How to quantify the risk of suspicious lesions and oral abnormalities using SaliMark™ OSCC

The molecular DNA test can help dentists identify cancerous lesions more accurately than visual inspection.

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Oral cancer is the sixth most prevalent form of cancer in the United States. According to the National Cancer Institute, more than 43,000 people in the U.S. will be diagnosed with oral cancer this year.

What’s more, the mortality rate for oral cancer is alarmingly high, with more than 8,000 deaths every year. This equates to one person dying every hour, 24 hours per day. Earlier oral cancer detection through a visual inspection combined with molecular DNA testing can help reverse these statistics. The problem up until now has been to accurately identify cancerous lesions through visual inspection of the oral cavity conducted by the clinician’s naked eye or with an adjunctive fluorescent device.

The use of a test such as SaliMark™ OSCC from PeriRx, LLC for oral cancer will help quantify the findings of lesions and other abnormalities to reduce negative and invasive biopsies, make qualified referrals and intervene earlier when necessary. More than a decade of National Institute of Dental and Craniofacial Research and National Institute of Health-supported research make SaliMark™ OSCC the world’s most scientifically validated molecular DNA biomarker test for oral squamous cell carcinoma.

SaliMark™ OSCC is the first risk assessment test of its kind to aid in the identification and early detection of oral lesions that present the highest risks for cancer. It removes the guesswork from the assessment of oral lesions with sensitivity at more than 95 percent as well as a negative predictive value of more than 99 percent in typical screening populations.

The availability of this test to aid in the clinical decisions regarding the management of oral lesions and abnormalities should also help increase the frequency of thorough oral cancer exams by dental professionals, particularly on patients with certain risk profiles, such as familial history, tobacco use, alcohol consumption and multiple sex partners.
The SaliMark™ OSCC test is painless, takes seconds to administer and is easy to incorporate into the workflow of any practice. Here’s how the SaliMark™ OSCC test is administered:

1. Perform a thorough oral cancer exam by employing careful visual inspection and palpation.
2. If the oral exam identifies a suspicious lesion or abnormality, discuss it calmly with your patient and explain the critical role of the SaliMark™ OSCC test in quantifying the level of risk.
3. Have the patient rinse his or her mouth with water for approximately 30 seconds and collect 2 cc of saliva (not sputum) in the specialized collection tube by using the detachable funnel.
4. After collecting the saliva specimen, replace the funnel with the cap provided and shake the vial for approximately 30 seconds to activate the molecular DNA preservative.
5. Identify the salivary sample with the provided label including the patient’s name and birthday.
6. Register the patient in your secure HIPAA-compliant practice account by name, birthday and the unique ID number provided on the bar-coded requisition.
7. Seal the saliva specimen and ship via FedEx to the laboratory for analysis.
8. Log on to the HIPAA-secure website to obtain results within 72 hours.
9. Schedule a patient consultation to discuss the potential next steps: For a high-risk test, refer for consideration of a biopsy. For a moderate-risk test, obtain a second opinion from a specialist. The decision for biopsy will depend on the test score and other clinical features. For a low-risk test, schedule a follow-up to ensure resolution.

Conclusion

The SaliMark™ OSCC salivary biomarker test for oral cancer provides dental professionals with the most clinically validated test available to assist in the early detection of oral squamous cell carcinoma (OSCC). The increased volume of oral cancer exams, combined with more accurate risk assessments, will improve the early detection rate, which will eventually result in significantly lower annual mortality rates of OSCC. At the same time, the salivary test will help limit the amount of negative—and sometimes painful—biopsies.

The exam is administered chairside by having the patient rinse and then spit into a funnel-equipped collection tube. The funnel is removed, the tube is capped and the sample sent to a state-of-the-art lab using the provided shipping materials.

Within three days, if the lab report comes back positive, the patient should be referred to an oral surgeon for consideration of a biopsy. If the test comes back negative, but there are still visible lesions or abnormalities, the dentist can employ a watchful monitoring approach and re-evaluate the patient in several weeks to see if there has been resolution.
Once again, the important message the dental team should convey to their patients is that the SaliMark™ OSCC test improves the accuracy of a visual oral cancer exam. While the clinician may visually identify an area of concern, the PeriRx salivary test for OSCC will help quantify the degree of concern that is warranted.

About the author

Dr. James Vito received his DMD degree from the University of Pennsylvania School of Dental Medicine, then completed a one-year hospital residency at the Albert Einstein Medical Center, where he was awarded the Dr. Benjamin Lebby Award for “Outstanding Performance as a Dental Resident.” Dr. Vito then returned to the University of Pennsylvania, where he completed his specialty training in the prestigious periodontal prosthesis program, where he received his specialty certificates in periodontics and periodontal prosthesis-fixed prosthodontics. Dr. Vito received his dental implant training at the Misch International Implant Institute, receiving training in both the surgical placement and restoration of dental implants. Since 1987, Dr. James Vito has provided general, advanced, cosmetic and implant dentistry to residents of the greater Philadelphia area from his Wayne, Penn., practice. Dr. Vito can be contacted at 523 East Lancaster Ave., Wayne PA 19087, 610-971-2590 or drjamesvito@verizon.net.