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Treating Oral Cancer - Catch them young!

Dr Vikram Kekatpure, May 30, 2015

Worldwide, it is estimated that about a billion humans consume tobacco products. Considering the same, the Indian situation is alarming. Thirty-five crore Indians use some form of tobacco mostly in the form of gutka, khaini, quid etc. The habit of chewing tobacco is rampant across all social classes and as a result, India has a dubious distinction of being the world capital of tobacco-related oral as well as head and neck cancer. About 1 million Indians die due to tobacco-related illness and one death is reported every six hours due to oral cancer.

Tobacco brings with it a plethora of health problems. There is no organ system that cannot be affected with tobacco. To name a few ailments: cardiovascular diseases, neurological problems, respiratory disease and predisposes to cancer to almost all parts of the body.

There is a need to create awareness and strengthen efforts to reduce tobacco-related health issues. May 31 is designated as World No Tobacco Day by the World Health Organization. Various organizations have been leading in efforts for tobacco control in India. Despite this, there is a large pool of tobacco users.

The most common reason for people to take to tobacco is peer pressure. Once they are hooked, it is very difficult to stop unless they want to quit. The average age of tobacco initiation is less than 18-years and counseling for these youngsters is vital. The government should stringently implement the ban on tobacco products near schools and colleges with heavy penalties for underage selling.

Oral cancer is one of the easiest cancers to diagnose as oral cavity is an assessable part of the body. A simple oral examination can detect the tumor. But, one of the major challenges is that the 80 per cent cure rate in the initial stages reduces to 50 per cent as the disease advances.

The department of head and neck oncology of the Mazumdar Shaw Cancer Centre has initiated an oral cancer outreach program to improve awareness, early detection and

surveillance. As a part of this program, awareness talks, oral cancer screening camps, poster presentations and street plays for villagers, factory workers in public places are regularly conducted in and around Bengaluru.

The initiative has completed oral cancer screening for more than 10,000 individuals in the last two years. This screening has helped to detect many patients with early lesions and appropriate treatment could be initiated.

Early detection Persistent communication with primary health providers and tertiary cancer centres is essential to improve patient referral and it can potentially impact early detection of cancers. The department of head and neck oncology at Narayana Health City developed a concept for the first time in India called Oncogrid to down-stage the disease. The concept uses mobile phones to connect ASHA Health workers in the community to dental surgeons and the hospital for early detection and surveillance of oral cancer.

The current standard treatment of cancer is team work requiring a multidisciplinary approach and inputs from various specialities like head and neck surgeons, radiation oncologist, medical oncologist, reconstructive surgeons, pathologist, radiologist and speech and swallow therapist, are needed for effective management of oral cancer.

The advances in complex resections and reconstructions, chemotherapeutic drugs and radiation techniques have improved the cure rates. These have helped in reducing the associated functional and cosmetic morbidity. Treatments continue to evolve, but we have certainly come a long way in our understanding of the nature of the disease. There is a need to develop tobacco cessation clinics and general physicians should be encouraged to send tobacco addicts for counseling.

(The writer is senior consultant, head and neck oncology, Mazumdar Shaw Cancer Centre, Narayana Health City, Bengaluru)