

Increase Quality Of Life With Oral Cancer Prevention

By Maisha Campbell, guest writer for Mouth Magazine (American Dental Student Association)

According to the Oral Cancer Foundation, 30,000 Americans will be diagnosed with some form of oral or pharyngeal cancer this year. Their research shows that it will cause over 8,000 deaths, killing 1 person per hour. Once diagnosed, people with oral cancer will live approximately 5 years. Most of these patients probably don't know they are actively increasing their risk each day with their unhealthy personal habits and poor dental hygiene. Here are some ways dentists can help their patients prevent and treat oral cancer.

Recent News in Oral Cancer

Recent studies have shown a tremendous decline in the rate of oral cancer in professional baseball players. This is directly due to national efforts to decrease the use of chewing tobacco in sports. In the past, baseball players (in major, minor, and amateur leagues) chewed tobacco regularly during games. For years it was accepted as a natural habit of the game. But, over the last decade, oral cancer research put the undeniable correlation between tobacco use and oral cancer in the spotlight.

Over 300,000 people are affected by oral cancer each year worldwide. There are environmental factors which affect the onset of oral cancer in other countries. Betel nut chewers in Taiwan have an increased risk for developing oral cancer. Some residents in Asian communities chew "gutka" or "paan", which has been linked to oral cancer.

Oral cancer doesn't discriminate, as we can see in the wide range of people that have fallen victim to the disease. It attacks people old and young, rich and poor, regardless of race or ethnicity. Recent studies have even linked some forms of the common sexually transmitted disease, HPV (Human Papilloma Virus), to oral cancer. The American Cancer Society states that 20 percent of oral cancer cases will most likely be caused by HPV. This is an additional oral risk that both young and old people, that are sexually active, must face. Just this year, Hollywood mega-producer Aaron Spelling died, after his battle with oral cancer. Spelling was known for pipe smoking for years. Other famous people that have fallen victim to oral cancer include Babe Ruth, Mary Wells, Rod Stewart, Humphrey Bogart, Bill Blass, Sammy Davis Jr., Ulysses S. Grant, and Roger Ebert, just to name a few.

With new chemotherapy agents and anti-carcinogens developed and introduced by pharmaceutical research companies frequently, scientists feel they are on the brink of an oral cancer treatment revolution. Erbitux® is the first and only monoclonal antibody approved by the FDA (this summer), for treatment of head and neck cancer. The VELScope® (Visably Enhanced Lesion Scope), when used correctly, is said to be able to put the spotlight on cells that are in danger of becoming cancerous during oral examinations, by using a special blue light. Another bluelight product on the market for dentists is the Vizilite Plus system (Zila

Pharmaceuticals, Inc.). However, the best detection for oral cancer by dentists still remains proper visual inspection and thorough clinical examination.

The internet has drastically improved the flow of information on oral cancer. There are so many websites full of oral cancer facts and resources for patients and dental practitioners. One of the great things about internet technology is that there are more oral cancer support groups available to patients and their families. Today, oral cancer patients can connect to other patients and survivors globally, to help guide and support them through treatment and recovery. Most online support groups are absolutely free of cost and accessible 24 hours a day.

Oral Cancer Prevention

Clinically speaking, genetics and immune conditions determine a person's likelihood of developing cancer. However, as with any other carcinogen, there are behaviors and factors which increase a patient's risk for oral cancer. The two main contributors that increase a patient's risk of oral cancer are alcohol and tobacco use (cigarettes, cigars, pipe smoking, and chewing tobacco). With the introduction of trendy new products such as Phillip Morris USA's Toboka (tiny, disposable tobacco pouches that fit between the lip and gums), people are at risk of being mis-educated about the dangers of non-chewing tobacco. People who drink alcohol *and* smoke heavily have an even higher risk of oral cancer.

Factors that *increase* a patient's risk for oral cancer include:

- Being 40 years old (or older)
- Smoking or Chewing tobacco
- Heavy alcohol consumption
- Tobacco combined with alcohol use (*inflates risk drastically by 15 times)
- A history of leukoplakia (white patches) or erythroplakia (red patches)
- Overexposure to ultra-violet rays

As Chairman and Professor of Virginia Commonwealth University, Dr. James C. Burns is recognized as a leading specialist in oral cancer. Dr. Burns has handled thousands of oral cancer cases, during his 28 years in pathology. He reveals that oral cancer is affecting more women and younger patients, as they have increased rates of smoking and alcohol consumption.

The good news for smokers and drinkers is that as soon as you cease smoking and avoid drinking, your body immediately begins to recover itself. Offering patients some information on support systems such as Smoker Hotlines and Alcoholics Anonymous is a great way for dentists to help make that first step.

While some factors increase the risk of oral cancer, there are also behaviors that will *decrease* a person's risk for developing oral cancer. In order to prevent oral cancer, a person needs to see a general dentist for routine visits, care, and oral exams. The key to fighting oral cancer is a combination of meticulous oral hygiene, professional dental care, and a healthy lifestyle. Encouraging patients to eat at least 5 servings of fruits and vegetables each day is a great way for dentists to teach cancer prevention. Research shows that diets rich in fruits and vegetables reduce the risk of oral cancer. The nutrients in fruits and veggies protect cells from damage and keep our bodies healthy and strong enough to fight disease.

Diagnosis

There are many signs and symptoms of oral cancer. The most common signs that dentists should look for include:

- Abnormal white/red patch or sore in the oral cavity
- Unusual lump or swelling within the tissue, gums or tongue
- Lumps or lesions that do not heal within 2 weeks
- Bleeding, pain, and tenderness that is unexplainable
- Numbness of the tissue in the mouth, gums, or lip
- Swollen glands or masses in the neck that don't go away
- An extremely sore throat or hacking cough that doesn't improve
- Difficulty swallowing or speaking
- Pain and discomfort when chewing
- A horse voice or change in the rasp of voice
- Earache that won't go away
- Unaccountable weight loss

If a patient is known to participate in the high-risk categories for oral cancer, their practitioner should pay extra-close attention to identify any unusual sores or lumps during routine examinations.

Once signs and symptoms of any stage of oral cancer have been identified a dental provider should take the following steps:

1. Inform the patient of a "suspicious lesion"
2. Perform a biopsy (sometimes performed by an oral surgeon)
3. Get biopsy results from pathology
4. Consult with the Head & Neck Team (most metro hospitals have them onboard)
5. Further results from additional tests (blood tests, x-rays, CT scans, MRI, and bone scans) will determine the stages of cancer and type of treatment available
6. Discuss the treatment plan with the patient

“It is important to note that there are many non-neoplastic processes in the oral cavity that may mimic oral cancer,” says Dr. Burns. Most people that display these symptoms end up having a less severe disease of the mouth. However, it takes a professional examination and biopsy to know for sure. Additionally, some early stages of cancer can be overlooked by dental practitioners. It is best for every dentist to empower their patients by providing information on how to give regular oral self-exams at home.

Breaking the News

Mentioning the word “cancer” provokes fear in even the bravest person. Unfortunately, many people associate cancer with inevitable death. It takes a great deal of sensitivity and care to break the news of cancer to a person. As a dental professional, you must be prepared for your patients’ reaction and meticulous when it comes to providing information, so your patient can be in the best position to make well-informed decisions about their treatment. This is where the “care” in dental care provider kicks in.

As a dentist, you can expect the patient to feel a wide range of emotions including fear, anxiety, sadness, and even depression. If you are alone with the patient they may need to be comforted and reassured verbally, with a great deal of compassion. Practitioners should also train their staff members with handling these situations delicately, with confidentiality and finesse. Having Kleenex handy is a good idea for tears that may arise out of emotion and distress. Don’t hesitate to contact a family member or listed emergency contact in the event that you are concerned about your patient’s welfare. Take care in handling any explanations with tact and comfort, but always remain informative and honest. Having information and pamphlets available will assist in keeping your patient (and their families) well-informed and educated about oral cancer and treatment.

Once dentists verify oral cancer, they need to urgently take the necessary steps to execute their dental plan and avoid any delay in cancer treatment. Dr. Burns suggests that dentists, “Calmly present the results of the biopsy as malignant, and not as a death sentence. Have a referral to an oncologist already arranged and present the patient with an appointment slip.”

By immediately beginning treatment, you increase your patient’s chances of their quality of life. Effective diagnosis and treatment can mean salvaging teeth, and a reduction in complications. The seriousness and urgency of the matter should effectively be relayed to the patient, without compromising their amount of confidence in successful treatment and survival.

Working Together -Treatment

There are several circumstances which require a team effort in the health care system; oral cancer is certainly one of them. Once oral cancer is suspected in a patient, a dentist must work with a team of experts

to make sure proper care is given. It is in the patient's best interest for there to be an effective collaboration between their dentist and the head and neck team at the hospital.

Most hospitals have a head and neck cancer team, which includes a hospital dentist, an oncologist, a head and neck surgeon, and a radiologist. The head and neck team will make an assessment and work to determine the best plan and treatment for your patient. Having an entire team of specialists affords more brain power and experience to make optimal decisions. When there is a strategic plan in place, the risk of oral complications and interference decrease significantly. And with a structured team in place, any arising problems can be handled efficiently.

“During treatment for oral cancer, whether the treatment is surgical or radiotherapy, careful dental care is important in preventing additional complications,” says Dr. Burns. Some factors that can negatively impact treatment are existing disease, poor oral care, and dangerous habits (such as drinking and smoking). Irritated oral tissue and gums can result in ulcers within the mouth. Periodontal disease, caries, and sub-par restorative dental work (and dentures) can increase a patient's risk of infection. Severe pain and irritation from diseases of the teeth or gums can mean treatment must be immediately ceased. By insisting upon good dental care prior to and during oral cancer treatment, dentists can reduce the occurrences of problems and delays in therapy.

Providing Relief

Serious complications can occur after radiation treatment, chemotherapy, and/or surgery for oral cancer. Some of the side effects of treatment can include:

- nausea and vomiting
- dental demineralization
- altered taste
- mucositis and stomatitis
- salivary gland dysfunction
- hypersensitive teeth and gums
- burning mouth
- bacterial, viral or fungal infection
- erythema and edema of skin
- nutritional sensitivity
- hindered development (in children)
- difficulty chewing
- altered speech
- bleeding of the gums

As a dental provider, there are over-the-counter products available to your patients during and after oral cancer treatment. By suggesting helpful products and healthy regimens, some of the pain and discomfort patients experience can be subsided. The most helpful advice a dentist can give their oral cancer patient is to completely avoid tobacco and alcohol. For care of mucositis, meticulous oral management is needed. Good oral hygiene includes brushing and flossing after each meal, taking extra care not to cut and irritate gums. An oral cancer patient's toothbrush should be extra-soft, for gentle brushing, and accompanied by bland toothpaste that won't have a strong, harsh burn. During treatment, if gums are too painful, a Q-tip or foam stick (same things used after surgery) can assist in cleaning. Patients should avoid using mouthwashes with ingredients such as chlorhexidine, because the amount of alcohol in the product is simply too harsh. A new product for patients with salivary dysfunction is Numoisyn™ Lozenges (also in a liquid form), which stimulate salivary secretions along with pleasant flavor. For quick pain relief, there are topical medications such as Oral-gel and tablets such as Extra-Strength Tylenol and Advil.

A Lifetime Commitment

Even when a patient overcomes oral cancer and enters remission, it is imperative that they have annual checkups for several years. Because the first step in treating oral cancer is detection, patients should be encouraged to effectively monitor their oral care with regular visits.

It's easy for a patient to begin to slack off on meticulous dental care once treatment is over and they are "in the clear". But, by not continuing careful dental care and not avoiding high risk behavior (in between dental visits) patients are in danger of oral cancer reoccurrence and complications. Oral cancer patients need to know they will have a lifetime threat of recurrent oral cancer or a secondary cancer. But even more, they need to know they have control over decreasing their risk with optimal oral management and low-risk behavior.

Lack of Health Care

It's no secret that there is a health care crisis in the U.S., and it is a significant factor in the large numbers of oral cancer cases and deaths per year. Many patients do not receive proper dental care and evaluation, because they simply can't afford to. Some people don't want to participate in something they believe will "hurt". If a patient doesn't have dental insurance or "good" dental insurance, they are less inclined to have routine examinations and catch oral cancer indicators early, that their dentist could otherwise identify. In addition, a lack of dental insurance can mean increased danger for dental disease, poor daily dental care, and high-risk habits. Even if a patient (who doesn't have health insurance) gets diagnosed early for oral cancer, their lack of funding could mean not receiving comprehensive oral cancer treatment.

Socially, we have a responsibility to stay involved and informed in the struggles of our community that we serve. That includes keeping up with how much dental insurance impacts the rates of oral disease

prevention. While some of this information is provided in studies and research conducted by organizations and doctors, a bulk of the information comes directly from your patients.

By asking your patients and the people in your community questions, you can stay aware of the role dental care plays in prevention. Remaining informed and involved not only helps you to be a better health care provider, but as an activist you will understand the needs of your community and how you can increase good dental hygiene awareness. By staying knowledgeable, people can decrease high-risk behavior and the overall rate of oral cancer for themselves and others. The cycle of awareness becomes beneficial to everyone.

The Role of Continual Education

As dental care practitioners, it is necessary to stay informed on the recent developments and technology in dentistry. A huge issue in oral cancer is the lack of information being provided to dentists and the lack of interest practitioners have in continual education. Oral cancer techniques have rapidly developed over the last decade.

Attending conferences and workshops can mean saving your patients lives and providing them with an opportunity for the best possible dental care available. Reading dental periodicals and journals can keep you updated on new technology and findings in oral cancer. The American Dental Association website (www.ada.org) is an excellent resource for current information and available conferences and workshops for your entire dental staff. As an informed, educated dental practitioner, you become a valuable resource for your patient, which allows them to remain knowledgeable about good dental hygiene.

Excellent Oral Cancer Resources for Emerging Dentists:

- The Oral Cancer Foundation: www.oralcancerfoundation.org
- Oral Cancer: www.oralcancer.com
- ADA: www.ada.org/prof/resources/topics/cancer/asp
- American Cancer Society: www.cancer.org/docroot/home/index.asp
- Support for People with Oral and Neck Cancer: www.spohnc.org
- Yul Brynner Head and Neck Cancer Foundation: www.yulbrynnerfoundation.org
- Oral Cancer Consortium: www.oral-cancer.org/resources.html
- National Cancer Institute: www.nci.nih.gov/cancertopics/types/heada-and-neck/
- Self Exam: www.floss.com/oral_cancer_selfexam.htm
- Self Exam: www.umanitoba.ca/outreach/wisdomtooth/exam.htm