

NCCN Guidelines for Myeloid Growth Factors V.1.2018 – Web teleconference on 09/06/2017

Guideline Page and Request	Panel Discussion/References	Institution Vote			
		YES	NO	ABSTAIN	ABSENT
<p><b>MGF-1</b> External request:</p> <p>Submission from William Stephenson, MD at Research Medical Center, Sarah Cannon Cancer Center to consider providing further direction on when to use myeloid growth factors in the palliative setting.</p>	<p>Based on the discussion, the panel consensus was not to make changes to the current recommendations.</p>	0	18	0	9
<p><b>MGF-A (2 of 4)</b> External request:</p> <p>Submission from Amgen Inc., to review the data for CHOP and R-CHOP for the treatment of non-Hodgkin lymphoma. Request to consider moving CHOP and R-CHOP from the list of examples with an intermediate risk for febrile neutropenia to the list of examples with a high risk for febrile neutropenia.</p>	<p>Based on the data in the references noted in the submission, the panel consensus was not to make changes to the current recommendations. It is noted in the guidelines that the chemotherapy regimen is only one component of the risk assessment for febrile neutropenia. To determine the overall risk of febrile neutropenia the complete risk assessment should be considered, including patient risk factors.</p> <p>See Submission for references.</p>	0	18	0	9
<p><b>MGF-A (2 of 4)</b> Internal request:</p> <p>Institutional Review comment to consider removing CMF classic (cyclophosphamide, methotrexate, fluorouracil) from the list of examples of breast cancer regimens with an intermediate risk for febrile neutropenia based on the removal of the regimen from the NCCN Guidelines for Breast Cancer.</p>	<p>Based on the noted reference and that the regimen was removed as an option from the NCCN Guidelines for Breast Cancer, the panel consensus was to remove CMF classic (cyclophosphamide, methotrexate, fluorouracil) from the list of examples of breast cancer regimens with an intermediate risk.</p> <p>Reference: Bonadonna G, Brusamolino E, Valagussa P, Rossi A, Brugnatelli L, Brambilla C et al. Combination chemotherapy as an adjuvant treatment in operable breast cancer. N Engl J Med 1976; 294(8): 405-410.</p>	18	0	0	9
<p><b>MGF-D (2 of 4)</b> Internal request:</p> <p>Panel discussion to reassess the inclusion of sargramostim as a supportive care option for mobilization post hematopoietic cell transplant.</p>	<p>Based on the discussion the panel consensus was to remove sargramostim as a supportive care option for mobilization post hematopoietic cell transplant due to limited clinical use.</p>	18	0	0	9