

Oxford Sarcoma Advisory Group – Meeting Minutes

Date: 4 March 2026 **Time:** 16:00–17:25 **Location:** Microsoft Teams **Chair:** Dr Sarah Pratap (Medical Oncology Consultant) **Co-Chair:** Mr Tom Cosker (Clinical Lead for Sarcoma)

1. Attendance

Present:

- Dr Sarah Pratap – Medical Oncology Consultant (Chair)
- Mr Tom Cosker – Clinical Lead for Sarcoma
- Dawn Sharples – Director Manager, Trauma, Orthopaedics & Rheumatology
- Mildred Okello – Sarcoma CNS
- Onyinye Ndefo – Lead Cancer Pharmacist
- John Williams – Clinical Scientist, Genomics
- Dennis Remoundos – Breast Surgeon
- Mary Tanay – Nurse Consultant in Genomics, Royal Berkshire Hospital
- Rob Stuart – Consultant Clinical Oncologist
- Zsolt Orosz – Consultant Pathologist (Sarcoma)
- Ellen Brooks – Sarcoma MDT Coordinator
- Vasiliki (Vicky) Tsolaki – Cancer Pharmacist
- Sally Trent – Consultant Clinical Oncologist
- Shaun Wilson -Consultant Paediatric Oncologist

Apologies:

- Emma Earnshaw - Macmillan ANP/NMP AO/SACT Lead Nurse- Bucks
- Harriet Branford White – Orthopaedic Surgeon OUH
- Sally Coutts – TVCA pharmacist
- John Park – TVCA Lead
- Natalie Adams - Rarer Cancer Specialist Nurse – Great Western Hospital

2. Welcome, Introductions & Context

Sarah welcomed attendees and explained the transition from the *Thames Valley Cancer Alliance Sarcoma Group* to the newly named **Oxford Sarcoma Advisory Group (SAG)**. This change follows reduced Alliance support and the need for a Sarcoma Advisory Group as per the National Sarcoma Service Specifications. The group will now operate with limited administrative support for meeting organisation or minutes.

A constitution drafted by Tom has been circulated. No immediate feedback was raised. Chair tenure is proposed as a **three-year term, renewable once**. Sarah and Tom are willing to continue as joint chairs but open to others expressing interest.

3. Action Log Review

3.1 Dragon Dictation at NOC

Action closed.

3.2 Trust Updates (Waiting Times)

Dawn to circulate updated waiting time data after the meeting.

“I can get them and I can distribute them in the next few days...”

3.3 PET Scan Reporting Delays

Ongoing issue.

- Follow-up PETs particularly delayed (up to 6 weeks).
- New diagnoses are reported more quickly.
- Ellen to send examples of delayed cases.
- Sarah to provide a direct escalation email for unreported scans.

“I know of a couple where we waited about six weeks.”

3.4 Genomics Update

- NHS England has withdrawn funding for Whole Genome Sequencing (WGS) sarcoma patients >24y unless exceptional situations – these need to be discussed and approved with the GLH lead
- Resulting in a significant reduction in WGS referrals.
- NGS demand increasing; new tumour entities defined by molecular signatures require NGS.
- Some diagnoses can still be made using specific immunohistochemistry to reduce molecular load.
- Under-25s still eligible for WGS.
- New Cancer plan does prioritise genetics and therefore there may be an expansion in wgs again in the future. NGS likely to continue increasing

“We were really disappointed with this cancellation of the WGS especially with the significant effort put into developing the service in Oxford”

3.5 SACT Protocol Review

- Several regimens require updating (MAP, 3-day ifosfamide, ifosfamide/doxorubicin, trabectedin, IVADo).
- Aim to align with paediatric protocols where relevant.
- Vicky and Sally coordinating; deadline 6 June.
- National ifosfamide shortage noted; contingency planning may be required.

3.6 Primary Care Education Event

Still outstanding. Options discussed:

- Link into existing GP education days.
- Present at Acute Oncology regional meetings.

3.7 Performance Data

Dawn to circulate separately.

3.8 Bone Tumour Peer Review – Action Updates

Critical outstanding action: **appointment of a dedicated physiotherapist.**

- To be included in upcoming business case for next substantive consultant post.
- Previous attempt removed by the division.
- If unsuccessful again, to consider alternative options eg; approach Macmillan for support.
- Acknowledged that the lack of a dedicated physiotherapist could put the service at risk

3.9 Retroperitoneal Sarcoma Service

- NHS England requires centres to operate on ≥ 24 cases/year.
- Oxford currently performs ~14–15/year.
- Other centres in the region (Bristol, Plymouth, Exeter) also operate small numbers.
- Discussion needed with regional SAGs about consolidation.
- Oxford aims to retain the service; capacity and theatre access remain concerns.
- Meeting with Trust Cancer Lead (PG Roy) to be arranged before SAG Chairs meeting on **22 April**.

3.10 Patient Representative

- GF is current patient rep appointed through TVCA but was not invited due to uncertainty over governance.
- Dawn advised he can attend targeted sections.
- Sarah to confirm with Catherine Mountain.
- Acknowledged that patient representation for this group is important

3.11 Communication with Referring Centres

- Improved but still can be variable.

- Royal Berkshire lacks a dedicated sarcoma CNS; skin CNS team currently covers.
- MDT email traffic remains a key communication route.
- Oncology has very good links with AOS teams in Bucks, MK, Reading, GWH

4. Work Plan (Q1 2026)

4.1 Pathways & Guidelines – Urgent Requirement

NHS England requires **published, clear, tumour-site-specific pathways**. Current Oxford website lacks sufficient detail.

Actions:

- Dawn to collate existing flowcharts.
- Each tumour-site lead to review/update 1–2 pathways.
- Aim for publication before NHS England meeting in 3 weeks.

4.2 Research Updates

- Good recruitment to OxPOS trial; expected to wind down soon.
- Two early-phase trials potentially opening (osteosarcoma and soft tissue sarcoma).
- AI pathology project progressing well; Oxford contributing cases.

5. Chemotherapy Guidelines (National Project)

Sarah to circulate British Sarcoma Group SACT national draft document for review by Vicky, Rob, and Leonidas. Aim: reduce variation in SACT regimens across UK sarcoma centres.

6. Paediatrics & TYA

Shaun joined briefly but left; Sarah to follow up separately.

7. British Sarcoma Group Conference 2026 in Oxford

The group acknowledged the success of this meeting, thanks offered to all who contributed

8. AOB

- Any Other Business
- Aim to improve attendance from referring units.
- Sally encouraged workload sharing across the group.

8.1 Next Meeting

Date: Wednesday 10 June 2026 **Time:** 15:00–17:00 **Format:** Microsoft Teams