

ORAL AND PHARYNGEAL CANCER

IDAHO AND THE U.S. KEY FACTS

In 2007, the American Dental Association embarked on a three-year nationwide public service campaign to boost public awareness of oral cancer and spotlight a dentist's role in helping to stop this disease before it starts. In Idaho, almost 75% of adults were **NOT** told they were being examined for signs of Oral Cancer at their last dental visit [2007 Behavioral Risk Factor Surveillance System (BRFSS)].

Idaho Comprehensive Cancer Strategic Plan 2006-2010

Oral and Pharyngeal Cancer Goals

- 1. Increase the appropriate utilization of evidence-based oral and pharyngeal cancer screening and diagnosis.*
- 2. Reduce late stage diagnoses of oral and pharyngeal cancer among Idahoans.*

What is Oral Cancer and Where Does it Most Commonly Occur?

- Oral cancer can develop in any part of the oral cavity or pharynx.
- Oral cavity cancers occur most commonly in the following sites:
 - Tongue (20% to 25%)
 - Floor of the mouth (about 15%)
 - Lip (10% to 15%)
 - Minor salivary glands (10% to 15%)

Why is it Important to Screen for Oral Cancers and How are they Diagnosed?

- Approximately 25% of people with oral cancer die because of delayed diagnosis and treatment.
- More than 50% of oral cancers are advanced at the time the cancer is detected and most have spread to the throat or neck.
- Surgical treatment for oral cancer may result in permanent disfigurement as well as functional limitations affecting speaking and eating.
- New oral cancer diagnostic aids (e.g. computer-assisted brush biopsy, toluidine blue dye, and chemiluminescent light) are now available to facilitate early detection and treatment.
- A comprehensive oral cancer examination takes approximately 90 seconds and includes a review of the patient's medical and dental history, extraoral and intraoral inspections of the head and neck, and manual palpation of related specific sites.

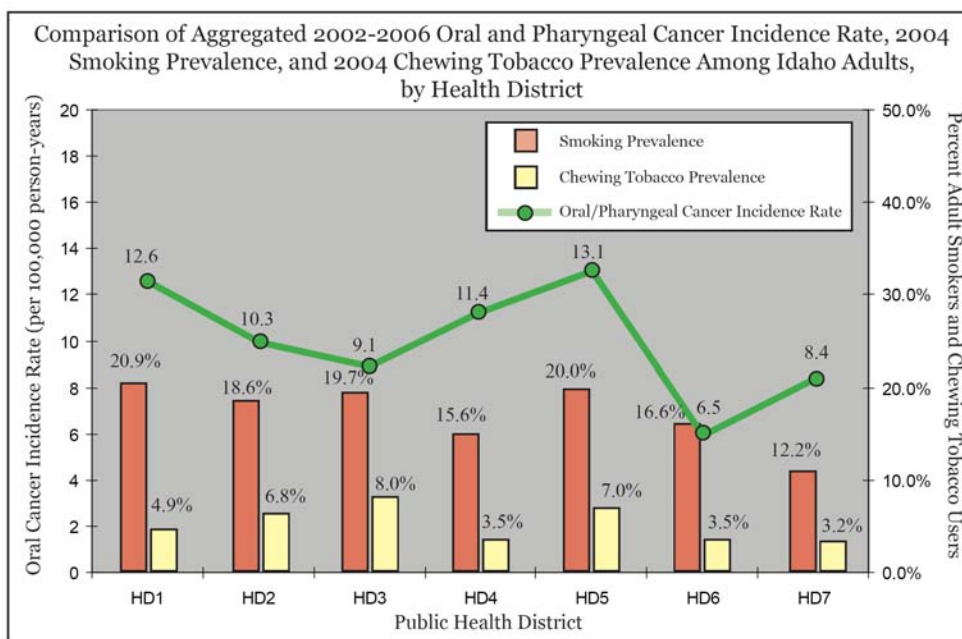
*Detecting Oral Cancer: A Guide for Health Care Professionals is free and available in poster form from the National Institute of Dental and Craniofacial Research.**

What is the Impact of Oral and Pharyngeal Cancer in Idaho and the U.S.?

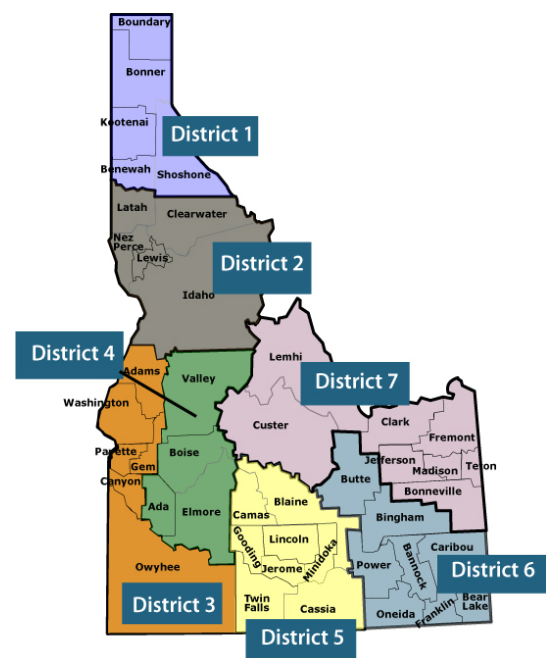
- Oral cancer is the sixth most common form of cancer in the United States.
- The American Cancer Society estimated about 35,310 new cases (25,310 men and 10,000 women) of oral cavity and pharyngeal cancer would be diagnosed in the United States in 2008.
- An estimated 7,590 people (5,210 men and 2,380 women) died of oral cavity and pharyngeal cancer in the U.S. in 2008.
- From 1997-2006, 1,406 Idahoans were diagnosed with oral cavity and pharyngeal cancer with 327 deaths from oral cavity and pharyngeal cancer.

What Factors Contribute to Increased Risk for Oral and Pharyngeal Cancer?

- History of tobacco use accounts for 90% of patients with oral cancers. The risk of developing these cancers increases with the amount smoked or chewed and the duration of use. Smokers are six times more likely than nonsmokers to develop these cancers.
- Using both tobacco and alcohol increases the risk more than using either substance alone.
- Prolonged sun exposure while working outside accounts for more than 30% of patients with cancers of the lip.
- A diet low in fruits and vegetables is associated with an increased risk of developing cancer of the oral cavity.
- Human Papilloma Virus (HPV) may be a factor in the development of around 20% to 30% of oral and pharyngeal cancers.
- Other risks include poor dental and oral hygiene and chronic irritation (such as that from rough teeth, dentures, or fillings).



Oral Pharyngeal Cancer Incidence, 2002-2006 Aggregated. Source: Idaho Cancer Data Registry Special Request.
 Smoking Prevalence, 2004. Source: Idaho Behavioral Risk Factor Surveillance System.
 Chewing Tobacco Prevalence, 2004. Source: Idaho Behavioral Risk Factor Surveillance System.



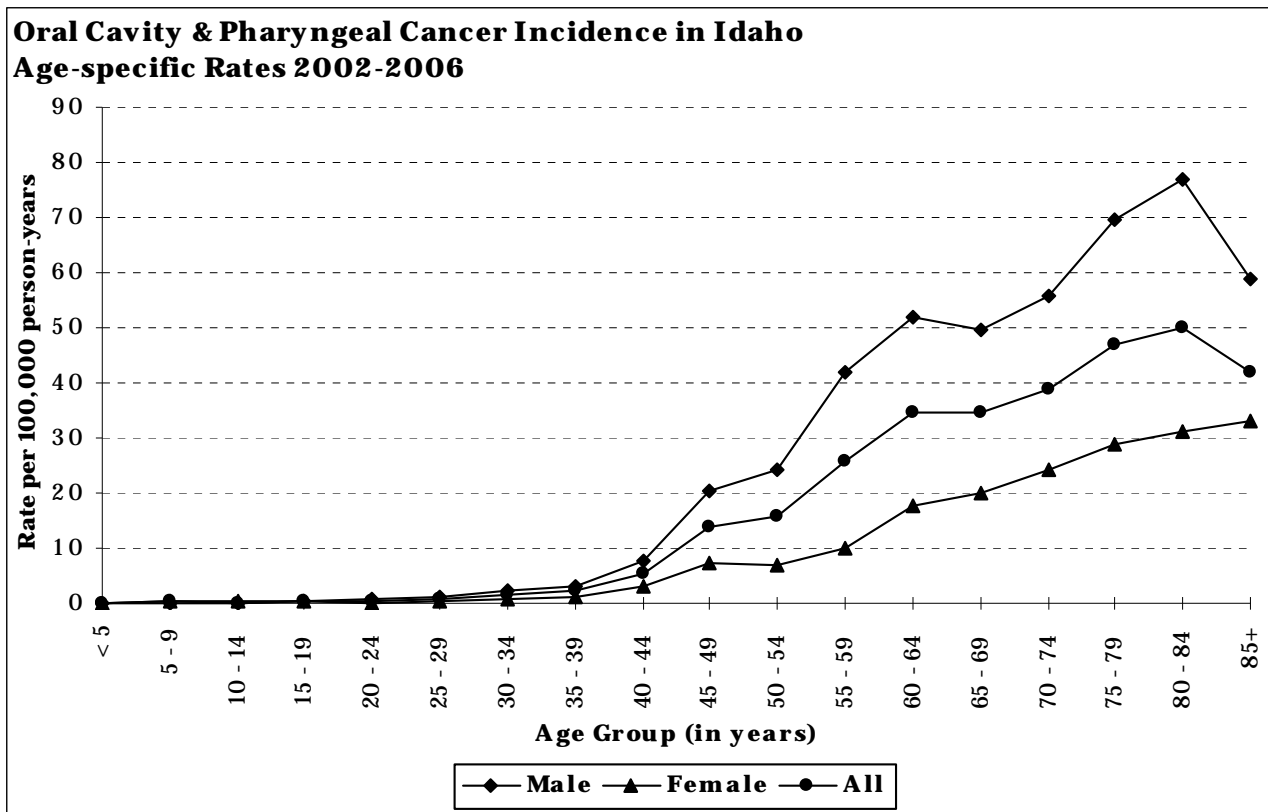
Health districts 1 and 5 have the highest rates of both smoking prevalence and oral cancer incidence. Counties with higher rates of smokeless tobacco use had significantly higher rates of oral/pharyngeal cancer. County Cancer Profiles may be accessed at <http://www.idcancer.org/special/CountyProfiles/CountyMap2006.htm>.

Who Gets Oral and Pharyngeal Cancer?

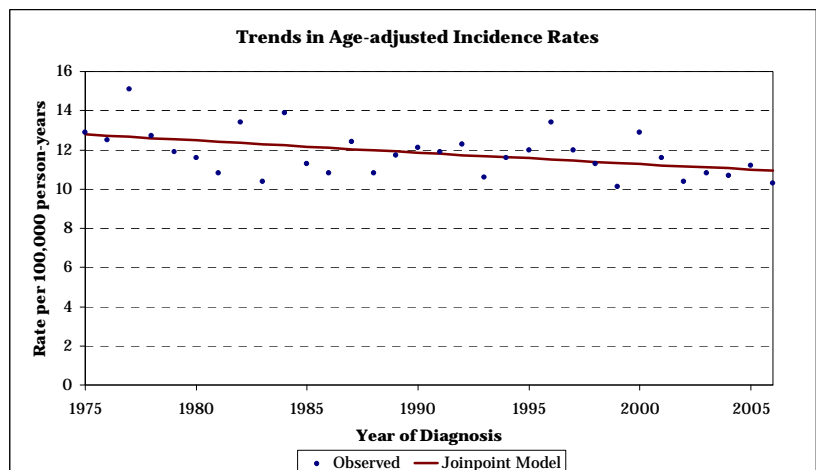
- Oral cancers are more than twice as common in men than women.
- The likelihood of developing oral cancer increases with age, especially after age 35.
- Rates are higher among lower income groups.
- In Idaho, Non-Hispanic Whites had the highest rates of oral cavity and pharynx cancer, followed by Hispanics.
- Five-year relative survival rates by race and sex between 1996-2004 from 17 Surveillance Epidemiology and End Results (SEER) geographic areas were: 61.0% for White men; 62.9% for White women; 36.1% for Black men; 52.1% for Black women.

SEER Age-Adjusted Incidence Rates by Race and Ethnicity		
Race/Ethnicity	Male	Female
All Races	15.5 per 100,000 men	6.1 per 100,000 women
White	15.7 per 100,000 men	6.1 per 100,000 women
Black	17.2 per 100,000 men	5.9 per 100,000 women
Asian/Pacific Islander	10.5 per 100,000 men	5.4 per 100,000 women
American Indian/Alaska Native	9.7 per 100,000 men	4.9 per 100,000 women
Hispanic	9.4 per 100,000 men	3.6 per 100,000 women

The SEER age-adjusted incidence rate for males and females combined was 10.4 per 100,000 persons per year. These rates are based on cases diagnosed in 2001 to 2005 from 17 SEER geographic areas.



The incidence of cancers of the oral cavity and pharynx decreased at a rate of about 0.5% per year in Idaho from 1975 to 2006. The rate of decrease was higher for males (0.8% per year) than for females (no significant trend), and rates of cancers of the oral cavity and pharynx were about 3 times higher among males than among females. White females began to quit smoking in substantial numbers during the 1950s, but Black males, White males, and Black females did not begin to quit in substantial numbers until the late 1960s. These trends in smoking prevalence affect incidence and mortality rates for smoking-related cancers decades later.



Publications/Free Patient Materials

American Dental Hygienists' Association

<http://www.askadviserefer.org>

[How Do I Promote My State Cessation Program?](#)

National Cancer Institute (NCI)

<https://cissecure.nci.nih.gov/ncipubs/searchResults.asp?subject1=Oral+Cancers>

National Institute of Dental and Craniofacial Research (NIDCR)

<https://www.nidcr.nih.gov/OrderPublications/default.aspx>

[*Detecting Oral Cancer: A Guide for Health Care Professionals](#)

Project Filter (tobacco prevention)

<http://www.projectfilter.org/quit.htm>

Websites/Resources

American Cancer Society

<http://www.cancer.org>

Cancer Data Registry of Idaho

<http://www.idcancer.org>

MedlinePlus

<http://medlineplus.gov>

National Cancer Institute

<http://www.nci.nih.gov>

National Institute of Dental and Craniofacial Research

<http://www.nidcr.nih.gov>

Oncolink

<http://www.oncolink.com>

Oral Cancer Foundation

<http://oralcancerfoundation.org>

Data Sources

American Cancer Society: Oral Cancer. Available at: <http://www.cancer.org/downloads/PRO/OralCancer.pdf>. Accessed October 2, 2008.

American Cancer Society: Detailed Guide: Oral Cavity and Oropharyngeal Cancer. Available at: http://www.cancer.org/docroot/cric/content/cric_2_4_1x_what_are_the_key_statistics_for_oral_cavity_and_oropharyngeal_cancer_60.asp?sitearea=cric. Accessed October 2, 2008.

American Dental Association: Oral Health Topics A-Z. Available at: http://www.ada.org/public/topics/cancer_oral.asp. Accessed October 2, 2008.

Cancer Data Registry of Idaho: Cancer Disparities in Idaho May 2007. Available at: [http://www.idcancer.org/Special/Cancer%20Disparities%20in%20Idaho%20-%20Phase%20I%20-%20Incidence%20\(with%20links\).pdf](http://www.idcancer.org/Special/Cancer%20Disparities%20in%20Idaho%20-%20Phase%20I%20-%20Incidence%20(with%20links).pdf). Accessed October 2, 2008.

Centers for Disease Control and Prevention: Oral Health and Quality of Life. Available at: http://www.cdc.gov/OralHealth/publications/factsheets/sgr2000_fs5.htm. Accessed October 10, 2008.

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MedlinePlus: Oral cancer. Available at: <http://www.nlm.nih.gov/medlineplus/ency/article/001035.htm>. Accessed October 2, 2008.

National Cancer Institute: Surveillance Epidemiology and End Results. Available at: <http://seer.cancer.gov/statfacts/html/oralcav.html>. Accessed November 19, 2008.

National Cancer Institute: Oral Cancer: Who's at Risk? Available at: <http://www.cancer.gov/cancertopics/wyntk/oral/page4>. Accessed October 2, 2008.

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