

<b>National Imaging Associates, Inc.*</b>	
<b>Clinical guidelines: NON-CANCEROUS CONDITIONS</b>	<b>Original Date: March 2015</b>
<b>Radiation Oncology</b>	<b>Last Revised Date: February 2020</b>
<b>Guideline Number: NIA_CG_135</b>	<b>Implementation Date: January 2021</b>

## INDICATIONS FOR RADIATION THERAPY

2 D or 3D Conformal (3D CRT) is considered medically necessary for several non-malignant conditions including but not limited to (McKeown, 2015):

- Prevention of keloid scars as an adjunctive therapy following excisional surgery
- Heterotopic ossification
- Pterygium in cases that cannot be medically managed
- Villonodular synovitis

Stereotactic Radiation Therapy (SRS, SBRT) is considered medically necessary when used in the treatment of non-malignant cranial lesions including the following (ASTRO, 2014):

- Arteriovenous malformation (AVM) of the brain or spine.
- Trigeminal neuralgia that has not responded to other, more conservative, treatments.
- Non cancerous brain tumors such as acoustic neuroma, benign schwannomas, meningioma, hemangioma, pituitary adenoma, craniopharyngioma, neoplasm of the pineal gland, and chordomas

Also refer to NIA Stereotactic Radiation Therapy Guideline.

## TREATMENT OPTIONS REQUIRING PHYSICIAN REVIEW:

Treatment for other non-malignant conditions utilizing proton beam, stereotactic radiation therapy (SBRT), or intensity modulated radiation therapy (IMRT) modalities should be referred to physician review.

## BACKGROUND:

Radiation therapy may have appropriate use in several non-malignant conditions. The treatment goal in patients with non-malignant conditions is to achieve relief of the indicated condition with radiation therapy with minimal risk of radiation exposure to sensitive structures.

## POLICY HISTORY:

**Review Date:** February 2019

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**Review Summary:** Added and updated references

**Review Date:** February 2020

**Review Summary:** References updated

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