

Background

- The conditions affecting adolescent and paediatric population are rare and difficult to manage in one centre.
- They often need input from paediatrics, radiology, endocrinology, surgery and genetics for safe and efficient care.
- Multidisciplinary meetings in Paediatric and Adolescence Gynaecology(PAG) specialty are less established in comparison to Gynae-Oncology.
- Proper and timely treatment is essential in these conditions for proper physical and psychological development in adolescents.

Aims and Objectives

1. To assess the feasibility and utility of virtual inter-hospital PAG multidisciplinary team meeting (MDT) to discuss complex cases.
2. To determine the appropriate frequency and constitution of panel for the MDT.
3. To assess acceptability and utilisation of the MDTs as a teaching tool for PAG related topics.

Methods

- Eight monthly one hour long MDT sessions were conducted on Zoom Virtual Platform covering PAG cases in East of England Region.
- It was open for trainees and consultants. Each session focused on a complex case, with structured points for discussion.
- The schedule was preset, each session had a designated lead presenter and multidisciplinary panel from across the region.
- The feedback was collected following each session using Google forms.

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Experience of Virtual Regional Paediatric and Adolescence Gynaecology Multidisciplinary Team (PAG-MDT)Meetings.



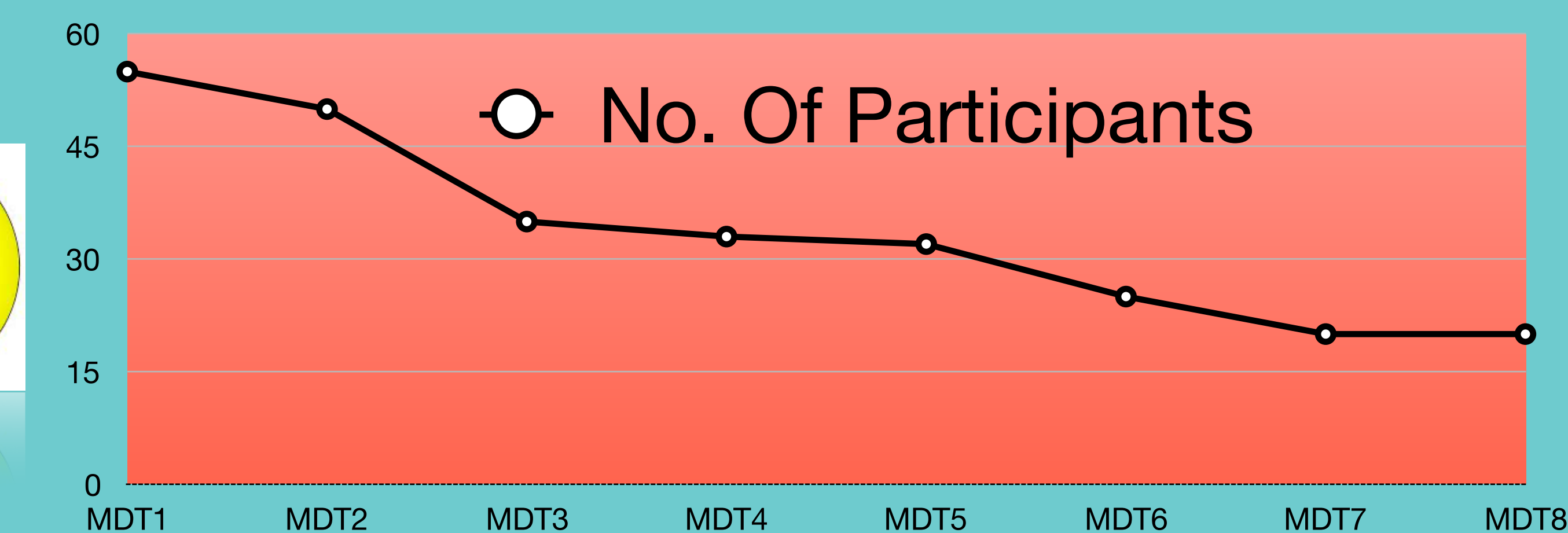
Results



- The MDT sessions were conducted smoothly on Zoom Virtual Platform.
- Every session was lead by the consultant gynaecologist who has seen the patient.
- The panel consisted of minimum of 3 and maximum of 5 members that included gynaecologists, radiologists, endocrinologists, paediatric surgeons, geneticists, ethicists, psychologists and two sessions included patient support groups as well.
- Unique cases such as OVHIRA Syndrome, VACTERL Syndrome and CAIS were discussed.

Based on a five-point Likert scale, the feedback highlighted that:

- **99.5%** of participants strongly agreed/ agreed that the virtual PAG MDT were useful to their clinical practice.
- **99.5%** were satisfied with the contribution and inclusion of the MDT members, highlighting mutual respect and collaboration of all members.
- **99%** of the participants strongly agreed/agreed on the positive impact of the webinar on their personal development, education and training.
- **94%** of participants gave a positive feedback on the webinar organization, information- technology and support.
- **99%** of participants strongly agreed/agreed that patient care was at the core of the webinar with **95%** supporting the clinical outcome.



Conclusion

- This pilot study confirms the feasibility and success of a virtual regional PAG MDT with a favourable impact on clinical practice and the provision of patient centered care.
- The MDT panel should consist of at least 3 members and having meetings every 2-3 months may sustain interest and maximum participants.
- The feasibility of these virtual sessions needs to be further explored on a national level.