

Vulval Multidisciplinary Teams Meetings:

The recently published BSSVD document entitled “Standards of Care for patients with Vulval Conditions” outlines the multidisciplinary team (MDT) as a key aspect of delivering high-quality care for women with vulval diseases.¹

A virtual vulval MDT was established in Glasgow, Scotland, in 2018. It has grown from a regional meeting and developed into a national, Scotland-wide virtual MDT forum. In this document, we share our experience of constructing a virtual vulval MDT and hope that similar models can be established across the United Kingdom.

Why MDT care matters

Vulval diseases can be complex, multisystem conditions and can present to a range of different medical specialties. Rare diseases can pose diagnostic challenges and, in some cases, there is limited evidence available to guide treatment. An MDT forum facilitates discussion of these challenging cases. It allows a consensus to be reached on appropriate investigation, diagnosis and management with input from a range of specialists with the aim of delivering the most effective patient care.

Members of the MDT

The BSSVD standards of care document recommends that vulval MDTs should have core membership from **Dermatology** and **Gynaecology**.¹ The Scottish vulval MDT is organised and chaired by Dermatology and Gynaecology Consultants. It is also regularly attended by specialists in **Sexual health, Oral medicine** and **Pathology**. Clinicians from **Ophthalmology, Ear Nose and Throat** and **Plastic Surgery** have attended the Scottish Vulval MDT meetings to give expert opinion for specific cases. In the future, we hope to include Allied Health Professionals such as Women’s Health **Physiotherapists** and **Clinical Psychologists** in the MDT forum.

Consultants, trainees and nursing staff from relevant specialties are invited to attend the MDT and encouraged to present interesting and challenging clinical cases and participate in discussion. To promote the forum, clinicians could be signposted via an email invitation. This can be sent to clinical leads in relevant specialties, who can disseminate information on the virtual MDT within their department.

Organisation and Structure

The Scottish virtual Vulval MDT runs approximately every 4 months. An invitation is sent out via Microsoft Teams to all members of the forum.

Clinical cases are invited through email invitation. These cases can be added to the agenda for clinical advice on diagnosis, investigation and treatment options or for interest and educational purposes. Clinicians who are presenting cases prepare a short Power Point presentation with relevant clinical details and clinical images. Presentations should not include any patient identifiable information to ensure patient confidentiality. However, patients should be consented and made aware that their anonymised clinical information will be discussed at the MDT.

An agenda is circulated ahead of the MDT meeting to all members. This is sent by email and Microsoft Teams.

The Scottish vulval MDT is chaired by Dr Isabelle Hay, Consultant Dermatologist. Clinicians are invited to share their presentations via the online platform. Often cases are presented by consultants but this is also a good opportunity for trainees to present clinical cases. The presentation is followed by an MDT discussion where members are invited to give their opinion and comments on the clinical case. The outcome of the discussion is noted by the presenting clinician and recorded for MDT documentation.

On average, there are 4 clinical cases discussed per meeting at the Scottish Vulval MDT. The most commonly discussed diagnoses have been multi-system Erosive Lichen Planus, severe Lichen Sclerosus and Vulval Intra-epithelial Neoplasia. Rarer diagnoses which have been discussed include Vulval Graft Versus Host Disease, Persistent Genital Arousal Disorder, Vulval Lupus and Vulval Crohn's Disease.

Particularly due to the sensitive nature of the cases discussed it is important that attendees exercise professionalism and join the meeting from an appropriate private clinical area and that the meeting invite is only shared with members of the MDT.

Educational Aspects

A vulval MDT is an excellent opportunity for training and education and allows experience to be shared by experts across different disciplines. Following discussion of the clinical cases, the Scottish Vulval MDT includes an educational presentation. MDT members can volunteer or a specialist can be invited to give a presentation on a clinical subject that is relevant and educational for the MDT members. Often the educational presentation is tailored to one of the clinical cases that has been discussed. Topics previously covered at the Scottish Vulval MDT include an update on Vulvodynia, Lichen Sclerosus and Urinary Incontinence, Persistent Genital Arousal Disorder and Vulval Crohn's Disease. These presentations have been a popular addition to the forum.

TOP TIPS

- Circulate the agenda by email/Microsoft Teams in advance of the MDT date to increase attendance. Repeated advertising helps participation!
- Invite and encourage attendance from ALL relevant specialties especially trainees; a wider breadth of experience in your MDT leads to more productive and in-depth discussion of diagnoses, investigations and treatment options for the patient.
- If a clinical case is being discussed for diagnostic purposes and a biopsy has been performed, consider asking for review of the histology by a Pathologist with an interest in vulval disease (hopefully an MDT member!). This requires sending histology for review before the meeting.

- Encourage presenters to include clinical photographs (with patient consent) in their presentations to allow more meaningful clinical discussion. Ensure presentations are anonymised to protect patient confidentiality.
- The educational session is important and thought is required to encourage participation from forum members. Inviting relevant speakers that are not members of the MDT can be productive and encourage new membership! Spreading the news of the MDT forum is helpful.
- Try to foster a supportive and collaborative environment to encourage discussion and participation in the MDT meetings. Encourage trainees to attend the meetings and present cases as these meetings are an excellent educational platform.

The Scottish Vulval MDT meetings have received highly positive feedback from members indicating that attendees feel the meetings are educational, improve communication and links between clinicians in different disciplines and, most importantly, improve patient care. With the recently developed BSSVD document “Standards of Care for patients with Vulval Conditions” defining MDT meetings as a standard of care, there is no better time to establish a vulval MDT in your region. We hope you have found this information helpful and look forward to hearing the experience of other vulval MDTs developed across the United Kingdom.

References

1. British Society for the Study of Vulval Disease, 2022. *Standards of Care for patients with Vulval Conditions*. Available from:
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