Conclusions

- Oral mucositis is a clinically significant complication of mucotoxic cancer therapy.
- The incidence of oral mucositis (grade any) as an adverse drug reaction of everolimus is 58%. In an analysis of Asian people, its occurrence was reported at 51%.
- Prophylactic professional oral care reduces the risk of oral mucositis. This study clearly demonstrated that the occurrence of oral mucositis were significantly less compared to the control group.

Hypothesis and Study Objectives

Hypothesis:

The occurrence of oral mucositis will be reduced by the implementation of professional oral care in patients undergoing adjuvant chemotherapy.

Primary endpoint: Incidence of oral mucositis (grade greater than or equal to 1)

Secondary endpoint: 1) Incidence of oral mucositis (grade greater than or equal to 2) (evaluated by an oncologist and dentist); 2) incidence of oral mucositis (grade greater than or equal to 3) (evaluated by an oncologist and dentist); 3) incidence of oral mucositis (grade greater than or equal to 1) (evaluated by a dentist); 4) time to the onset of oral mucositis; 5) duration of each grade of oral mucositis; 6) each ratio of patients in suspension, or dose-reduction of everolimus treatment due to oral mucositis; 7) Oral Assessment Guide (Revised); 8) Health-related quality of life (HRQOL); and 9) time to treatment failure (TTF)

Patient Characteristics

From 31 institutions

Enrollment period: Mar 2015 - Dec 2017

POC group (Professional Oral Care )

Control (C) group

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Risk Difference, % (95% CI) 1.183 (-22.80, -0.85)

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