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<th>Guideline Page and Request</th>
<th>Panel Discussion</th>
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<td>Anaplastic Gliomas/Glioblastoma GLIO-3 (Newly diagnosed Glioblastoma) and GLIO-4 (Recurrent Glioblastoma)</td>
<td>Based on the data and discussion, the panel supported not voting on or add alternating electric field therapy as an option for newly diagnosed glioblastoma patients for the 1.2015 version of the NCCN Guidelines for Central Nervous System Cancers. Although the reported trial was in newly diagnosed patients, the panel recommendation for the guidelines is to wait for full publication of the trial in order to review and fully analyze the data for this treatment option.</td>
<td>N/A 8 N/A</td>
<td>Stupp R, Wong ET, Scott CB, et al. NT-40 Interim analysis of the EF-14 trial: A prospective, multi-center trial of NovoTTF-100A together with temozolomide compared to temozolomide alone in patients with newly diagnosed GBM. Neuro Oncol. 2014;16(Suppl 5):v167 and slides presented and distributed at the 19th Annual Scientific Meeting of the Society for Neuro-Oncology; Nov 13-16, 2014; Miami, FL.</td>
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<td>GLIO-4 (Recurrent Glioblastoma) Based on the data and discussion, the panel consensus for patients with diffuse or multiple recurrence was to change the treatment recommendation “Consider alternating electric field therapy for glioblastoma” from a category 3 to a category 2B.</td>
<td>17 8 4</td>
<td>Mrugala MM, Engelhard HH, Dinh Tran D, et al. Clinical practice experience with NovoTTF-100A system for glioblastoma: The Patient Registry Dataset (PRIDe). Semin Oncol 2014;41 Suppl 6:S4-S13. Available at: <a href="http://www.ncbi.nlm.nih.gov/pubmed/25213869">http://www.ncbi.nlm.nih.gov/pubmed/25213869</a>.</td>
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| Submission from Accelerate Brain Cancer Cure to expedite review of Novocure’s NovoTTF-100A system (now “Optune”) to determine whether there is sufficient evidence and agreement to declare it appropriate for the treatment of newly diagnosed and recurrent glioblastoma.  
(11/24/15) |
| --- |
| Submission from the Musella Foundation For Brain Tumor Research & Information, Inc, requesting the NCCN Central Nervous System Panel to reconsider the category 3 recommendation for “Alternating electric field therapy for glioblastoma”, and change it to a category 1 for recurrent glioblastoma. Add the recommendation for “Alternating electric field therapy for glioblastoma”, as category 1 for newly diagnosed glioblastoma.  
(11/24/14) |
| Submission from the National Brain Tumor Society to expedite review of Novocure’s NovoTTF-100A system (now Optune) to determine whether there is sufficient evidence and consensus to declare it appropriate for the treatment of the newly diagnosed in addition to recurrent glioblastoma multiforme (GBM)  
(11/25/14) |
| Vymazal J, Wong ET. Response patterns of recurrent glioblastomas treated with tumor-treating fields. Semin Oncol 2014;41 Suppl 6:S14-24. Available at:  
| Salzberg M, Kirson E, Palti Y, Rochlitz C. A pilot study with very low-intensity, intermediate-frequency electric fields in patients with locally advanced and/or metastatic solid tumors. Onkologie 2008;31:362-365. Available at:  
**Primary CNS Lymphoma**

**PCNS-2**
Internal request: Suggest adding high-dose chemotherapy with stem cell rescue as an option for patients with disease in complete remission after induction therapy.

Based on the review of the data and discussion, the panel consensus was to add “High-dose chemotherapy with stem cell rescue” as a consolidation therapy option to consider for patients with disease in complete remission after induction therapy.

**PCNS-3**
Internal request: Suggest adding second high-dose chemotherapy with stem cell rescue as a treatment option for relapsed or refractory Primary CNS Lymphoma.

Based on review of the data and discussion, the panel discussion was to add the recommendation “Consider second high-dose chemotherapy with stem cell rescue” as a treatment option for relapsed or refractory Primary CNS Lymphoma.

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Panel may have considered additional literature that informed their vote.