



## Follow-Up Guidelines Low-Grade Neuroendocrine Tumours April 2021

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**Low grade neuroendocrine tumours have long natural history** patients needed to be followed up for a decade and more after the surgery.

### **Recommended follow up:**

1. History and physical examination every 12 months for 10 years. Then if clinically indicated.
2. Triple phase CT scan of abdomen and pelvis once every year for 10 years. For patients younger than 40 years of age MRI of the abdomen and pelvis can be considered instead of CT surveillance.
3. For type 1 gastric neuroendocrine tumour  $\leq 2$  cm, esophagogastroduodenoscopy (EGD) once a year, and imaging studies only as clinically indicated.
4. For pulmonary tumours CT of the chest once every year for 10 years.

Post-treatment surveillance generally is not recommended for appendiceal tumours  $< 2$  cm and T1 low-grade rectal tumours  $< 1$  cm in size.

### **What to watch for:**

1. Symptoms of carcinoid syndrome such as cutaneous flushing associated with facial flushing with or without decrease in blood pressure, secretory diarrhea, shortness of breath with bronchospasm.
2. Weight loss.
3. Symptoms of bowel obstruction or bleeding.

### **References:**

1. Uptodate.com
2. [https://www.nccn.org/professionals/physician\\_gls/pdf/neuroendocrine.pdf](https://www.nccn.org/professionals/physician_gls/pdf/neuroendocrine.pdf)