

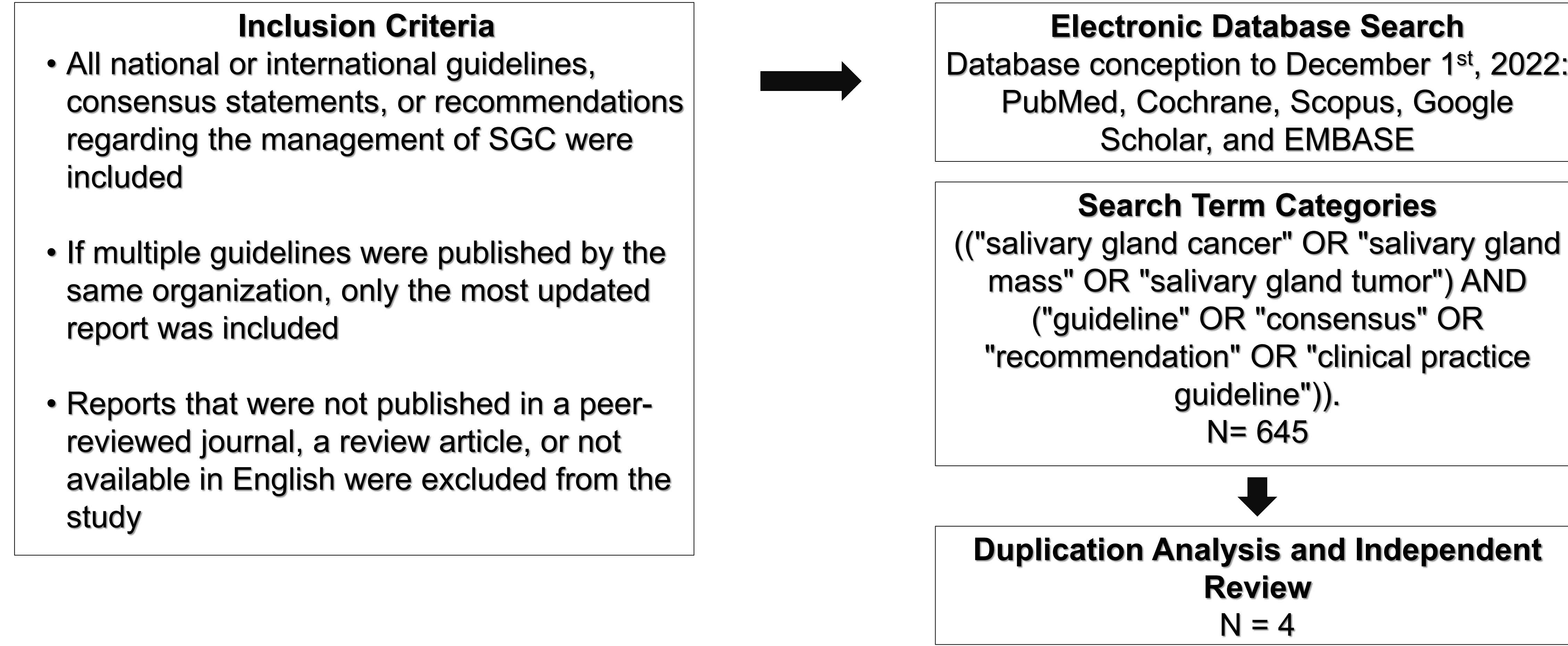
**Introduction**

- Salivary gland cancers (SGCs) are rare neoplasms which comprise 3-10% of all head and neck tumors<sup>1</sup>
- High variability and little standardization in clinical practice guidelines for treatment and management of SGCs
  - Due to the multidisciplinary approach and rarity of SGCs
- Objective:** To assess the quality of CPGs regarding SGC management utilizing the AGREE II instrument

**Methods**

- AGREE-II instrument assesses the quality and rigor of CPGs via 6 domains: Scope and Purpose, Stakeholder Involvement, Rigor of Development, Clarity of Presentation, Applicability, and Editorial Independence<sup>2</sup>
- Each domain contains several questions, with 23 total items to be scored graded on a 7-point scale (1-strongly disagree; 7-strongly agree) based on completeness and quality of reporting
- Each CPG was independently reviewed by each of the authors and scored with the AGREE-II instrument manual as reference
- Interclass Correlation Coefficient (ICC) were performed to measure the degree of consistency between each of the four reviewers
- Scores for each item were added across reviewers to form an “aggregate score” following AGREE II manual calculations
- For each domain, the threshold for “satisfactory” was generated to be >60%, and a CPG was deemed “high quality” if it contained >4 satisfactory domains

**Clinical Practice Guideline Systematic Review**



**Final:** Hand searching identified two additional CPG to yield six total studies

**Table**

Quality Appraisal of Included CPGs using Scaled Domain Scores								
Organization	Scope and Purpose (%)	Stakeholder Involvement (%)	Rigor of Development (%)	Clarity of Presentation (%)	Applicability (%)	Editorial Independence (%)	Average Score (Mean)	Overall Quality
United Kingdom Associations	36.11	12.50	6.25	77.78	11.46	0.00	24.02	Low
University of Rome	75.00	41.67	19.79	29.17	15.63	85.42	44.45	Low
NCCN	58.33	44.44	36.98	62.50	25.00	72.92	50.03	Low
ASCO	94.44	88.89	92.71	97.22	91.67	100.00	94.16	High
PARTNER	84.72	26.39	18.23	59.72	20.83	89.58	49.91	Low
ESMO-EURACAN	30.56	22.22	30.21	61.11	16.67	87.50	41.38	Low
<b>Mean ± SD</b>	63.19 ± 23.8	39.35 ± 24.7	34.02 ± 27.9	64.58 ± 20.5	30.21 ± 27.8	72.57 ± 33.4		

**Note.** Yellow = highest, Green = lowest

**Results**

- 2 CPGs were developed by cancer societies in the USA
- 4 CPGs were developed by European medical societies (Italy, UK, and two between collaborative societies in the EU)
- ICC scores ranged from 0.937-0.983, indicating a high level of inter-rater agreement between reviewers across all domains
- Only the ASCO was determined to be of “high quality” per predetermined criteria
- The domain with the highest score was Editorial Independence followed by clarity and presentation while the lowest overall score was applicability

**Discussion/Conclusion**

**Limitations:**

- Accuracy and scientific validity of CPGs were not assessed
- This topic includes relatively uncommon diagnoses, and there exists a paucity of randomized controlled trials from which to draw high-quality evidence
- The grading of the guidelines themselves is subjective and dependent on reviewer discretion
  - This limitation is partially mediated by using independent reviewers as well as ICC testing

**Conclusions:** CPGs for SGC require greater standardization and validation of methodology

**References**

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- Brouwers MC, Kho ME, Browman GP, et al. AGREE II: Advancing guideline development, reporting and evaluation in health care. *C Can Med Assoc J.* 2010;182(18):839-842. doi:10.1503/cmaj.090449

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