



Canadian Cancer Society Société canadienne du cancer

Oral Cancer

Understanding your diagnosis



Let's Make Cancer History

1 888 939-3333 | cancer.ca

Oral Cancer

Understanding your diagnosis

When you first hear that you have cancer you may feel alone and afraid. You may be overwhelmed by the large amount of information you will have to take in and the decisions you will need to make.

The introductory information in this brochure can help you and your family take the first step in learning about oral cancer. A better understanding may give you a sense of control and help you work with your healthcare team to choose the best care for you.

What is cancer?

Cancer is a disease that starts in our cells. Our bodies are made up of millions of cells, grouped together to form tissues and organs such as muscles and bones, the lungs and the liver. Genes inside each cell order it to grow, work, reproduce and die. Normally, our cells obey these orders and we remain healthy.

But sometimes the instructions in some cells get mixed up, causing them to behave abnormally. These cells grow and divide uncontrollably. After a while, groups of abnormal cells form lumps, or tumours.

Tumours can be either *benign* (non-cancerous) or *malignant* (cancerous). Benign tumour cells stay in one place in the body and are not usually life-threatening.

Malignant tumour cells are able to invade nearby tissues and spread to other parts of the body. Cancer cells that spread to other parts of the body are called *metastases*.

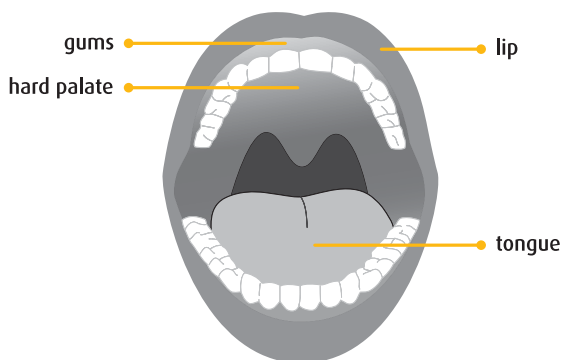
The first sign that a malignant tumour has spread (metastasized) is often swelling of nearby lymph nodes, but cancer can spread to almost any part of the body. It is important to find and treat malignant tumours as early as possible.

Cancers are named after the part of the body where they start. For example, cancer that starts in the mouth but spreads to the lungs is called oral cancer with lung metastases.

What is oral cancer?

Oral cancer starts in the cells of the mouth (oral cavity).^{*} The oral cavity is made up of many parts:

- lips
- tongue
- inside of the lips and cheeks
- hard palate (roof of the mouth)
- floor of the mouth (under the tongue)
- gums and teeth



The lining of the mouth protects the tissues and organs that make up the oral cavity. And it is exposed to everything you eat, drink and breathe.

^{*} Cancer of the salivary glands behaves differently from other oral cancers. For information about cancer of the salivary glands, please contact our *Cancer Information Service* at 1 888 939 3333.

Causes of oral cancer

Most people diagnosed with oral cancer are over the age of 50. There is no single cause of oral cancer, but some factors increase the risk of developing it:

- smoking or chewing tobacco or using snuff, especially if you also drink alcohol
- drinking alcohol, especially if you also smoke or chew tobacco or use snuff
- chewing betel nut
- sun exposure to the lips

Infection of the oral cavity with the human papillomavirus (HPV) may also be a risk factor for oral cancer. Some people develop oral cancer without any of these risk factors.

Symptoms of oral cancer

The mouth can be examined easily by a doctor or dentist. The signs of oral cancer are often seen in the early stages of the disease during a routine checkup. Possible symptoms of oral cancer include:

- a sore that does not heal on the lip or in the mouth
- a lump or thickening on the lips, gums or in the mouth
- patches that are white or red (or both) inside the mouth or on the lips
- bleeding or pain in the lip or mouth
- loose teeth or dentures that no longer fit well
- problems speaking clearly
- a lump in the neck

Other health problems can cause some of the same symptoms. Testing is needed to make a diagnosis.

Diagnosing oral cancer

After taking your medical history and completing a physical examination, your doctor may suspect you have oral cancer. The examination includes looking at the roof and floor of your mouth, the back of your throat and the insides of the cheeks and lips. Your tongue will be pulled out gently so that the doctor can carefully check the sides of the tongue and underneath it. The doctor will also feel the lymph nodes in your neck. To confirm the diagnosis, your doctor will arrange special tests. These tests may also be used to “stage” the cancer. You may have one or more of the following tests.

Biopsy: A biopsy is usually necessary to make a definite diagnosis of cancer. If oral cancer is suspected, cells are removed from the mouth and checked under a microscope. A local anesthetic (freezing) may be used. A general anesthetic (you will be unconscious) is used if the abnormal area or tumour is in a sensitive area, such as the upper throat or the base of the tongue.

Endoscopy: Your doctor may do an endoscopic examination to check your throat, windpipe and lungs. Endoscopy uses a thin, flexible tube with a light at the end (called an *endoscope*). The doctor inserts the tube through your nose or mouth. If an abnormal

area is found, the doctor may be able to take several samples of tissue through the endoscope for examination under a microscope. This is called an *endoscopic biopsy*. During endoscopy, you will probably be given a mild anesthetic. If the doctor takes tissue samples, you may need a general anesthetic. You will have a sore throat afterwards. This is normal and should disappear after a couple of days.

Imaging studies: Imaging studies allow tissues, organs and bones to be looked at in more detail. Using x-rays, ultrasounds, CT scans or MRIs, your healthcare team can get a picture of the size of the tumour and see if it has spread. These tests are usually painless and do not require an anesthetic.

If your doctor suspects that you have oral cancer, you will likely have a CT or MRI scan taken of your head and neck. To see if you have cancer in your jaw bone and to check the gums, you may have a *panoramic (dental) x-ray*. During this procedure, a special x-ray machine moves around your head in a half circle from ear to ear to create a wide image of the teeth and jaw bone.

Further testing: If the initial tests show that you have oral cancer, your doctor may order more imaging studies to find out if the cancer has spread. You may also have blood tests done to find out how well your organs are working.

Staging

Once a definite diagnosis of cancer has been made and your healthcare team has the information it needs, the cancer will be given a stage.

The cancer stage describes the tumour size and tells whether it has spread beyond the place where it started to grow.

For oral cancer, there are five stages.

Stage	Description
0	This is a very early stage of oral cancer. Cancer cells are found only in the cells in the lining of the lips or mouth. Stage 0 is also called carcinoma <i>in situ</i> .
1	The tumour is less than 2 cm in size and has not spread to lymph nodes.
2	The tumour is larger than 2 cm but smaller than 4 cm in size. The cancer cells have not spread to lymph nodes.
3	The tumour is larger than 4 cm or the cancer cells have spread to nearby lymph nodes (with lymph node tumour smaller than 3 cm).
4	The cancer has spread to the lymph node (with lymph node tumour larger than 3 cm) or cancer cells have spread to other parts of the mouth or body.

It is important to know the stage of the cancer. This information helps you and your healthcare team choose the best treatment for you.

Treatments for oral cancer

Your healthcare team will consider your general health and the type, stage and location of the cancer to recommend what treatments will be best for you. You will work together with your healthcare team to make the final treatment choices. Talk to them if you have questions or concerns.

Treatments affect everyone in different ways. It's hard to predict which side effects you will have. Your healthcare team will tell you what to expect with each treatment. They will also let you know what side effects you should report right away and which ones you can wait to tell them about at your next appointment. If you notice any side effects or symptoms that you did not expect, talk to a member of your healthcare team as soon as possible.

Patients often worry about the side effects of cancer treatment. However, side effects can often be well managed and even prevented with medicine. Be open with your healthcare team. Tell them your concerns and ask questions. They will help you get the care and information you need.

Get a dental checkup before starting treatment

Some treatments for oral cancer may make your mouth sensitive and put you at a higher risk of infection. It's important to have a full dental exam and get any necessary dental work done before you start treatment.

For oral cancer, you might receive one or more of the following treatments.

Surgery: Surgery is often used to treat oral cancer. Very small tumours may be treated with a simple operation under local or general anesthetic.

For larger tumours, surgery is done under general anesthetic and you will stay in the hospital for several days after the surgery. The surgeon removes the entire tumour and some of the healthy tissue around it. If cancer has spread into the bone, part of the bone will also be removed.

If the cancer has spread to the lymph nodes in the neck or there is a high risk of the cancer spreading to them, the surgeon removes these lymph nodes. Other tissues in the neck may also be removed. This is called a *neck dissection*.

You may also need reconstructive surgery. Surgery to remove cancer from your oral cavity may affect your ability to chew, swallow or talk. It can also change how your face looks. Reconstructive surgery (also called *plastic surgery*) can be done to repair or rebuild parts of the lips, mouth, throat and neck.

If the surgery is going to make it hard for you to swallow, an intravenous (IV) drip into a vein or a feeding tube in your nose or your abdomen will be used to give you liquids and nutrients until you are able to eat and drink on your own.

It's important to talk to your surgical team before your operation so that you know what to expect and how it will affect you. After surgery you may have some pain or nausea. These side effects are temporary, and can be controlled. Surgery may cause swelling. If lymph nodes were removed, the swelling may last a long time.

Eating properly after oral surgery can be hard, so ask your healthcare team to refer you to a registered dietitian. A nutritional plan can be made especially for you to help you maintain your health, well-being and quality of life.

Radiation therapy: In *external beam radiation therapy*, a large machine is used to carefully aim a beam of radiation at the tumour. The radiation damages the cells in the path of the beam – normal cells as well as cancer cells. In *brachytherapy*, or internal radiation therapy, radioactive material is placed directly into or near the tumour. Either external or internal radiation therapy, or both, may be used to treat oral cancer. Radiation therapy is usually given after surgery. The type of radiation therapy you have depends on the type and stage of the cancer.

You may have a mask made especially for you before radiation therapy. This custom-made mask is worn for the treatment planning and for all radiation treatments. The mask helps make sure you're in the exact same position for every treatment and helps keep your head and neck from moving during treatment.

Radiation therapy works better if you avoid tobacco

To get the most out of radiation treatment for oral cancer, experts recommend that you:

- Quit smoking, if you're a smoker.
- Avoid second-hand smoke.

Side effects of radiation will be different depending on what part of the head or neck receives the radiation. You may feel more tired than usual or notice changes to the skin (it may be red or tender) where the treatment was given. Radiation for oral cancer will irritate the mouth and throat and make them dry and sore, making it difficult for you to swallow. Radiation may also affect your teeth and gums or how well your dentures fit. These side effects are a result of damage to normal cells. The side effects will usually go away when treatment is over and the normal cells repair themselves. A few side effects, such as dry mouth, can last a long time.

Chemotherapy: Chemotherapy, together with radiation therapy, is sometimes used to treat oral cancer. Chemotherapy may be given as pills or by injection. Chemotherapy drugs interfere with the ability of cancer cells to grow and spread, but they also damage healthy cells. Although healthy cells can recover over time, you may experience side effects from your treatment like nausea, vomiting, loss of appetite, fatigue, hair loss and an increased risk of infection.

Clinical treatment trials: Clinical treatment trials investigate new approaches to treating cancer, such as new drugs, new types of treatments or combinations of existing treatments. They are closely monitored to make sure that they are safe for the participants. Ask your doctor if there is a clinical trial suitable as a treatment option for you. You may benefit and so may future cancer patients.

Complementary therapies: Complementary therapies are used *together with* conventional treatments. More research is needed to understand if these therapies are effective and how they work.

Alternative therapies are used *instead of* conventional treatments. Alternative therapies haven't been tested for safety or effectiveness. It is still unknown whether they will harm you or be effective in the treatment of cancer.

If you are thinking about using a complementary or alternative therapy, it is important to find out as much as you can about the therapy and talk to your healthcare team. It's possible that the therapy might interfere with test results or regular treatments.

After treatment

Follow-up care helps you and your healthcare team monitor your progress and your recovery from treatment. At first, your follow-up care may be managed by one of the specialists from your healthcare team. Later on it may be managed by your family doctor.

The schedule of follow-up visits is different for each person. You might see your doctor more often in the first year after treatment, and less often after that. After treatment has ended, inspect your mouth regularly and visit your dentist for regular checkups. Talk to your dental oncologist before you have any dental procedures done by your dentist.

Report any changes in your mouth, new symptoms and symptoms that don't go away to your doctor without waiting for your next scheduled appointment.

The end of cancer treatment may bring mixed emotions. You may be glad the treatments are over and look forward to returning to your normal activities. But you could feel anxious as well. If you are worried about your treatment ending, talk to your healthcare team. They are there to help you through this transition period.

Rehabilitation: Treatment may affect your appearance or your ability to eat and speak. Your healthcare team will offer rehabilitation programs to help you return to your normal activities. Rehabilitation may include being fitted with a prosthesis (an artificial dental structure) to help you eat and talk normally, speech therapy, dietary counselling or other services.

Maintaining a healthy diet: After treatment for oral cancer, you may find it hard to eat because your mouth is dry or sore, or your sense of smell and taste has changed.

If your mouth is dry, try thick soups, puddings, milkshakes and soft foods moistened with sauces or gravies. If you have little appetite, you may find it easier to eat several small meals and snacks throughout the day, rather than eating three large meals. It is important to eat well so that you get enough calories and protein to control weight loss and maintain your strength both during and after your cancer treatments.

Your doctor or dietitian can give you more information about maintaining a healthy diet.

Living with cancer

There are many sources of help available for people with cancer and for their caregivers.

Your healthcare team: If you need practical help or emotional support, members of your healthcare team may be able to suggest services in your community or refer you to cancer centre staff or mental health professionals.

Family and friends: Those closest to you can be very supportive. Accept offers of help. When someone says “Let me know how I can help,” tell them what they can do. Maybe they can run errands, cook a meal or give you a ride to your doctor’s office.

People who have had a similar experience: Consider visiting a support group or talking with a cancer survivor in person, over the telephone or online. Talking with and learning from others who have had similar experiences can be helpful. Try more than one option to see which one suits you best.

Yourself: Try to stay positive. Staying positive is about figuring out how to deal with cancer in the best way that you can – and everyone will do this their own way. It doesn’t mean that you must seem happy or cheerful all the time or avoid talking or thinking about the difficulties of having cancer. But it can mean looking after yourself by finding relaxing, enjoyable activities that refresh you mentally, spiritually or physically.

The Canadian Cancer Society

Helping you understand cancer

Now that you have been introduced to the basics of oral cancer, you may want to learn more. Please contact the Canadian Cancer Society for more detailed information on oral cancer. Our services are free and confidential.

If you would like to talk to someone who has had a similar cancer experience, we can help you connect with a trained volunteer – in person, over the phone or in a group setting.

To contact the Canadian Cancer Society:

- Call an information specialist toll-free at **1 888 939-3333** Monday to Friday 9 a.m. to 6 p.m.
- E-mail us at info@cis.cancer.ca.
- Visit our website at cancer.ca.
- Contact your local Canadian Cancer Society office.



What we do

The Canadian Cancer Society fights cancer by:

- doing everything we can to prevent cancer
- funding research to outsmart cancer
- empowering, informing and supporting Canadians living with cancer
- advocating for public policies to improve the health of Canadians
- rallying Canadians to get involved in the fight against cancer

Contact us for up-to-date information about cancer, our services or to make a donation.



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