

HEAD AND NECK CANCER: Cut Your Risk

PAID PROMOTIONAL FEATURE

Smoking (including secondhand smoke and smokeless tobacco, sometimes called “chewing tobacco” or “snuff”) is the number one risk factor for getting head and neck cancer. And people who use both tobacco and alcohol are many times more likely to get head and neck cancer than people with neither habit. Research has also shown that continued smoking by a patient with head and neck cancer may reduce the effectiveness of treatment and increase the chance of a second primary cancer.

RBOI is a member of the Tobacco Free Florida Partnership of Marion County. We support efforts to create tobacco-free environments and smoking cessation and prevention programs, especially those targeted to our youth. Wendy Hall, a Licensed Clinical Social Worker and Cancer Navigator at RBOI, is also a tobacco cessation specialist. Call her at 352-527-0106 for more information.

Know Your Symptoms

Hoarseness and voice changes can be a sign of head and neck cancer; see your doctor if they do not improve within two weeks. Head and neck cancers can also start away from the vocal cords and produce other symptoms. The most common is swelling or a sore that does not heal. Other symptoms include:

- Persistent sore throat
- Constant coughing
- Pain/difficulty chewing, swallowing, or moving jaw or tongue
- Ear pain/infection
- Trouble breathing
- A lump, bump, or mass in head or neck

- A red or white patch in the mouth
- Foul mouth odor not explained by hygiene
- Persistent nasal obstruction/congestion
- Frequent nosebleeds and/or unusual discharge
- Double vision
- Numbness/weakness in the head and neck region
- Blood in saliva or phlegm
- Loosening teeth
- Dentures no longer fit
- Unexplained weight loss
- Fatigue



The HPV Connection: Get Vaccinated!

Human papillomavirus (HPV), the most common sexually transmitted virus in the US, has been playing an increasing role in head and neck cancers, especially oropharyngeal cancers. According to the Centers for Disease Control and Prevention (CDC), HPV is thought to cause 70% of oropharyngeal cancers in the US.

The CDC recommends HPV vaccination for 11- to 12-year-olds, and for everyone through age 26 who has not been vaccinated. Adults age 27 through 45 are encouraged to speak with their doctor about their risk of HPV infection and the possible benefits of vaccination.

by the numbers

54,540

New diagnoses of oral cavity and pharynx cancers in the US estimated for 2023.

1%

Average annual rate of increase in new oral cavity and pharynx cancer cases over 2010–2019.

More than 2x

Head and neck cancers are more than twice as common among men as they are among women.

4%

Percent of all cancers in the US that are head and neck cancers.

Did You Know?

Head and neck cancers are divided into five main types:

- Laryngeal and hypopharyngeal cancers occur in and around the voice box.
- Nasal cavity and paranasal sinus cancers occur behind the nose.
- Nasopharyngeal cancers occur at the upper part of the throat behind the nose.
- Oral and oropharyngeal cancers occur in the mouth, tongue, and the area from tonsils to voice box.
- Salivary gland cancers occur in the mouth glands that produce saliva.

Immunotherapy Joins Treatment Options for Nasopharyngeal Cancer

A specific head and neck cancer, nasopharyngeal carcinoma (NPC), now has a new treatment option. The Food and Drug Administration recently approved toripalimab (Lqtorzi), the first immunotherapy drug used to treat this kind of cancer.


NPC occurs behind the nose, which can complicate surgery. And there is no standard treatment if NPC has spread after chemotherapy. But clinical trials showed that toripalimab shrank tumors and extended survival.



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