

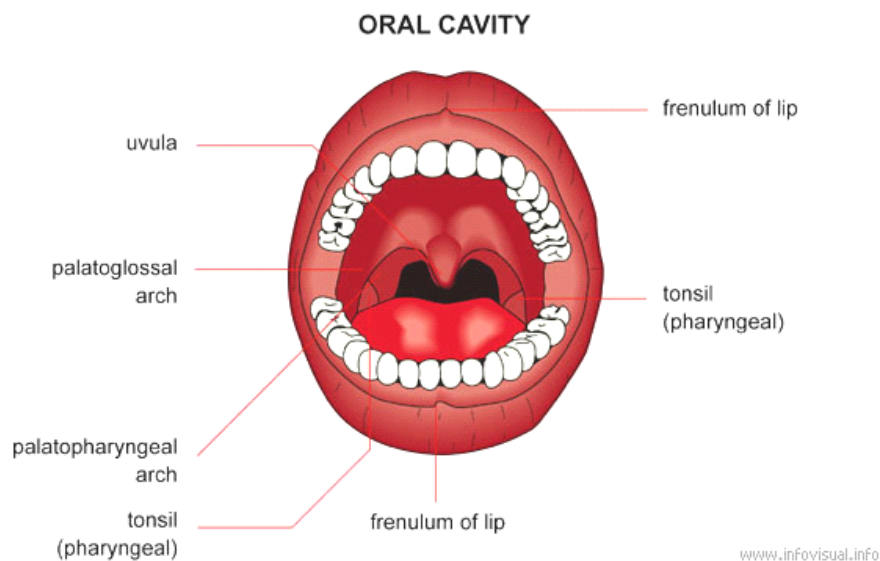
Patient information on Oral Cavity (Mouth) cancers

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The Oral Cavity

This leaflet deals with cancer of the oral cavity (mouth) and the oropharynx (the part of the throat at the back of the mouth).



What Is Cancer?

Cancer is a disease of the smallest units in the body the cells. There are many different types of cells in the body, and so many different types of cancer can arise from the different types of cells. However, unlike normal cells, the cancer cells are abnormal and multiply 'out of control'.

Causes of oral cancer

The combination of smoking or chewing tobacco and excessive drinking creates a much higher risk of oral and throat cancer. Excessive exposure to ultraviolet light also can cause damage. Damage to cells may cause them to malfunction and mutate into cancer cells.

Risk factors for oral cancers

A variety of factors can increase the risk of oral cancer. These include:

Use of tobacco. Tobacco can damage cells in the lining of the oral cavity and upper throat. Smokers are much more likely to develop oral or upper throat cancers than nonsmokers are. About 90 percent of people who develop these cancers use some form of tobacco. People who use smokeless or chewing tobacco are at even higher risk of cancers of the cheek and inner surface of the lips.

Excessive alcohol consumption. Alcohol also can damage cells inside your mouth and upper throat. Roughly three-fourths of people with oral and upper throat cancers are frequent drinkers of alcohol. The combination of alcohol and tobacco use significantly increases your risk.

Prolonged exposure to ultraviolet light. Too much ultraviolet light can damage the cells on your lips and increase your risk of lip cancer. Almost one in three people with lip cancer have jobs that keep them outdoors for long periods of time.

White patches on the tongue or inside of the cheek (leukoplakia).

Most of the time leukoplakia isn't dangerous. But leukoplakia can be serious, as some of the patches may show early signs of cancer, and many cancers of the mouth occur in areas in which leukoplakia is adjacent. Leukoplakia may result from a variety of causes, including smoking or chewing tobacco products or ill-fitting dentures.

Red raised patches inside the mouth (erythroplakia). Erythroplakia is more likely than leukoplakia to indicate a developing cancer. The majority of these are eventually diagnosed as cancer.

Chronic denture irritation. Irritation caused by dentures doesn't itself appear to be a factor in oral cancer. However, poorly fitting dentures can trap particles of tobacco and alcohol, and prolonged exposure to these known risk factors may further increase your risk of oral cancer.

Human papillomavirus (HPV). HPV is a group of sexually transmitted viruses that have been linked to most cases of cervical cancers. More recently, HPV has been found to be a factor in about one out of five oral cancers.

Symptoms

Oral cancer usually occurs in people over the age of 45 but can develop at any age. An early indication of oral and throat cancer is one or more changes in the way the soft tissues of your mouth usually look or feel. These are some symptoms to watch for:

- A sore on the lip or in the mouth that does not heal;

- A lump on the lip or in the mouth or throat;
- A white or red patch on the gums, tongue, or lining of the mouth;
- Unusual bleeding, pain, or numbness in the mouth;
- A sore throat that does not go away, or a feeling that something is caught in the throat;
- Difficulty or pain with chewing or swallowing;
- Swelling of the jaw that causes dentures to fit poorly or become uncomfortable;
- A change in the voice; and/or
- Pain in the ear.

These symptoms may be caused by cancer or by other, less serious problems. It is important to see a dentist or doctor about any symptoms like these, so that the problem can be diagnosed and treated as early as possible.

Diagnosis and Staging

If an abnormal area has been found in the oral cavity, a biopsy is the only way to know whether it is cancer. Usually, the patient is referred to a specialist who removes part or all of the lump or abnormal-looking area.

Staging tests and exams help the doctor find out whether the cancer has spread and what parts of the body are affected. It is also necessary in order to plan the best treatment.

Staging generally includes dental x-rays and x-rays of the head and chest. The doctor may also want the patient to have a CT scan or a MRI. The doctor also feels the lymph nodes in the neck to check for swelling or other changes. In most cases, the patient will have a complete physical examination before treatment begins.

Treatment

Doctors use surgery and radiation therapy to treat oral and throat cancer in the earliest stages. For cancer in more advanced stages, doctors use surgery combined with radiation therapy or radiation therapy combined with chemotherapy. The treatment chosen will depend on a number of factors, including your age, general health, the type and size of the tumour, and whether it has spread to nearby areas.

Because many types of cancers grow slowly and sometimes come back 10 or more years after treatment, your doctors will want to watch you for a long time.

Physical exams and imaging studies such as CT scans, MRI, and x-rays may be done to watch for signs that the cancer has come back or spread.

Prevention

Tobacco and alcohol are by far the most important risk factors for oral and throat cancer. You can greatly reduce your risk by not smoking and limiting the amount of alcohol you drink. Other steps you can take to help prevent oral and throat cancer or its progression include:

Use of well-fitting dentures.

Limiting your exposure to the sun.

Checking your mouth and tongue periodically.

Visiting your dentist twice a year.

Aiming for at least five servings of fruits and vegetables daily.