



Head and neck cancer: risk factors, treatment and prevention

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In the United States, forty thousand cases of head and neck cancer are diagnosed annually, most in an advanced state of disease," says Sawsan G. Bishay, MD, a Board Certified Radiation Oncologist at Florida Cancer Institute.

"The most common types of head and neck cancer, aside from skin cancer, are squamous cell carcinoma and lymphoma."

As Dr. Bishay explains, cancers of the head and neck can have devastating effects on a patient's quality of life: "We have to consider not only physiological functions like chewing and swallowing, but also the person's appearance, their expression, their speech ... all of those very important 'quality of life' aspects."

Dr. Bishay notes that the most common risk factors for head and neck cancer are tobacco and alcohol exposure, especially if combined.

"Smoking does increase the risk for head and neck cancers, in addition to lung cancer," says Dr. Bishay. "And if you add alcohol to smoking, it's doubly dangerous.

"These tumors occur primarily in the oral cavity, nasal cavity, larynx, and pharynx [throat]."

Today's treatments

Dr. Bishay explains that the methodology of modern treatment for head and neck cancers is oriented toward eliminating the cancer while preserving normal function for all impacted organs.

"Positron Emission Tomography (PET) is an imaging modality that relies on the use of tracers to measure metabolic processes that are altered in tumor metabolism," she explains. "PET has the potential to improve the staging and detection of tumors as well to improve the detection of early recurrence."

PET imaging looks at the molecular biology of the body, and is the only diagnostic imaging test that can distinguish between malignant and benign tissue. It is one of the best tests for early cancer diagnosis, accurate cancer staging and detecting recurrence. PET is often able to detect disease before patients begin to have significant symptoms.

"Surgery and radiation are still the primary treatment modalities for head and neck cancer," Dr. Bishay emphasizes. "They work together. There are some sites where surgery is not an option, and in those cases, radiation alone plays a major role. However, with leading-edge testing such as PET, there is good reason to be optimistic about the future of cancer treatment.

"Modern treatment planning ensures an excellent prognosis for many patients," she concludes. "Still, we need to continue raising people's awareness of preventable risk factors like smoking, so that they get translated into a real impact on the number of cases diagnosed each year." **FHCN**—Michael J. Sabno

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The doctors at Florida Cancer Institute welcome any questions regarding this article and other related topics. For further information, call **(813) 783-1676**. The Zephyrhills office is located at 38010 Medical Center Avenue.

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Sawsan G. Bishay, MD, is a Board Certified Radiation Oncologist. She completed her undergraduate degree and received her Medical Degree from the Alexandria University School of Medicine. She served her Internship in Internal Medicine at the Methodist Hospital of Brooklyn and went on to complete a Residency in the Radiation Oncology Department. Dr. Bishay was the Chief Resident in the Radiation Oncology Department of the New York Methodist Hospital and is a member of the American Society for Therapeutic Radiology and Oncology.