

Evidence-based ambulatory self-management advice for oncological patients with oral mucositis receiving systemic therapy: A scoping review

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Introduction

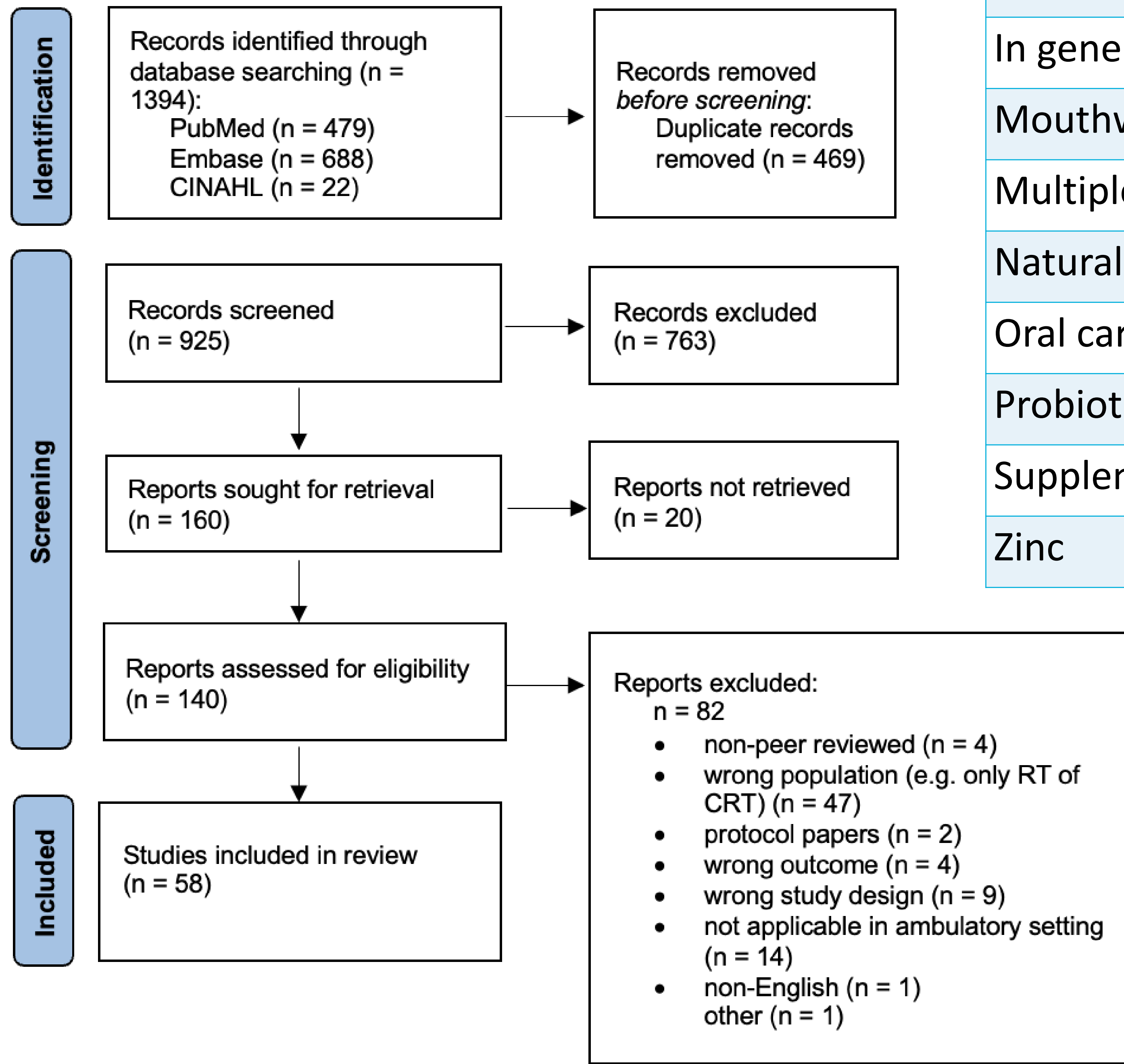
- Oral mucositis (OM) is a common side effect of systemic cancer treatment
- OM Impacts quality of life and treatment adherence
- Self-management strategies** can reduce symptoms and empower patients during treatment
- Current self-management advice for the ambulatory setting is often inconsistent and based on practical experience
- Aim** To identify and assess evidence-based self-management advice for oncology patients with OM undergoing systemic therapy, applicable in the ambulatory setting

- Articles were imported into Rayyan’s Systematic Review Screening Software®
- Articles will be summarized and assessed by the research team
- Consensus on the recommendations will be achieved through focus groups (with e.g. oncologist, dentist, nursing specialist)
- Results will be incorporated on national patient-information website on side effects

Methods

- Scoping review
- Databases: PubMed, Cinahl, Embase
- Literature from 2014-2024
- Inclusion criteria:
 - SR, MA, RCT, guidelines
 - Published from 2014-2024
 - Published in English
 - Published in peer-reviewed journals
 - Patients ≥ 18 years
- Exclusion criteria:
 - Articles only concerning RT or CRT
- Grey literature: Relevant clinical guidelines from (inter)national scientific societies were assessed

Preliminary results



*58 articles were identified, with several appearing across multiple themes in the thematic analysis

Figure 1. Flowchart of the data collection and selection process

Table 1. Thematic groups* (literature search)	
Curcuma / Tumeric / Chamomile	n = 9
Glutamine	n = 9
Honey	n = 14
In general	n = 5
Mouthwashes	n = 10
Multiple interventions	n = 6
Natural agents	n = 10
Oral care	n = 5
Probiotics	n = 8
Supplements	n = 14
Zinc	n = 5

Table 1. Overview advice and literature										
Intervention	Total articles literature search	Clinical impact			Evidence for recommendation					Recommendations
		Prevention	Treatment	Safety	MA or SR		RCT		Grey literature	
					Negative or inconclusive	In favor	Negative or inconclusive	In favor		

Abbreviations: SR = systematic review; MA = meta-analysis; RCT = randomized controlled trial; RT = radiotherapy; CRT= chemoradiotherapy