On behalf of the Society of Interventional Oncology, we respectfully request the NCCN Palliative Care Guideline panel review the enclosed data for inclusion in the NCCN Palliative Care Guidelines: inclusion of the recommendation for Interventional Radiologist (IR) consultation along with pain management and palliative care for all oncology patients.

Specific Change 1: Category 2A – Under unacceptable outcomes add consultation with an interventional radiologist along with pain management or palliative care specialist.

Rationale: Interventional Radiologists have a significant role in diagnosis and management of many cancer patients via both therapeutic and diagnostic procedures.

The increasing involvement of the interventional radiologist in care of the cancer patient has led to many novel treatment regimens as well as palliation strategies. Palliative procedures such as vertebroplasty, fluid management (ex. pleural, abdominal and venting drainage catheter placement), and pain control procedures (ex. Celiac Plexus, hypogastric, intercostal, pudendal blocks) are underutilized but highly beneficial procedures that are provided by interventional radiologists. Percutaneous image guided ablation (both radiofrequency ablation and cryoablation) have been shown to provide excellent pain relief for skeletal metastases.

Change references

2. Position Statement on Percutaneous Vertebral Augmentation: A Consensus Statement Developed by the Society of Interventional Radiology (SIR), American Association of Neurological Surgeons (AANS) and the Congress of Neurological Surgeons (CNS), American College of Radiology (ACR), American Society of Neuroradiology (ASNR), American...
Society of Spine Radiology (ASSR), Canadian Interventional Radiology Association (CIRA), and the Society of NeuroInterventional Surgery (SNIS)


SIO also respectfully suggests that NCCN consider having an interventional radiologist participate as a panel member to add further multidisciplinary input and perspective on future versions of these guidelines.

Sincerely,
William Rilling, MD FSIR
Sean Tutton, MD, FSIR
Kristofer Schramm, MD, FSIR