

New guidelines for managing mucositis now available

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The new guidelines show that natural honey may help prevent oral mucositis for patients with head and neck cancer. Credit: University of Rochester Medical Center

Updated clinical practice guidelines for managing mucositis, a very common and often debilitating complication of cancer therapy, was recently published in the journal *Cancer*. Patients experiencing mucositis often require enteral or parenteral nutrition, consume more opioids, and

experience more interruptions to cancer therapy than patients who do not experience mucositis.

The new guidelines summary, which will provide healthcare professionals better tools to deliver care for [cancer patients](#), is the result of extensive and meticulous literature review and clinical interpretation by the Multinational Association of Supportive Care in Cancer/International Society of Oral Oncology. The MASCC/ISOO charged its Mucositis Study Group, comprised of 250 experts from 33 countries, to conduct the systematic review.

Led by Sharon Elad, DMD MSc, professor at the University of Rochester Medical Center's Eastman Institute for Oral Health, the Mucositis Study Group's major goal is to improve outcomes of patients experiencing mucositis associated with [cancer](#) therapies.

Mucositis affects the inner lining of the oral and gastrointestinal tract. Oral mucositis often leads to difficulty eating and swallowing. Gastrointestinal mucositis is associated with nausea, vomiting, diarrhea, bloating, intestinal cramping, and anal pain. For patients who are immunosuppressed, oral mucositis is associated with greater risk for bacteremia, which has possible systemic implications.

Highlights from this newly published summary paper include additional recommendations for the use of photobiomodulation therapy and benzydamine, as well as a stronger guideline statement for cryotherapy. Each of these guidelines is defined for a specific setting and cancer patient population.

"Interestingly, natural honey had sufficient evidence, when used topically and then swallowed, to suggest possible mucositis prevention for patients with head and neck cancer who receive treatment with either radiotherapy or radio-chemotherapy," said Dr. Elad.

"But it's important to note that the long-term effect of this intervention is unclear at this point," she added. "Even with the best evidence-based interventions, we don't have an ultimate guideline for mucositis in all clinical settings. Future research will hopefully identify better interventions that will relieve the patient's pain and improve quality of life."

This summary paper captures the highlights of a series of frequently cited detailed publications describing the approach to various categories of interventions. This includes the following categories for oral mucositis: (1) anti-inflammatory agents, (2) photobiomodulation therapy, (3) protocols categorized as basic oral care, (4) [growth factors](#) and cytokines, (5) antimicrobials, mucosal coating agents, anesthetics, and analgesics, (6) cryotherapy, (7) vitamins, minerals, and nutritional supplements, (8) natural and miscellaneous agents. Likewise, it includes a guidelines publication about all interventions for gastrointestinal mucositis.

The 2019/20 guidelines update is a landmark paper on the evolution of the mucositis [clinical practice guidelines](#). The first MASCC/ISOO guidelines paper was published in 2003 and updated in 2007 and 2014. The continuous update of the guidelines is done by a large multi-disciplinary group of clinicians and scientists using meticulous methods which incur validity and applicability. Projects carried out by the various MASCC/ISOO Study Groups result in clinical practice guidelines, position papers, publications, and other products that advance supportive care in cancer.

More information: Sharon Elad et al, MASCC/ISOO clinical practice guidelines for the management of mucositis secondary to cancer therapy, *Cancer* (2020). [DOI: 10.1002/cncr.33100](https://doi.org/10.1002/cncr.33100)

Provided by University of Rochester Medical Center

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