewarning of message content

McGuire and Papageorgis (1962) suggested that forewarning an audience of an upcoming discrepant communication produced resistance to persuasion by stimulating anticipatory counterarguments to the incoming message. The notion is that subjects, during the period following the warning but before receiving the message, are considering arguments supporting their own position and refuting opposing positions. These anticipatory counterarguments presumably confer resistance to subsequent persuasion attempts.

For example, take the case of a freshman who intends to inform his parents of a desire to drop out of school. The student should be more persuaded by his parents' arguments against his position if he

The experiments were conducted while the authors were University Fellows at The Ohio State University. The authors would like to thank George J. Ross of The Ohio State University Listening Center for providing testing facilities; John Lingle for acting as the speaker in Experiment 2; and Stephen J. Zanna, John Harvey, Thomas Ostrom, and David A. Kenny for providing comments on an earlier draft of the manuscript.

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ATTRIBUTION THEORY, ACHIEVEMENT MOTIVATION, AND THE EDUCATIONAL PROCESS

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Chapter 8

Social Identification, Self-Categorization and Social Influence

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INTRODUCTION

Social influence can be defined as 'any change which a person's relations with other people (individual, group, institution or society) produce on his (*sic*) intellectual activities, emotions or actions' (*Dictionary of Personality and Social Psychology*, 1986, p.328). The focus of this chapter is limited to influence through and within groups. We briefly introduce the basic themes of the social identity perspective and then review a number of important contemporary approaches to social influence in groups. A broad distinction is made between *pressure to comply* and *reasons to agree* with sources of influence. Social bases of influence, cognitive processes involved, motivations for being influenced, effects of minority and majority influence attempts, and the magnitude of influence are discussed. We then examine indirect evidence for the relevance of social categorization to influence in groups before going on to present an analysis in terms of social identity and self-categorization theories. Direct tests of the theory in the areas of conformity, group polarization and norm formation are described and the discussion then broadens to include other issues which are raised by

functionalism on psychology in part fostered and neobehavioristic movements in America. The study of overt behavior would reveal how an environment. Unfortunately, this point of view has significance of cognitive processes and cognitive functionalism never matured to functionalism.

In psychology, labeled attribution theory, the study of cognitive functionalism is very diverse. Kelley, Nisbett, Valins, & Weiner, in 1978, investigated the perception of causality, or causal incident occurred. The allocation of responsibility for subsequent behavior. For example, the attribution of an event to an arbitrary cause may lead to a different belief than the belief that the event justifiably occurred (Kelley, 1952). In a similar manner, a report that a person's behavior is due to different movie-going decisions as a result of the properties of the entity (good or bad) (easily pleased) (see Kelley, 1967, 1978), self-perception of failure as due to behaviors disparate from those observed and used by a lack of ability (Weiner, Frieze, & Kukla, 1971). In sum, the future actions in life are determined by the attributions.

Attribution theory is applied to the study of the individual. Specifically, the influence of causal beliefs on behavior is examined. Of central importance is the study of achievement striving.

The author was a Guggenheim Fellow at the University of Bochum, Germany. During this period he was supported by a grant MH 12603-05 from the National Institute of Mental Health, Office of Economic Opportunity Early Career Development Award.

Raggiungere un consenso coinvolge **aspetti motivazionali** (la volontà di impegnarsi in un processo decisionale) e **cognitivi** (il modo in cui vengono elaborate le informazioni) dei singoli soggetti coinvolti nel gruppo di consenso, così come **aspetti delle dinamiche sociali** che si sviluppano all'interno del gruppo che esprime il consenso.

What a Person Thinks Upon Learning He Has Chosen Differently from Others: Nice Evidence for the Persuasive-Arguments Explanation of Choice Shifts

EUGENE BURNSTEIN AND AMIRAM VINOKUR

University of Michigan

Small shifts in choice occur even without discussion, when individuals merely know each other's preference. This appears to support an interpersonal comparison explanation of group induced shifts in choice and to refute explanations based on persuasive argumentation. The present study demonstrates the contrary, that such effects are consistent with the persuasive-arguments formulation and are obtained under particular conditions specified only by the latter theory, to wit: Knowledge of other's choices is assumed to lead a person to think of reasons (arguments) others might have had for their choices—reasons which ordinarily would not come to mind without this knowledge. Such reasoning functions in the same way as persuasive argumentation during group discussion; it causes the person to persuade himself that an alternative course of action now has greater merit than the one he initially preferred. To test this analysis, an experiment was performed in which subjects responded to choice-dilemma items under three different conditions: Following their own choice (I) they learned what several others had chosen and then wrote arguments in support of alternatives given in that same item; (II) they learned what several others had chosen and then wrote arguments in support of alternatives given in a different item; and (III) they received no information about others' choices but merely wrote arguments on that item. As predicted, shifts in choice occurred only if the person knew what others chose and had an opportunity to think about the latter (condition I); they did not occur if an opportunity to think of others' choices was denied (condition II), nor if knowledge of others' choices was withheld (condition III). Content analysis of the arguments subjects produced in conditions I and II completely supported the hypothesis, as did analyses of responses to postexperimental questionnaire which directly asked the subjects about their feelings and thoughts upon learning what others had chosen.

This study is one of a series having to do with, among other things, the relative impact of informational (or cognitive) versus normative (or motivational) processes on the position an individual takes following group discussion. That this is a fundamental problem in the analysis of social influence was recognized at the very beginning of research on behavior in groups. Over 35 yr ago Thorndike (1938a) stressed the point

This research was supported by a Grant from the National Institute of Mental Health (MH-16950-05).

Hidden Impact of Minorities: Fifteen Years of Minority Influence Research

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This article reviews and evaluates the literature on minority influence since Moscovici's original formulation of minority influence theory in 1969. Alternative theoretical explanations (attributional accounts and formal models of social influence) are discussed. Special attention is given to studies contrasting minority influence with conformity processes. These studies suggest that people tend to yield to the majority in public (public compliance in the conformity paradigm), while accepting the position of the minority in private (private acceptance in the minority influence paradigm). Theoretical implications of this finding are discussed.

Since Sherif's (1935) and Asch's (1951) early work on conformity, it has become a social psychological truism that individuals tend to yield to a majority position even when that position is clearly incorrect. *Conformity* became a term nearly equivalent in meaning to social influence. It was not until 1969 that Moscovici and his coauthors pointed out that social influence is by no means limited to a one-direction dependency of the minority on the majority. Reversing the usual conformity paradigm, Moscovici, Lage, and Naffrechoux (1969) demonstrated that a consistent minority is able to exert a remarkable degree of influence even when it is not equipped with such characteristics as power, status, competence, or idiosyncrasy credits (Hollander, 1964). In this pioneering experiment two confederates represented the minority; the majority consisted of four naive subjects per group. As in Asch's (1951) experiment, an unambiguous physical stimulus was presented for which the error rate in the control group, consisting of six naive subjects, was close to zero. In a simple color perception task, subjects were asked to judge the color of blue slides that differed only in terms of their luminance. Two confederates labeled these slides consistently "green." A

previous visual screen test had attested to the full visual capacity of all subjects and confederates. The results showed that 8.42% of all answers were "green" and 32% of all subjects reported to have seen a "green" slide at least once. When the confederates responded inconsistently, however, they did not exert any influence.

In his original account of these findings, Moscovici (Moscovici, 1976; Moscovici & Faucheux, 1972; Moscovici et al., 1969) proposed a two-step model of minority influence. According to this model, the minority must initially induce a conflict with the majority by challenging the majority norm; consequently, it has to provide a consistent and stable alternative norm. Both goals are achieved by showing a behavioral style that indicates certainty and commitment. Although Moscovici (1976) listed a number of potentially relevant behavioral styles (consistency, investment, autonomy, rigidity, and fairness), *consistency* has become the cornerstone of minority influence research during the last decade of research.

Since the original formulation of the theory, most of the research on minority influence has been conducted in Europe, namely France, Belgium, and Switzerland. American social psychologists, with some exceptions (e.g., Levine, Kiesler, and, especially, Nemeth), have shown only limited interest in the theory. Three reasons might account for this fact. First, the theory originated in France, and the majority of articles have since been published in European sources that, if at all available, may

The authors are indebted to Steve West, Dagmar Stahlberg, and Dieter Frey for their comments on earlier drafts of this article.

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Le riunioni che mettono direttamente in interazione soggetti chiamati a contribuire al processo conoscitivo e decisionale sono quindi **condizionate dalle dinamiche socio-emotive che regolano il funzionamento del gruppo.**

Solomon E. Asch

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EFFECTS OF GROUP PRESSURE UPON THE MODIFICATION AND DISTORTION OF JUDGMENTS

We shall here describe in summary form the conception and first findings of a program of investigation into the conditions of independence and submission to group pressure. This program is based on a series of earlier studies conducted by the writer while a Fellow of the John Simon Guggenheim Memorial Foundation. The earlier experiments and the theoretical issues which prompted them are discussed in a forthcoming work by the writer¹ on social psychology.

Our immediate object was to study the social and personal conditions that induce individuals to resist or to yield to group pressures when the latter are perceived to be *contrary to fact*. The issues which this problem raises are of obvious consequence for society; it can be of decisive importance whether or not a group will, under certain conditions, submit to existing pressures. Equally direct are the consequences

Reprinted with permission from *Groups, Leadership and Men*, edited by Harold Guetzkow. Pittsburgh: Carnegie Press, 1951.

¹ S. E. Asch, *Social psychology*. New York: Prentice-Hall, 1952.—Ed.



I **metodi formali** ad oggi codificati per la costruzione del consenso (es. NGT, Delphi) **cercano invece di controllare questi fattori** riducendo gli effetti dovuti a dinamiche di leadership formale e incentivando al massimo l'autonomia e la libertà di proposta.

Improving the Quality of Group Judgment: Social Judgment Analysis and the Nominal Group Technique

JOHN ROHRBAUGH

Improving the Quality of Group Judgment: Social Judgment Analysis and the Delphi Technique

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Previous research has shown that individual judgment is superior to group judgment. These two methods have been developed to provide a strong in the quality of accurate judgment analysis and the Delphi technique.

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Requests for reprints should be sent to John Rohrbaugh, Department of Public Administration, Graduate School of Public Affairs, SUNY - Albany, 1400 Washington Avenue, Albany, NY 12222.

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Previous research findings suggest that group judgment is superior to individual judgment, although groups fail to reach their full potential because of problems associated with the interaction process. Thus, groups perform at a level generally better than the competence of their average members but rarely as well as their most proficient members. The current study explores two methods of group judgment making which have been developed to reduce the discrepancy between potential and actual group performance: social judgment analysis and the Delphi technique. These two methods are compared in a controlled experimental setting with regard to their potential both to significantly reduce group disagreement and to provide accurate judgments. The two methods were found to be equal in the quality of judgments produced. Social judgment analysis, however, was a significantly better method of reducing disagreement than the Delphi technique.

INTRODUCTION

Judgment is an inferential cognitive process by which an individual draws conclusions about unknown quantities or qualities on the basis of available information. Because judgment is extremely common and extremely important, particularly in uncertain environments, the study of the judgment process has become increasingly widespread (see Kaplan & Schwartz, 1975, 1977). Much attention has been given both to the description and to the improvement of the judgment process.

Description of the Judgment Process

Tolman and Brunswik (1935) emphasized that an individual interacts with an environmental system containing numerous, interrelated variables. These variables may be of only partial relevance to the individual, may carry only a limited amount of dependability, and may be organized in a variety of ways. Brunswik (1955) termed this property of the environment vicarious mediation. To explain how the individual copes with such ambiguity and uncertainty in the environment, Brunswik postulated a complementary and parallel system of vicarious functioning in the individual by which multiple variables are sorted, eliminated, and recombined in order that specific inferences might be made. For example, Hammond

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A Comparative Study of Differences in Subjective Likelihood Estimates Made by Individuals, Interacting Groups, Delphi Groups, and Nominal Groups

DAVID H. GUSTAFSON, RAMESH K. SHUKLA, ANDRE DELBECQ,
AND G. WILLIAM WALSTER

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This research evaluated four methods of eliciting subjective likelihood ratio estimates. The methods differed in terms of amount and structure of interaction permitted between estimators. These processes were individual estimates, and three group processes: a Talk-Estimate process approximating an interacting group, an Estimate-Feedback-Estimate process as an approximation of a Delphi group, an Estimate-Talk-Estimate process as combination of nominal and interacting groups.

In this study the Estimate-Talk-Estimate group process was superior in approaching correct estimates in this judgmental task. This is consistent with the long research tradition which favors group as opposed to individual problem-solving in judgmental situations.

The individual Estimate process and the Estimate-Feedback-Estimate technique performed about equally well with respect to both error and variability. If anything, written feedback appeared to lead to a reduction in the quality of estimates.

Finally, the relatively poor results from the Talk-Estimate process are consistent with other studies which have pointed out dysfunctions of interacting group processes for judgmental tasks.

INTRODUCTION

The purpose of this research is to evaluate various methods of eliciting subjective likelihood ratio estimates.¹ The methods differ in terms of

¹The study is part of the Computer-Aided Medical Diagnosis Project at the University of Wisconsin. The purpose of the project is to develop and evaluate a computer-aided diagnostic system using subjective likelihood ratios estimated by physicians (rather than actuarial likelihoods estimated by empirical data) in a Bayesian diagnostic model. This particular study was important to the project because it became the basis for selecting a group process that would effectively aggregate the knowledge of the physician's community. Much concern has recently been evidenced concerning the role of consensus and subjective information (Winkler, 1968; Goodman, 1970).

Is There a Consensus on Consensus Methodology? Descriptions and Recommendations for Future Consensus Research

Jane Waggoner, MS, Jan D. Carline, PhD, and Steven J. Durning, MD, PhD
Acad Med. 2016;91:663–668.

Although we set out to determine **what the standard practice** for conducting consensus methodology studies was, we quickly realized that **no such standard existed** and decided to shift our focus on the most common practices as well as those that were described in the most detail and analyzed most stringently.

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The diagram illustrates a three-step process for group decision-making:

- 1. individual suggestions**: Represented by a vertical column of six blue circles, each with a document icon and a pushpin, indicating individual contributions.
- 2. group discussion and merging of items**: Represented by a central light blue circle containing a document icon and a pushpin, surrounded by six smaller blue circles (one green at the top), indicating a group discussion and consolidation.
- 3. ranking of items**: Represented by a vertical column of six blue circles, each with a document icon and a pushpin, indicating the final ranking of items. Below this column is a blue box containing a list of four items (1, 2, 3, 4) and a calculator icon, indicating the final decision and calculation.

Treatment of advanced breast cancer with metformin

Therapeutic Advances in Urology

Review Article

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Second-line treatment in renal cell carcinoma: clinical experience and decision making

Valentina Guadalupi, Giacomo Carteni, Roberto Iacovelli, Camillo Porta, Giovanni Pappagallo, Riccardo Ricotta and Giuseppe Procopio

Abstract: Currently, conventional treatments for metastatic RCC (mRCC) include immune-based combination regimens and/or targeted therapies, the latter mainly acting on angiogenesis, a key element of the process of tumor growth and spread. Although these agents proved able to improve patients' outcomes, drug resistance and disease progression are still experienced by a substantial number of VEGFR-TKIs-treated mRCC patients. Following the inhibition of the VEGF/VEGFRs axis, two strategies have emerged: either specifically targeting resistance pathways, at the same time continuing to inhibit angiogenesis, or using a completely different approach aimed at re-activating the immune system through the use of inhibitors of specific negative immune checkpoints. These two approaches, practically represented by the use of either cabozantinib or nivolumab, seem to remain a rational therapeutic approach also when first-line immune-based combinations are used. The objective of this study is to design a preferential therapeutic pathway for the second-line treatment of mRCC. The procedure applied in this project was a group discussion, based on the Nominal Group Technique (NGT) method in a meeting session, aimed at defining the therapeutic choice for the second-line treatment of mRCC. The NGT process defined the most relevant parameters that, according to the interviewed panelists, clinicians should consider for the selection of the second-line therapy in the context of advanced renal cell carcinoma of mRCC. The algorithm developed for the treatment selection as a result of this process should thus be considered by clinicians as reference for therapy selection.

Plain language summary

The result of this paper was the definition of an algorithm intended to suggest a preferential therapeutic pathway considering both the outputs of the Nominal Group Technique (NGT) process and the actual clinical practice and the experience of selected panelists. During the NGT process and the discussion phase, panelists defined the most important parameters to be included in the algorithm that are important for the treatment definition. Cabozantinib and nivolumab are identified as the most reasonable therapeutic options for patients progressing after first-line treatment and are the medication options included in the algorithm for therapy selection.

Keywords: immune checkpoint inhibitors, nominal group technique, second-line treatment, target metastatic renal cell carcinoma, therapy, tyrosine kinase inhibitors

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Elena Danie Paolo

Review

Emetogenicity of Antibody-Drug Conjugates (ADCs) in Solid Tumors with a Focus on Trastuzumab Deruxtecan: Insights from an Italian Expert Panel

Giampaolo Bianchini ^{1,2,*}, Grazia Arpino ³, Laura Biganzoli ⁴, Sara Lonardi ⁵, Fabio Puglisi ^{6,7}, Daniele Santini ⁸, Matteo Lambertini ^{9,10} and Giovanni Pappagallo ¹¹

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Simple Summary: Four antibody-drug conjugates (ADCs) are approved for the treatment of solid tumors, improving the therapeutic index. Despite their high selectivity, nausea and vomiting are the most frequently observed side effects. A deeper understanding of the potential risk for nausea and vomiting is crucial, as they can affect patients' quality of life and treatment adherence. Prophylaxis with the potential combination of antiemetic therapy with complementary non-pharmacological approaches are even more important, considering that ADC therapies are generally given continuously until disease progression or the occurrence of toxicities.

Abstract: In the past decade, nine antibody-drug conjugates (ADCs) have been approved for the treatment of various tumors, four of which specifically for solid malignancies. ADCs deliver the cytotoxic payload to the cancer site, thereby improving chemotherapy efficacy while reducing systemic drug exposure and toxicity. With their high selectivity, ADCs are associated with a manageable side-effect profile, with nausea and vomiting being among the most frequent toxicities, although this may vary according to the respective ADC and the associated payload. Information about the emetic risk of the new ADC compounds is limited. Three virtual focus groups of Italian oncologists were held to raise awareness on the importance of an antiemetic prophylaxis regimen to prevent and mitigate ADC-associated emesis and its sequelae. After reviewing published evidence and guidelines, the three expert panels shared their experience on the early use of ADCs gained through the participation in specific clinical trials and their clinical practice. The following issues were discussed: antiemetic therapy during trastuzumab deruxtecan treatment, with a protocol adopted at the San Raffaele Hospital (Milan, Italy); the use of steroids; the management of anticipatory nausea during trastuzumab deruxtecan therapy; nutritional counselling; and effective doctor-patient communication. The experts acknowledged that recommendations should be drug-specific, and formulated opinion-based advice intended to guide physicians in their daily practice until further evidence emerges.

Citation: Bianchini, G.; Arpino, G.; Biganzoli, L.; Lonardi, S.; Puglisi, F.; Santini, D.; Lambertini, M.; Pappagallo, G. Emetogenicity of Antibody-Drug Conjugates (ADCs) in Solid Tumors with a Focus on Trastuzumab Deruxtecan: Insights from an Italian Expert Panel. *Cancers* **2022**, *14*, 1022. <https://doi.org/10.3390/cancers14041022>

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Second-line treatment in renal cell carcinoma: clinical experience and decision making

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Abstract: Currently, conventional treatments for metastatic RCC (mRCC) include immune-based combination regimens and/or targeted therapies, the latter mainly acting on angiogenesis, a key element of the process of tumor growth and spread. Although these agents proved able to improve patients' outcomes, drug resistance and disease progression are still experienced by a substantial number of VEGFR-TKIs-treated mRCC patients. Following the inhibition of the VEGF/VEGFRs axis, two strategies have emerged: either specifically targeting resistance pathways, at the same time continuing to inhibit angiogenesis, or using a completely different approach aimed at re-activating the immune system through the use of inhibitors of specific negative immune checkpoints. These two approaches, practically represented by the use of either cabozantinib or nivolumab, seem to remain a rational therapeutic approach also when first-line immune-based combinations are used. The objective of this study is to design a preferential therapeutic pathway for the second-line treatment of mRCC. The procedure applied in this project was a group discussion, based on the Nominal Group Technique (NGT) method in a meeting session, aimed at defining the therapeutic choice for the second-line treatment of mRCC. The NGT process defined the most relevant parameters that, according to the interviewed panelists, clinicians should consider for the selection of the second-line therapy in the context of advanced renal cell carcinoma of mRCC. The algorithm developed for the treatment selection as a result of this process should thus be considered by clinicians as reference for therapy selection.

Plain language summary

The result of this paper was the definition of an algorithm intended to suggest a preferential therapeutic pathway considering both the outputs of the Nominal Group Technique (NGT) process and the actual clinical practice and the experience of selected panelists. During the NGT process and the discussion phase, panelists defined the most important parameters to be included in the algorithm that are important for the treatment definition. Cabozantinib and nivolumab are identified as the most reasonable therapeutic options for patients progressing after first-line treatment and are the medication options included in the algorithm for therapy selection.

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Emetogenicity of Antibody-Drug Conjugates (ADCs) in Solid Tumors with a Focus on Trastuzumab Deruxtecan: Insights from an Italian Expert Panel

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Keywords: antibody-drug conjugates (ADCs), emetogenicity, trastuzumab deruxtecan, antiemetic prophylaxis, nausea, vomiting

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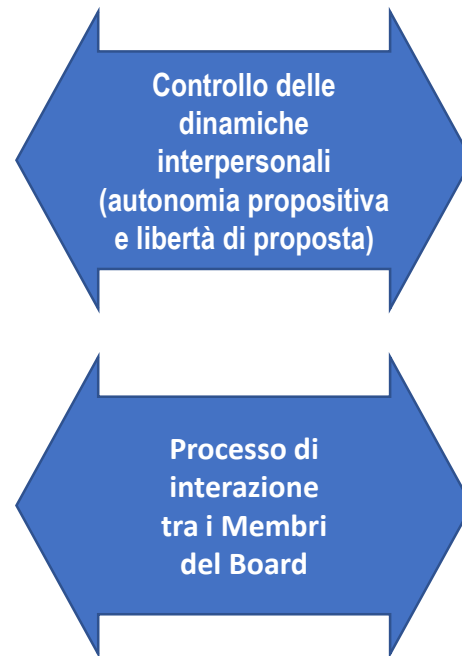
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Step #1

Approccio **mini-Delphi***
online, anonimo
↓
generazione individuale degli item
↓
armonizzazione da parte
del Facilitatore
↓
finalizzazione degli item
in AB virtuale



Step #2

Approccio **mini-Delphi***
online, anonimo
↓
generazione individuale degli statement
↓
armonizzazione da parte
del Facilitatore
↓
finalizzazione degli statement
in AB virtuale

*Estimate-Talk-Estimate

Step #1:
**individuazione
indipendente
dei punti
meritevoli di
maggiore
interesse
(items)**

Monitoraggio del ca. prostatico in fase avanzata

punto meritevole di interesse	statement
frequenza di valutazione clinico-strumentale in un paziente con mCSPC con indicazione ad ADT esclusiva	in un paziente con mCSPC in cui viene posta indicazione ad ADT esclusiva, la pianificazione standard del monitoraggio dovrebbe prevedere una rivalutazione clinica e biochimica ogni 12 settimane per i primi 12 mesi e successivamente ogni 24 settimane

Trattamento della malattia da reflusso gastro-esofageo (MRGE)

punto meritevole di interesse	statement
ruolo dell'acido ialuronico in pazienti con MGRE e indicazione a IPP	l'aggiunta di acido ialuronico all'IPP, oltre all'effetto sintomatico e protettivo nei confronti del tessuto esofageo, favorisce i processi fisiologici di riparazione della mucosa

Gestione delle infezioni fungine invasive in pazienti ematologici

punto meritevole di interesse	statement
fattibilità della terapia a lungo termine nei pazienti fragili	nei pazienti fragili la proposta terapeutica dovrebbe comprendere in prima intenzione isavuconazolo, meno gravato da reazioni avverse rispetto alla AmB liposomiale.

Step #2:
**produzione di
uno statement
per ciascuno
dei punti
individuati**

Step #1:
individuazione
indipendente
dei punti
meritevoli di
maggiore
interesse
(items)

Monitoraggio del ca. prostatico in fase avanzata

punto meritevole di interesse	statement
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Step #2:
produzione di
uno statement
per ciascuno
dei punti
individuati

Article

Clinical Management of Neuroendocrine Neoplasms in Clinical Practice: A Formal Consensus Exercise

Mirco Bartolomei ¹, Alfredo Berruti ^{2,*}, Massimo Falconi ³, Nicola Fazio ⁴, Diego Ferone ⁵, Secondo Lastoria ⁶, Giovanni Pappagallo ⁷, Ettore Seregni ⁸ and Annibale Versari ⁹

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Simple Summary: Well-structured international guidelines are currently available regarding the management of patients with neuroendocrine neoplasms (NENs). However, in relation to the multiplicity of treatments and the relative rarity and heterogeneity of NENs, there are many controversial issues in which clinical evidence is insufficient and for which expert opinion can be of help. A group of experts selected 14 relevant topics and formulated relative statements concerning controversial issues in several areas on diagnosis, prognosis, therapeutic strategies, and patient follow-up. Specific statements have also been formulated regarding patient management on radiological therapy (RLT), as well as in the presence of co-morbidities or bone metastases. All the statements were drafted, discussed, modified, and then approved. The Nominal Group Technique (NGT) method was used to obtain consensus. The results of this paper can facilitate the clinical approach of patients with NENs in daily practice in areas where there is scarcity or absence of clinical evidence.

Abstract: Many treatment approaches are now available for neuroendocrine neoplasms (NENs). While several societies have issued guidelines for diagnosis and treatment of NENs, there are still areas of controversy for which there is limited guidance. Expert opinion can thus be of support where firm recommendations are lacking. A group of experts met to formulate 14 statements relative to diagnosis and treatment of NENs and presented herein. The nominal group and estimate-talk-estimate techniques were used. The statements covered a broad range of topics from tools for diagnosis to follow-up, evaluation of response, treatment efficacy, therapeutic sequence, and watchful waiting. Initial prognostic characterization should be based on clinical information as well as histopathological analysis and morphological and functional imaging. It is also crucial to optimize RLT for patients with a NEN starting from accurate characterization of the patient and disease. Follow-up should be patient/tumor tailored with a shared plan about timing and type of imaging procedures to use to avoid safety issues. It is also stressed that patient-reported outcomes should receive greater attention, and that a multidisciplinary approach should be mandatory. Due to the clinical heterogeneity and relative lack of definitive evidence for NENs, personalization of diagnostic-therapeutic work-up is crucial.



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Article

Monitoring Patients with Metastatic Hormone-Sensitive and Metastatic Castration-Resistant Prostate Cancer: A Multidisciplinary Consensus Document

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Abstract: Background: The availability of a number of agents that are efficacious in patients with metastatic prostate cancer (mPC) has led to them being used sequentially, and this has prolonged patient survival. However, in order to maximize their efficacy, clinicians need to be able to obtain a reliable picture of disease evolution by means of monitoring procedures. Methods: As the intensive monitoring protocols used in pivotal trials cannot be adopted in everyday clinical practice and there is no agreement among the available guidelines, a multidisciplinary panel of Italian experts met to develop recommendations for monitoring mPC patients using a modified Delphi method. Results: The consensus project considered methods of clinically, radiographically, and biochemically monitoring patients with metastatic hormone-sensitive and metastatic castration-resistant prostate cancer undergoing chemotherapy and/or hormonal treatment. The panelists also considered the methods and timing of monitoring castration levels, bone health, and the metabolic syndrome during androgen deprivation therapy. Conclusions: The recommendations, which were drawn up by experts following a formal and validated consensus procedure, will help clinicians face the everyday challenges of monitoring metastatic prostate cancer patients.

Keywords: castration-sensitive prostate cancer; castration-resistant prostate cancer; consensus conference; monitoring procedures



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Consensus cancer: A J Oncology

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1. Introduction

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Introduction

Impetigo is a curs in children age can be affe cate 111 million at a given time

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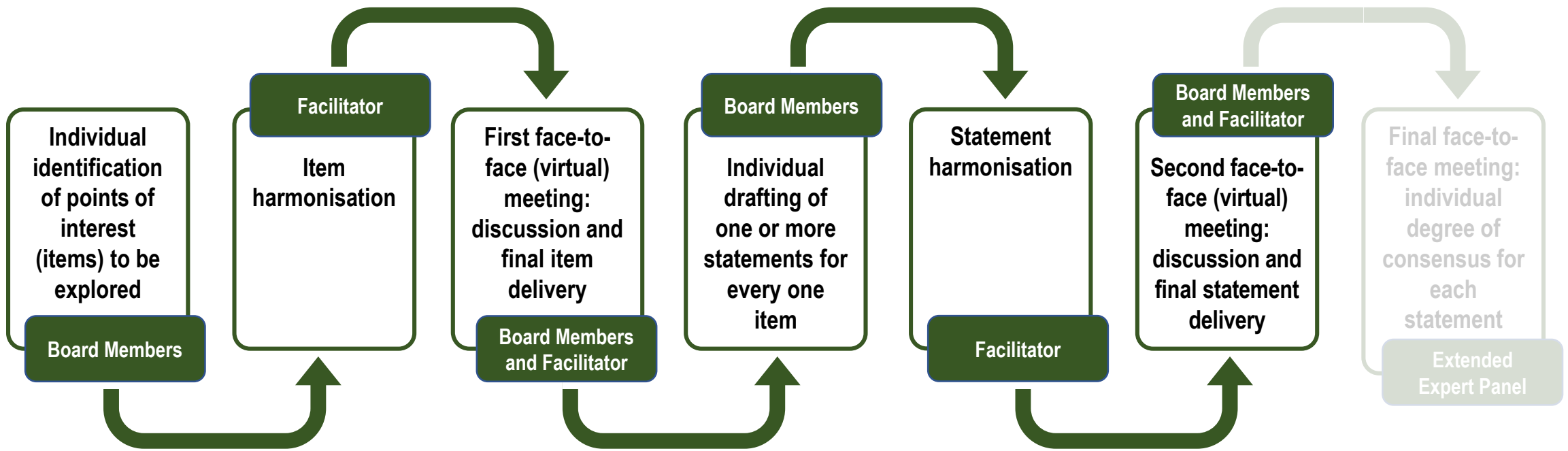
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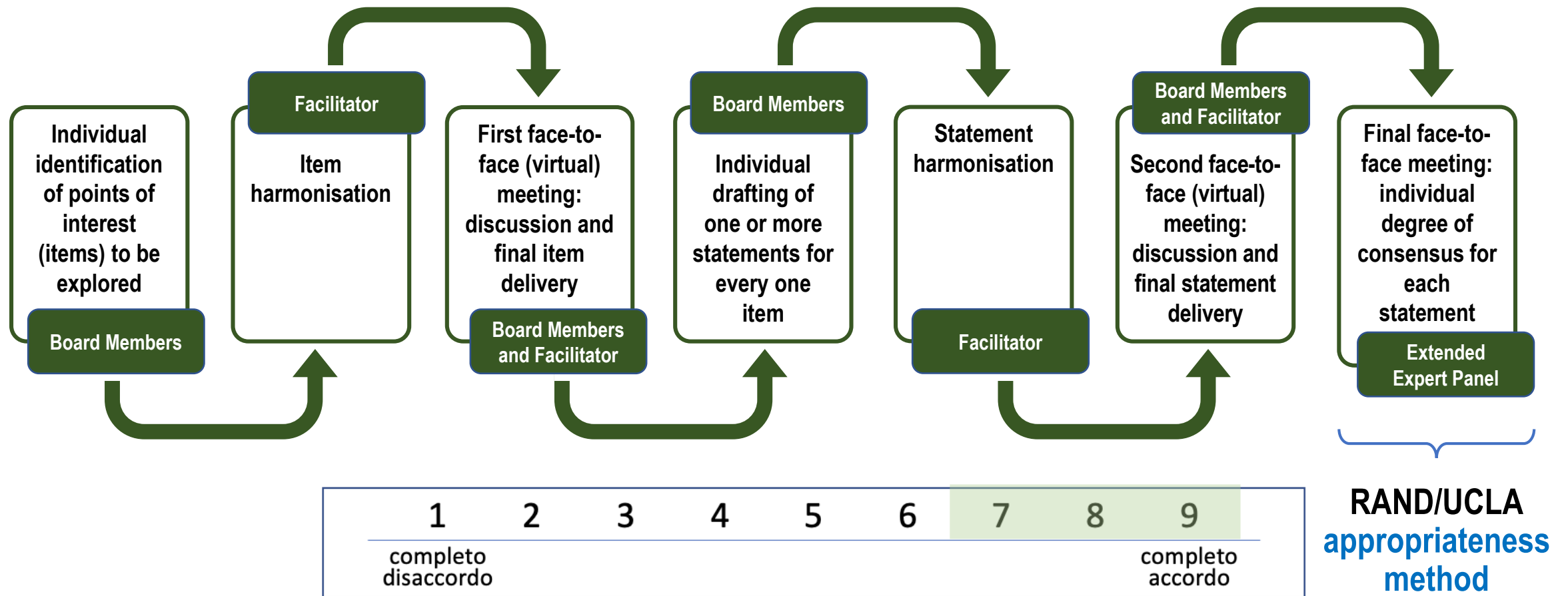
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STUDY DESIGN (PROPOSAL)



Estimate-Talk-Estimate **formal consensus technique**

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