

APPENDIX 13: RANDOMIZED CONTROLLED TRIALS OF ANY INTERVENTION FOR THE PREVENTION OF ORAL MUCOSITIS IN PEDIATRIC PATIENTS RECEIVING TREATMENT FOR CANCER OR UNDERGOING HEMATOPOIETIC STEM CELL TRANSPLANTATION – OUTCOMES

First Author (Year)	COMPARISONS	OUTCOMES				
		Number Received Intervention Group 1	Number Received Intervention Group 2	Description of Main Mucositis Findings	Description of Main Pain Findings	Description of Adverse Events
Patte (2002) [1]	Lenograstim versus no lenograstim	75	73	Incidence grade 3 and 4 mucositis similar between arms	Not reported	Not reported
Michel (2000) [2]	Lenograstim versus no lenograstim	34	33	GCSF reduced incidence mucositis (6% vs 19%; P=0.04) after R3 but not after COPADM (65% vs 75%; P=NS)	Not reported	Not reported
Lehrnbecher (2007) [3]	GCSF versus no GCSF	161	156	GCSF no impact on incidence grades 3 and 4 mucositis (26.6% with GCSF vs 23.6% without GCSF; P=0.59)	Not reported	Not reported
Ladenstein (2010) [4]	Filgrastim versus no filgrastim	110	114	Grade 2 to 4 mucositis significantly less with GCSF (2%) compared with no GCSF (6%; P=0.002)	Not reported	Tolerance to GCSF good, only expected adverse effects reported
Cesaro (2013) [5]	Pegfilgrastim versus filgrastim	32	29	No significant difference in Grade 2 to 4 mucositis with GCSF (76%) vs pegfilgrastim (59%). No significant difference in severity or duration between groups	Not reported	Both pegfilgrastim and filgrastim well tolerated, no significant adverse effects
Fox (2009) [6]	Pegfilgrastim versus filgrastim	17	17	Grade 2 to 4 mucositis occurred in 4 patients with pegfilgrastim and 7 patients with GCSF, respectively, during cycles 1 to 4	Not reported	Pegfilgrastim and GCSF well tolerated, adverse events similar between arms
Wexler (1996) [7]	GMCSF versus no GMCSF	19	18	No significant differences in mucositis grade in cycles 1-2 and 3-18 between GMCSF and control groups	Not reported	Not reported
Uderzo (2011) [8]	Glutamine enriched versus standard nutrition	60	58	Mucositis in the first 3 to 4 weeks from HSCT in 94.8% and 96.7% in standard and glutamine enriched groups (P=0.68)	Not reported	Not reported
Aquino (2005) [9]	Glutamine versus glycine	57	63	Mean mucositis score 3.0±0.3 vs 3.9±0.4 (P=0.07) in glutamine and glycine groups. No difference in maximum mucositis score (P=0.7)	Not reported	No statistically significant difference in toxicity between groups
Ward (2009) [10]	Enteral glutamine versus no glutamine	50	50	No significant difference in severe mucositis (P=0.942) or duration of severe mucositis	Not reported	No adverse effects attributed to glutamine
Sencer (2012) [11]	Traumeel S versus placebo	98	92	Mean Walsh area under curves similar in two groups: 71.7 (SE 7.2) with Traumeel S and 69.8 (SE 8.2) with placebo. No difference in WHO scores.	Not reported	No significant difference in adverse events between group
Oberbaum (2001) [12] (companion paper: [13])	Traumeel S versus placebo	15	15	33% with Traumeel S did not develop mucositis vs 7% with placebo. Mean area under curve mucositis scores 10.4 with Traumeel S vs 24.3 with placebo (P<0.01).	5 in Traumeel S group had any oral pain vs 14 in placebo group	High incidence of serious complications but no significant difference between the groups

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Abramoff (2008) [14]	Low level light therapy versus placebo	11	11	At the third evaluation, 73% prophylactic laser group did not have mucositis vs 27% placebo (P=0.03)	Not reported	Not reported
Cruz (2007) [15]	Low level light therapy versus no low level light therapy	29	31	No significant difference in mucositis grade on day 8 (P=0.234) or day 15 (P=0.208)	Not reported	Not reported
Raether (1989) [16]	Chlorhexidine versus placebo	23	24	No significant difference in severity of oral ulceration between chlorhexidine and placebo groups (P=0.18)	Not reported	Not reported
Cheng (2004) [17] (companion papers:[18] , [19])	Benzydamine versus chlorhexidine	40	40	Ulcerative lesions in 27% (chlorhexidine) and 59% (benzydamine) (P<0.05). 26% and 48% using chlorhexidine and benzydamine had WHO grade 2 mucositis (P<0.05)	Significant difference in mean area under the curve of mouth pain (chlorhexidine 1.35±2.26 vs benzydamine 3.09±3.21; P=0.05)	Not reported
Shenep (1988) [20]	Sucralfate versus placebo	24	24	Objective observers noted more moderate and severe oral ulceration in placebo vs sucralfate groups (38% vs 12%; P=0.12)	58% patients sucralfate reported no oral pain vs 25% placebo (P=0.06)	8 in placebo and 4 in sucralfate experienced rashes (P=0.18). One placebo patient had unexplained papilledema
Sung (2007) [21]	Topical vitamin E versus placebo	22	23	No difference in objective mucositis scores with mean score 0.2 with vitamin E vs 0.3 with placebo	Vitamin E did not reduce pain VAS scores, mean scores of 0.9 (on a scale of 0–10) in each group	No unexpected toxicity with topical vitamin E. Many children complained study solution difficult to use because of oily texture
de Koning (2007) [22]	TGF-b2-enriched feeding versus placebo	25	25	Grade 3 or 4 mucositis occurred in 40% with TGF-b2-treatment vs 32% with placebo	Not reported	No significant difference between the TGFb2 and placebo arms for any of toxicity parameters
Gandemer (2007) [23]	Chewing gums versus no chewing gum	73	72	No overall reduction in severe oral mucositis in gum (51%) vs control arms (44%; P=0.67)	Unable to assess pain because too few evaluations	Proportion of patients experiencing adverse events did not differ between arms
Rojas de Morales (2001) [24]	Oral disease preventive protocol versus oral physiotherapy	5	7	No significant difference in mucositis (P>0.05)	Not reported	Not reported

Abbreviations: GCSF – granulocyte colony stimulating factor; GMCSF – granulocyte-macrophage colony stimulating factor; NS – not significant; HSCT – hematopoietic stem cell transplantation; SE – standard error; VAS – visual analogue scale

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