Head and Neck Cancer

Global Burden

Estimated age-standardised mortality rate per 100,000
Larynx, Lip, oral cavity, Nasopharynx,
Other pharynx: both sexes, all ages

GLOBOCAN 2008 (IARC) - 15.12.2010

< 2.3  < 3.0  < 4.2  < 6.2  < 16.6
Head and Neck Cancer
Personal Burden

- Pain
- Dysfunction
- Deformity
- Malnutrition
- Death
- Social Isolation
- Poverty
Aetiology

- Smoking
- Alcohol
- Betel nut
- Viruses
  - Epstein-Barr (EBV)
  - Human papilloma (HPV)
- Hard wood
- Other chemicals

Video
Tumour types

- Most common tumour type is squamous cell carcinoma
- In the nasopharynx, undifferentiated carcinoma is the commonest sub-type and most radiosensitive
- Salivary gland tumours are the most varied
Tumour subsites
(Relevant to CMF surgery)

- Oral cavity tumours
- Tumours of the upper jaw (sinus and anterior skullbase)
- Skin cancers
- Oropharyngeal cancer
- Temporal bone (ear) cancer
- Nasopharyngeal cancer
Oral cavity tumours

- Largely SCC
- Smoking, Spirits, Betel Nut, Sharp Teeth, Syphilis and (Spices)
- Highly debilitating – affects speech and swallowing
- Aggressive
- Increasing in young non-smokers and non-drinkers
Oral cavity tumours
Tumours of the upper jaw
(Sinus and anterior skullbase)

- Present late as symptoms are few
- Carcinogens implicated e.g. hardwood - adenocarcinoma
- 5 year survival - - 63%, local control rate - 57%
- Histology matters: Adenocarcinoma (78%), SCC (60%), SNUC (40%)
Tumours of the upper jaw (Sinus and anterior skullbase)
Skin cancers

- May be indolent (BCC) or aggressive (Melanoma)
- Tendency to recur
- Bony erosion and perineural spread pose surgical challenges

SKIN PATHOLOGY

**Benign epidermal tumors**
- Fibroepithelial polyp
- Keratoacanthoma
- Actinic keratosis

**Adnexal tumors**
- Benign tumors
- Malignancies

**Dermal tumors**
- Malignant fibrous histiocytoma
- Dermatofibrosarcoma protuberans
- Kaposi’s sarcoma
- Hemangioma
- Xanthoma

**Malignant epidermal tumors**
- Basal cell carcinoma
- Squamous cell carcinoma

**Other cancers**
- Merkel cell carcinoma

**Melanocytic lesions**
- Malignant melanoma
Skin cancers
Skin cancers
Oropharyngeal cancer

- Better chemoradiation has reduced the cases treated primarily by surgery
- Transoral robotic surgery (TORS) may potentially reverse this trend
- At present, surgery is often for salvage
- HPV+ve tumours are highly radiosensitive
Incidence of tonsil cancer from 1970 to 2002 has increased 2.8-fold (2.6 in men and 3.5 in women)

During the same period, a significant increase in the proportion of HPV-positive tonsillar cancer cases was observed

HPV in Sweden

- Formed in 1970
- People need love, 1972
- Take a Chance on Me, 1977
- Gimme! Gimme! Gimme! (A Man After Midnight), 1979
- Lay All Your Love on Me, 1981
- One of us (has HPV), 1981
Oropharyngeal cancer
Temporal bone (ear) cancer

- Usually SCC
- Secondary to a chronically discharging ear
- Skin cancer arising from the pinna
Temporal bone (ear) cancer
Nasopharyngeal cancer

- Endemic in Southeast Asia
- Genetic, viral and dietary aetiology
- Symptoms: Neck mass - 56%; Blood stained sputum - 35.6%; Deafness - 26.3%; Nose bleed - 22%; Double vision - 8%
- RT for early stage and ChemoRT for late stage
Nasopharyngeal cancer

**Primary tumour**

**Recurrent tumour**
Paradigms in head and neck cancer

- Multidisciplinary care and multi-modality therapy
- Diagnostics: findings best unfound
- Elective treatment
- Evidence-based medicine and Osler’s dictum
- Beyond survival: QOL
QOL: Beyond survival

Peter Rhys-Evans: “John, I think we should take you to theatre and tie off the bleeding point”

John Diamond (scribbles): “What’s the bleeding point…”
Thank you