

Exploring the Role of “Glycerine plus Honey” in Delaying Chemo radiation Induced Oral Mucositis in Head and Neck Cancers

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Aim: To assess the efficacy of adding “Glycerine plus Honey” to standard management protocol, in terms of time to delay in oral mucositis \geq grade 2.

Materials and Methods: Hundred patients of oral cavity and oropharyngeal cancers, planned for concurrent chemo radiation (Dose: 60–66Gy/30-33fractions/6 weeks) were randomized 1:1 to receive either home-made remedy made of “Glycerine plus Honey” added to the standard management protocol to prevent mucositis versus standard treatment alone. CTCAE v 4 (Common toxicity criteria for adverse events) was used for assessing oral mucositis scores weekly. Chi square test was used to compare mucositis scores, weight loss, opioid use, ryles tube feeding, and unplanned treatment breaks in each cohort. Independent T-test was used to compare means to assess the effect of treatment in delaying mucositis \geq grade 2.

Results: Significantly higher number of patients developed grade \geq 2 mucositis in control arm [n=43 (86%)] compared to study arm [n=30 (60%)] (p=0.003). CTCAE scores favored Glycerine plus honey at week 4, and on last day of radiotherapy. Whereas, time to first occurrence of oral mucositis grade \geq 2 was 23.17 (\pm 1.01) days for study arm [radiation dose 31.67Gy (\pm 1.44)], it was 20.65 (\pm 0.8) days for control arm [radiation dose 28.14Gy (\pm 1.16)] (p=0.05). Study patients had lesser weight loss (2.76Kg) than control subjects (3.9Kg) with p=0.008. There were significantly higher number of patients in control arm who required opioid analgesia, ryles tube insertion and had unplanned treatment breaks, compared to study arm.