

# Addressing the Utility of Guidelines for Oncological Management of Salivary Gland Malignancies



## BACKGROUND

Salivary Gland Cancers (SGCs) are rare and heterogeneous malignancies encompassing a wide range of histologic subtypes, clinical behaviours, and prognoses.

This diversity poses significant challenges to management due to the limited availability of high-level evidence, as most recommendations are derived from retrospective studies and small cohort analyses.

The UK Salivary Gland Cancer Research Working Group (UKSGCRWG), formed in 2024 (1), is a collaboration of multi-disciplinary experts and patients working together to identify the gaps in SGC research and develop and deliver strategic priorities to improve patient outcomes. One of the top four priorities is addressing the utility of the existing guidelines as there are currently no comprehensive UK guidelines for SGC.

## METHODOLOGY & OBJECTIVES

Following a series of face to face and online discussions, two objectives were identified.

1. A systematic literature review of the existing national and international guidelines for the oncological management of SGCs focussing on areas of consensus, variations and gaps in recommendations.



2. In parallel to above, a survey questionnaire was developed to UK practising medical and clinical oncologists to provide a snapshot of the current clinical practices and identify areas where there is lack of consensus in radiotherapy, systemic treatments and follow up of patients with metastatic disease.



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## RESULTS OF SYSTEMATIC REVIEW

Major guidelines from ASCO (2021) (2), ESMO-EURACAN (2022) (3), NCCN (2025) (4), UK MDT (2024) (5), AWMF (2025) (6), ASTRO and ESTRO were thematically analysed for radiotherapy, systemic therapy, and survivorship recommendations.

### Post operative radiotherapy(PORT):

- Strong consensus on PORT in adenoid cystic cancers
- For other SGC histologies, specific thresholds for adverse features are variable between guidelines
- Recommendations for elective nodal treatment represents major practice variation
- There is a paucity in specific guidance on minor salivary gland cancers
- There is growing interest in proton beam therapy and heavy particle therapy with ongoing trials yet to be published

### Molecular testing and targeted therapy:

- Guidelines diverge substantially on molecular testing requirements and targeted therapy recommendations.

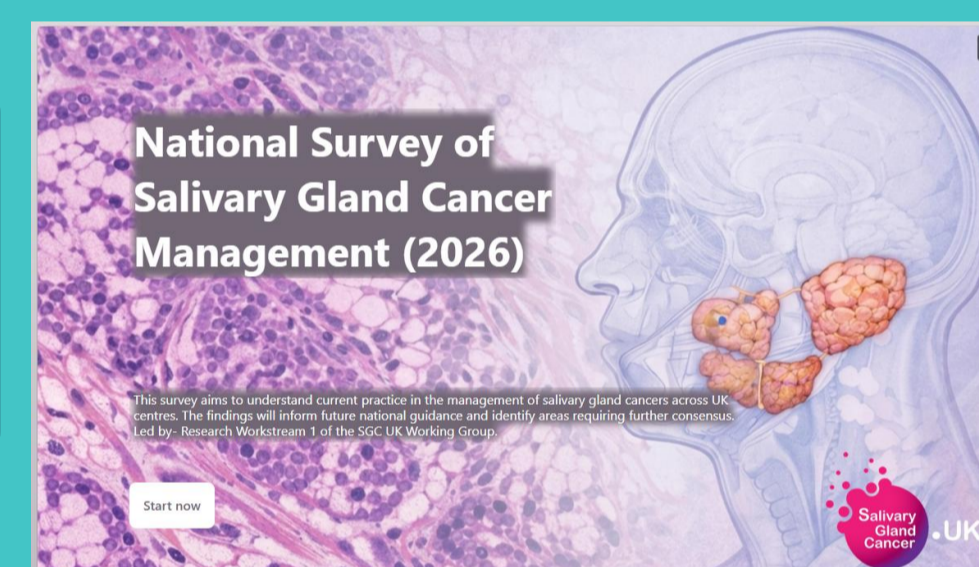
### Recurrent/Metastatic disease:

- All guidelines prioritise clinical trials but implementation gaps persist in translating guidelines into practice despite preliminary efficacy data.

### Survivorship and Quality of Life:

- This area remains notably under developed. Neither ASTRO nor ESTRO provide SGC specific follow-up protocols or survivorship guidelines.

## THE UK NATIONAL SURVEY



**Survey design:** 5 Sections Takes 15-20 mins  
Major and Minor SGCs

Histopathology parameters provided in the MDT

Adjuvant RT: Indications Doses Target volumes

Principles of Definitive RT in inoperable SGCs

Recurrent/ Metastatic disease

Follow-up/ Survivorship

### Target audience:

Clinical and Medical Oncologists managing salivary gland malignancies with current practice in the UK.

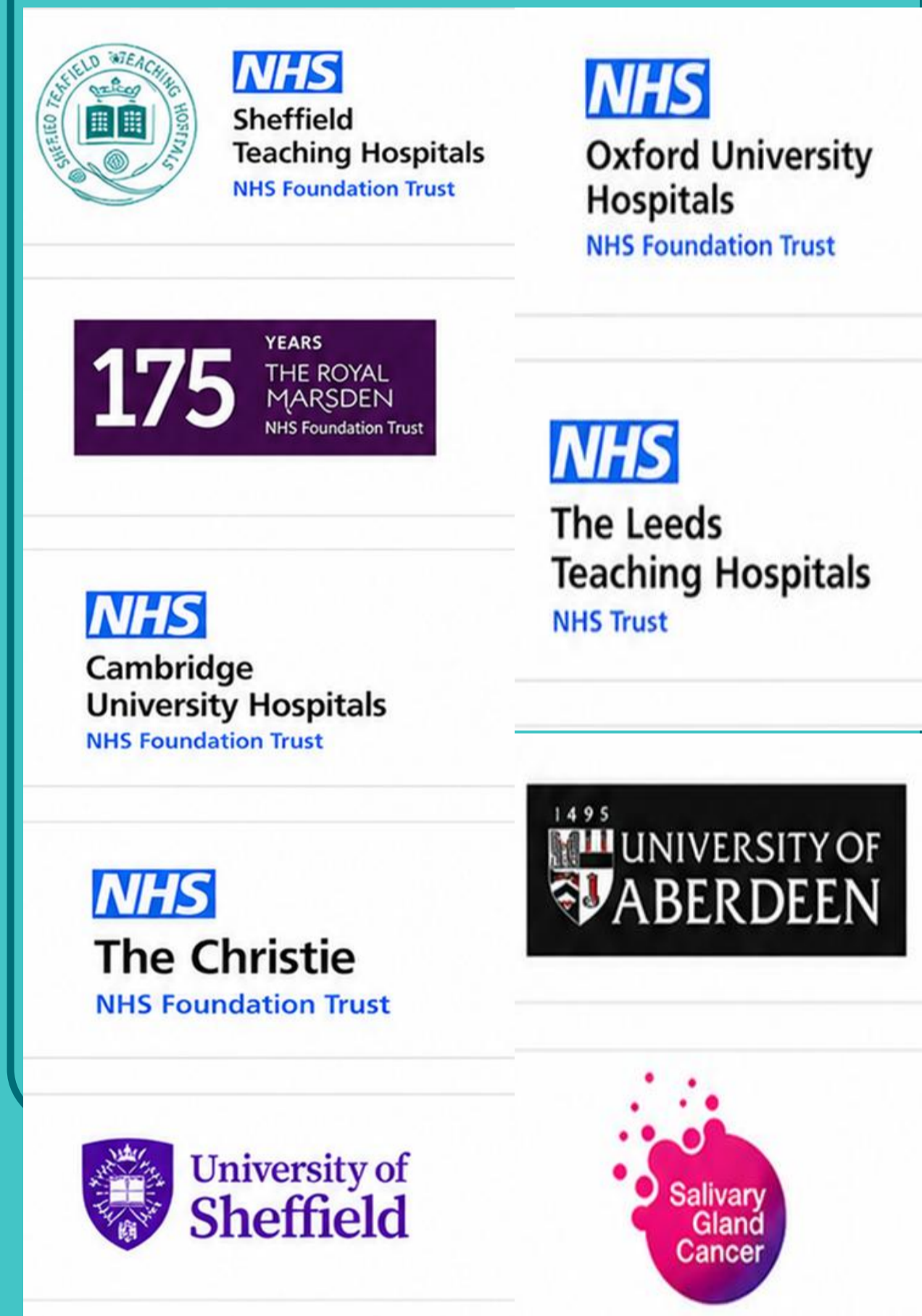
Surgeons(ENT & OMFS) managing SGCs with current practice in UK for questions on indications for adjuvant treatment and follow up.

### Potential benefits

The results of this survey will provide us an overview of current practices will help us understand areas of consensus and variation to guide future developments.

## CONCLUSIONS

SGCs are a diverse group and there is paucity of guidance to address both the needs of treating clinicians and patients. A lack of guidance can lead to a potential for variation in practice and inconsistent and poorer patient prognoses and outcomes. Assessing the current available guidelines, identifying the gaps within them and understanding current UK clinical practice provides a clear understanding of the unmet needs in this clinical pathway and suggestions for the next steps of potential guideline development.



## REFERENCES

ALL REFERENCES AVAILABLE ON THE WEBSITE, ACCESSIBLE THROUGH THE QR CODE

SCAN ME TO COMPLETE THE SURVEY

