

ORAL CAVITY AND PHARYNX CANCER IN SOUTH CAROLINA

Where We Are

Head and neck cancer typically refers to cancer of the oral cavity (mouth), pharynx (nasopharynx, oropharynx, hypopharynx), and larynx (voice box). The major causes of each site differs in that oral cavity cancer is most often related to the use of tobacco and alcohol. Cancers of the larynx are most often caused by cigarette smoking. Cancers of the nasopharynx are often related to Epstein-Barr virus (EBV) and are much more frequent in Asia. More recently, infection with cancer-causing strains of human papillomavirus (HPV) has been found to cause specific cancers in the back of the tongue and tonsil in patients between the ages of 20 and 40. This has been considered somewhat of an epidemic in the United States due to, what appears to be, an increasing incidence of these cancers. Good dental hygiene (brushing and flossing teeth, massaging gums) and regular check-ups can reduce risk and help with early detection of cancer or growths that might turn into cancer later (and are seen at over 100 times the rate in tobacco users). In addition to avoiding tobacco, we and others have shown that a diet rich in fruits and vegetables may result in a decrease the risk of getting this cancer.

South Carolina Statistics

- Oral cancer is the **9th** most common cancer diagnosed overall.
- It is the **7th** most commonly diagnosed cancer in men and fifteenth most in women alone.
- It ranks **17th** for cancer mortality overall.
- It is the **12th** leading cause of cancer death in men, and **19th** leading cause of cancer death in women.
- Men have over **three** times higher incidence and mortality rates from this disease than women.
- Blacks are diagnosed at a **16%** higher rate for this disease than Whites.
- Blacks have a **two** times higher mortality rate from this disease than Whites.

All you have to do
is open your mouth.

ORAL, HEAD & NECK CANCER AWARENESS WEEK

April 12-18, 2010



Call To Action!

South Carolinians:

- Do not use tobacco in any form; if you have not tried tobacco products, don't start; if you currently use tobacco, quit.
- Educate others that if there is a red or white patch in the mouth or throat or a swollen lymph node in the neck, seek medical evaluation immediately even in young people.
- Prevent children and adolescents from starting to smoke cigarettes.
- Encourage your elected officials to increase the cigarette tax by a large amount.
- Promote smoking cessation among smokers.
- Support efforts to make your community smoke-free.
- Minimize alcohol consumption.*
- Eat a healthy diet, including fruits** and non-starchy vegetables** like broccoli and green beans.
- Maintain good oral hygiene; see a dentist or oral hygienist regularly, as these are the health professionals most likely to detect precancerous lesions in the mouth before they become cancer.

Legislators: *in addition to the above*

- Support smoke-free workplace legislation.
- Support a large increase in the cigarette tax.

Clinicians and Hospital or Medical Facility Administrators:

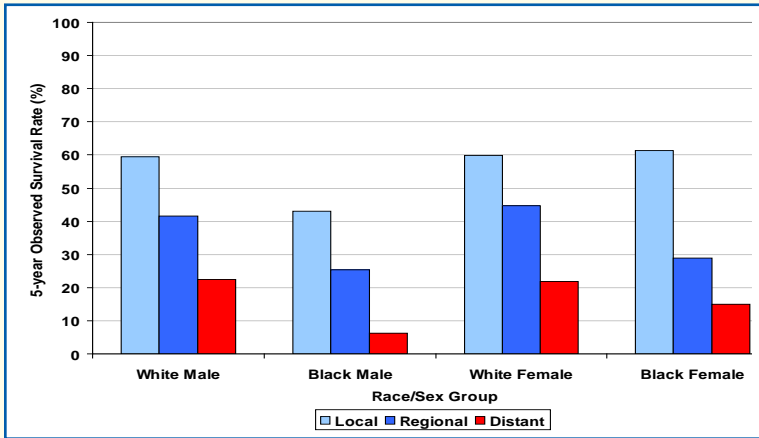
- Encourage participation in clinical trials and trials of innovative screening protocols.
- Report cancer cases to your cancer registry.

* AICR nutrition, physical activity panel risk factor conclusions were convincing

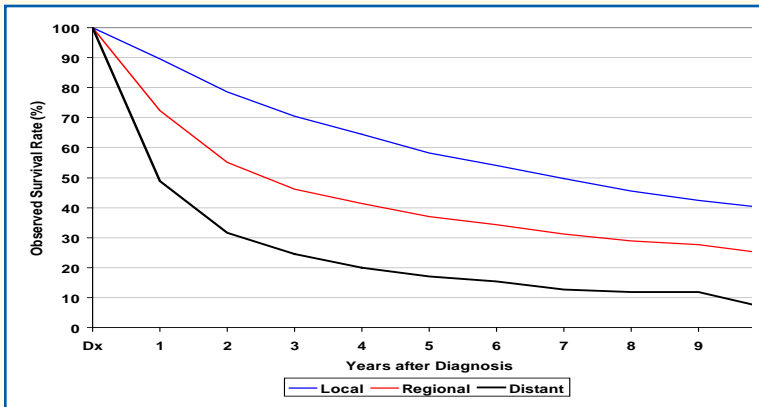
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South Carolina Success

Head and Neck Nurse Navigator Position: Although oral and pharyngeal cancers account for roughly 3% of all cancers, these cancers cause a disproportionate negative impact on quality of life. Because of this, MUSC is preparing for the first ever Head and Neck Patient Navigator here in South Carolina. This position, patterned after the successful Breast Patient Navigator programs, will provide critical emotional support, education, and direction for those diagnosed with any head and neck cancer. The goal is to have a positive impact on patient outcomes and significantly improve quality of life. This is just one component of the MUSC Head and Neck Cancer program, which uses a multidisciplinary approach, a statewide referral network and currently has 3.8 million dollars in cancer research funding.



Oral Cavity and Pharyngeal Cancer 5-yr Observed Survival Rate (%) by SEER Stage at Diagnosis and Race/Sex Group, South Carolina, 1996-2005



Oral Cavity and Pharyngeal Cancer Observed Survival Rate (%) by SEER Stage at Diagnosis, South Carolina, 1996-2005

Note: excludes in situ cancers and children (ages 0-19) Source: South Carolina Central Cancer Registry

- S.C. citizens diagnosed with oral/pharyngeal cancer in early or localized stage experience about 60% chance of surviving five years, except for Black males whose rates are lower at 43%. Black males experience lower survival rates at each stage of disease at diagnosis compared to the other race/sex groups.
- When oral/pharyngeal cancer is diagnosed in South Carolinians after regional or distant spread has occurred, the chances of surviving five years drop to between 45% and 6% respectively, depending upon the race/sex group.