

About this document: This is an installment of the Massachusetts State Oral Health Series (MOHS), developed by the Massachusetts Department of Public Health (MDPH). The series focuses on important issues in oral health in the state through topic-specific installments to be released over time. This issue outlines what healthcare providers can do to improve the oropharyngeal cancer outcomes. Please visit www.mass.gov/orgs/office-of-oral-health for more information.

EARLY DETECTION

For low-risk patients: There is currently no evidence to suggest that oropharyngeal cancer screening should be performed at time points for low-risk adults.¹ However, during primary care and dental appointments, providers are encouraged to:

- **Ask** patients about oropharyngeal cancer risk factors and any changes to their oral health.
- **Educate** patients about oropharyngeal cancer and how to monitor their own oral health.
- **Perform** a brief oral exam to identify any changes to the gums, tongue, or other surfaces of the mouth.
- **Refer** patients for further evaluation or treatment as needed.
- **Encourage** patients to establish a dental home and to follow up with dental appointments.

For high-risk patients: If a patient is identified as having one or more risk factors for oropharyngeal cancer, they are considered high-risk.² Medical and dental providers are encouraged to:

- **Ask** patients about their oral health history, any changes to their oral health, and tobacco use history.
- **Educate** patients about oropharyngeal cancer and how to monitor their own oral health.
- **Perform** a thorough oropharyngeal cancer screening exam to identify any changes to the gums, tongue or other surfaces of the mouth. If a lesion is identified, dental providers can perform a biopsy.
- **Refer** patients for further evaluation or treatment within 7-14 days if any lesions are noted during the oral exam.
- **Encourage** patients to establish a dental home and to follow up with any appointments made to evaluate suspicious lesions.

PREVENTION

Most cases of oropharyngeal cancer are preventable. Several steps can be taken to prevent oral cancer from



Educate

Providers should educate patients on risk factors for developing oral cancer and provide community resources when available.



Quit

Patients should quit using tobacco products. Providers can encourage patients who use tobacco to quit or provide resources for organizations that can help.



Reduce Drinking

Patients should limit alcohol consumption to less than one drink per day. Providers can encourage patients with higher alcohol consumption to cut back or can provide resources for organizations that can help.



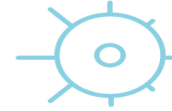
Limit UV Light

Patients should limit exposure to UV light by avoiding prolonged time in the sun and by using sunscreen regularly. Patients should also avoid the use of tanning beds.



Eat Healthy

Patients should keep a healthy diet. Providers can help patients to plan for and maintain a healthy diet and exercise regimen.



Avoid HPV Infection

Those of appropriate age should receive the HPV vaccination. Providers can encourage patients to receive the vaccine, reassure them of its safety, and educate them on the benefits.

PROVIDER SPOTLIGHT

Christine

Christine is a practicing Dental Hygienist and graduate of the Forsyth School of Dental Hygiene at the Massachusetts College of Pharmacy & Health Sciences (MCPHS). During a clinical experience as a dental hygiene student, she detected oral cancer in one of her patients. Christine's experience has encouraged her to share her story with both providers and patients about the importance of early detection and prevention of oral cancer.

What was surprising to you about your experience and how has it shaped your practice of dental hygiene?

"What was surprising about this experience was the impact that it had on me. At the time I was 20 years old, young and healthy and eager to finish school and get out there to the "real world". But then real life happened, and my whole perspective on my education and career changed. I was not the patient who just received a life changing diagnosis nor was I about to undergo cancer treatment, but I was the one to potentially save this woman's life in finding it. I no longer saw each patient as a passing grade. I realized that each and every patient I saw from then and throughout my career was going to be directly affected by my care. I was not just cleaning patients' teeth, but caring for their overall health and well-being."

What advice would you have for providers and patients who need to be screened for oral cancer?

"We learn countless health problems, issues, and diseases while in school. Some we may see, some we may never see. But that does not mean they aren't out there. For patients, it may be hard to hear the word cancer. No one thinks it's going to be them, until they are diagnosed. Educate patients about oral cancer and make them comfortable talking with you so they know they can easily ask questions or voice concerns. The more educated a patient is the better. The worst thing you can do is not to get screened."

What was surprising to you about your experience and how has it shaped your practice of dental hygiene?

"Though this experience was certainly surprising and shocking for me, it ultimately shaped my practice in a positive way. I feel lucky to have identified the patient's lesion during a pre-cancerous stage so that he could go on to receive treatment in a timely manner. I was grateful to the responsive, thorough, and supportive team of dentists and oral surgeons who I worked with when I first detected the lesion. I believe that teamwork is essential to ensuring that lesions are identified in a timely manner and that patients feel comfortable following up with their appointments. In my daily practice as a student and future Dental Hygienist, I have pledged to have conversations with all of my patients, no matter their age or risk, about the importance of oral cancer screening and to urge all other providers to do the same."

What might be some barriers to oral cancer screening and how can we work to overcome these barriers?

"During conversations with my patients, I have encountered some resistance to patients establishing a dental home and seeking treatment. These barriers may prevent the early detection and treatment of oral cancer. My patients have explained barriers such as fear, financial concerns, insurance and transportation to get to appointments. I would encourage dental providers to listen to patients' concerns and work with them to find solutions."

Flavia

Flavia graduated from the Forsyth School of Dental Hygiene at the Massachusetts College of Pharmacy & Health Sciences (MCPHS) in December 2016. Flavia experienced detecting a pre-cancerous lesion on a patient during one of her clinical experiences as a dental hygiene student. She seeks to raise awareness about the importance of early screening for oral cancer and the importance of collaboration between the dental team when there are concerns.

Provider next steps: Addressing barriers to tobacco cessation

Tobacco use is one of the most prominent predictors of oropharyngeal cancer in the United States. The MDPH Tobacco Cessation and Prevention Program (MTCP) has established a support system for providers who want to help their patients quit using tobacco. The program, QuitWorks, is a free tool to help providers link patients who want to quit to [the full range of the state's tobacco treatment services](#).

Many resources are available in Massachusetts to help providers and patients address tobacco cessation. These include the **QuitWorks** tool for providers and the **Massachusetts Smokers' Helpline** (1-800-QUIT-NOW) for patients, among many more available on makesmokinghistory.org. In addition, **most insurance providers, including MassHealth, cover medications and nicotine replacements**. **However, some patients may need encouragement and extra support to quit.** If your patient is:

Not thinking about quitting: Raise doubt about the safety of tobacco use and strongly recommend quitting. Describe the treatment supports available.

Thinking about quitting: Identify pros and cons of continuing to use tobacco and help enroll in QuitWorks.

Trying to quit: Support setting a quit date soon and help enroll in QuitWorks.

No longer using tobacco and looking to maintain abstinence: Review benefits of staying quit and of successes.

Back to regular smoking after a quit attempt: Encourage another quit attempt and help enroll or re-enroll patient in QuitWorks.

TRAINING OPPORTUNITIES

Smiles for Life is a nationally recognized, online oral health curriculum for non-oral health providers aimed at developing an inter-professional workforce equipped with the knowledge and skills to treat specific populations. This curriculum aligns with the recommendations included in the Guidelines and is now being incorporated into the training curriculum of many health professions including, medical students and residents, nursing students, dental students and residents, and dental hygiene students.

www.SmilesForLifeOralHealth.org



References

1. United State Preventive Services Task Force (USPSTF): uspreventiveservicestaskforce.org
2. National Institutes of Health: cancer.gov/types/head-and-neck/patient/oral-prevention-pdq
3. Oral Cancer Foundation Facts: <http://oralcancerfoundation.org/facts/>