

head and neck cancer

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WHAT IS HEAD AND NECK CANCER?

Head and neck (H&N) cancer is a disease that occurs in the cells that line tissues or organs in the head and neck region. This can include the oral cavity, throat (pharynx), voice box (larynx), nasal cavity and salivary glands.¹



WORLDWIDE

A Cancers of the oral cavity, throat and voicebox account for almost 5% of all malignancies.² Each year there are more than 550,000 new cases of H&N cancers worldwide.³

The most common areas for H&N cancer to occur:²

Oral cavity:
44%

Voice box:
33%

Throat:
23%

WHAT ARE THE SYMPTOMS?

Symptoms of H&N cancer are non-specific and may include:¹

- A lump or sore on the head or neck that does not heal
- A sore throat that does not go away
- Painful and/or difficulty in swallowing
- Change or hoarseness in the voice
- Pain in the throat or ear
- Swelling of the neck
- Blocked nose on one side and/or bloody discharge from the nose
- Sore tongue, non-healing mouth ulcers and/ or red or white patches in the mouth



RISK FACTORS^{4,5}

Certain factors (including lifestyle) increase the risk of developing H&N cancer:



AGE
(H&N cancer is more common in people aged 40 and over)



SMOKING



MODERATE TO HIGH CONSUMPTION OF ALCOHOL



INFECTION WITH THE HUMAN PAPILLOMAVIRUS
(a group of more than 200 related viruses - HPV-positive)⁶

FACT SHEET

6th
most common cancer worldwide

60%
diagnosed at an advanced stage

SCCHN

More than 90% of H&N cancers begin in the flat squamous cells that line surfaces such as the mouth, nose and throat.⁷ This is called squamous cell carcinoma of the head and neck (SCCHN).

SCCHN is the sixth most common cancer worldwide.³

PROGNOSIS

Prognosis is dependent on the stage of the disease and worsens as the disease advances. 60% of people with H&N cancer are diagnosed when the disease is in an advanced stage.⁸

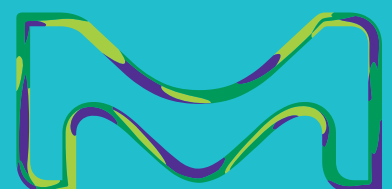
Recurrent cancer means that the disease has come back after a period of time when it could not be detected. When cancer has spread to another part of the body it is called metastatic disease. When cancer spreads from where it started to nearby tissue or lymph nodes it is called locally advanced cancer.

Once H&N cancer reoccurs or spreads outside of the neck, the prognosis is poor, with a median life expectancy of only 10 months.⁹

The overall survival for patients with local disease alive after 5 years: 49%¹⁰

10 month
life expectancy once cancer spreads

49%
of patients with local disease live over 5 years



TREATMENT OPTIONS^{11,12}

Treatment depends on the stage, location of disease and the overall health status of the patient. To ensure the best outcome for the patient, the multidisciplinary team (MDT) may choose a combination of treatments, which may include one or more of the following options:

CHEMOTHERAPY

Chemotherapy is a medication whose goal is to destroy cancer cells, usually by stopping the cancer cells ability to grow and divide.¹¹

Chemotherapy may be used alone or in combination with radiotherapy (chemoradiotherapy) before surgery to reduce the tumor size or number of tumors / metastases. It may also be used after surgery to help prevent the cancer from coming back or in a metastatic and palliative setting in combination with targeted therapies.^{11,12}

Also, using chemoradiotherapy can limit damage to healthy cells, preserve organs, and reduce toxicity.¹³

RADIOOTHERAPY

Radiotherapy is the use of high-energy x-rays or other rays to destroy cancer cells.¹¹

Patients with locally advanced, unresectable tumors may receive radiotherapy alone or in combination with chemotherapy either concurrently or sequentially or in combination with targeted therapies.¹²

CT, computerized tomography; MRI, magnetic resonance imaging; PET, positron emission tomography.

1. National Cancer Institute. Head and neck cancers fact sheet. Available at: <http://www.cancer.gov/cancertopics/factsheet/Sites-Types/head-and-neck> Last accessed April 2017. 2. Ferlay J, et al. Int J Cancer. 2015;136:E359-86. 3. Union for International Cancer Control. 2014 Review of Cancer Medicines on the WHO List of Essential Medicines: locally advanced squamous carcinoma of the head and neck. Available at: http://www.who.int/selection_medicines/committees/expert/20/applications/HeadNeck.pdf Last accessed April 2017. 4. Cancer.Net. Head and neck cancer: risk factors and prevention. Available at: <http://www.cancer.net/cancer-types/head-and-neck-cancer/risk-factors-and-prevention> Last accessed April 2017. 5. Purdue MP, et al. Am J Epidemiol. 2009;169:132-42. 6. National Cancer Institute. HPV and cancer. Available at: <https://www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-fact-sheet> Last accessed April 2017. 7. Specenier P, et al. Biologics. 2013;7:77-90. 8. Vermorken JB, et al. Ann Oncol. 2010;21(Suppl.7):vii252-61. 9. Vokes EE, et al. J Natl Cancer Inst. 2015;107:djv344. 10. Bonner JA, et al. Lancet Oncol. 2010;11:21-8. 11. Cancer.Net. Head and neck cancer: treatment options. Available at: <http://www.cancer.net/cancer-types/head-and-neck-cancer/treatment-options> Last accessed April 2017. 12. Grégoire V, et al. Ann Oncol. 2010;21(Suppl.5):v184-6. 13. Nagy B, et al. Anticancer Res. 2003;23:4329-32.

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FACT SHEET

SURGERY

The goal of the surgery is to remove the cancerous tumor. Sometimes it is not possible to completely remove the cancer and additional treatments may be necessary. For example, surgery may be followed by radiotherapy, chemotherapy, or both, to destroy cancer cells that cannot be removed by surgery.¹¹

TARGETED THERAPY

Targeted therapy is a treatment that targets cancer cells through identifying specific genes, proteins, or the tissue environment that contributes to cancer growth and tumor maintenance. This type of treatment blocks the growth and spread of cancer cells while limiting damage to healthy cells.¹¹