Reviewer's report

Title: A pre-post test evaluation of the impact of the PELICAN MDT-TME Development Programme on the working lives of colorectal cancer team members

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Reviewer: John R Monson

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This paper attempts to demonstrate the effect of a training course on the stress levels of colorectal practitioners. The Pelican MDT program was a training course looking at issues such as team working, methods of staging, pathology assessment and non-surgical oncology treatment as of course as TME surgery. This was an extremely valuable process that increased standards nationally and was very well intentioned. However, it was not without its problems that anyone working within this field in the UK will have appreciated.

For example, for many staff already working at the forefront of colorectal practice this process was imposed on them by higher authorities and quite a few high quality centers were made to send staff to these courses causing significant degrees of resentment. This is simply a fact. it may well be that such individuals were in need of further education in certain areas - which one of us is not after all - but many were already practicing at the highest levels of expertise. It is therefore somewhat arrogant of the current authors to suggest that reduction in stress levels were likely due to increased expertise gained by the courses. More importantly it is also pure speculation and not evidence based as no attempts were made to determine changes in knowledge base or indeed nature of practice after the courses. The authors suggest that one surrogate measure of this might be the increase in use of MRI scanning although this is based on hearsay and not truly scientific. Increased numbers of lymph nodes harvested is also cited as evidence of better practice. Current published literature strongly suggests that lymph node numbers in colorectal resections is mainly dictated by specimen preparation and individual pathology technicians rather than surgical technique. In addition, Professor Quirke does not have access to national numbers and his comments must be predominantly related to the Leeds data.

There is already published data on the effect of MDT working on colorectal staff in the UK derived from a nationally based questionnaire and I am surprised that this paper is not cited. Our own group also showed high levels of de-personalization among surgical and nursing staff working within colorectal units in the UK. Once again I would have thought this might be relevant because i cannot see any mention of such psychological morbidity data from the current survey. My reason for making this comment is that studies have shown on both sides of the Atlantic that such stresses has a true negative impact on patient care - something not widely appreciated.
In conclusion I would suggest that this study is a well meaning attempt to demonstrate an effect deriving from attendance at an important course trying to increase standards of care. Unfortunately I believe that the study is flawed in design and interpretation for reasons given. I say that as someone who is a very strong supporter of both national training initiatives as well as psychological research.

**Level of interest:** An article of insufficient interest to warrant publication in a scientific/medical journal

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**
I declare that I have no competing interests