





Empower yourself.

When it comes to head and neck cancers, regular screening can help give you the best chances of early detection and successful treatment. This guide will give you some of the information and resources you need to help protect yourself from these common cancers, including more information about their different types and risk factors:

- Oral cancer (inside the mouth)
- Salivary tumors
- Oropharyngeal cancer (tongue base, tonsils, soft palate and pharynx)
- · Laryngeal cancer
- Thyroid cancer
- Skin cancer

Source: The Oral Cancer Foundation



Here's what you need to know about head and neck cancer.

Head and neck cancer is a group of cancers that start within cells of the head and neck. They often start in squamous cells that are found in the linings of your skin's surface, hollow organs, and respiratory and digestive tracts, including the mouth, voice box and throat.

Our bodies are made up of trillions of healthy cells that grow and divide to create healthy new cells that replace old or damaged cells. When our immune systems are unable to replace and remove damaged cells, those cells can create new, malfunctioning cells that continue to divide uncontrollably. This can result in tissue growth called tumors.

Cancerous tumors are dangerous because the cancer cells can spread, or "metastasize," to nearby tissues. When these cells break off and travel through our blood or lymph systems, new tumors can form in other parts of the body.

Most head and neck cancers do not show any symptoms until the cancer is more advanced. So, it is important to monitor your risk factors and work with your doctor to get the right screening tests, if needed. This guide will review some common head and neck cancers, as well as their symptoms and treatments.



What are common types of head and neck cancer?

Head and neck cancer is a broader category that includes several types of cancer that are distinguished by where the cancerous cells originate within the head or neck and by the type of cell the cancer affects.

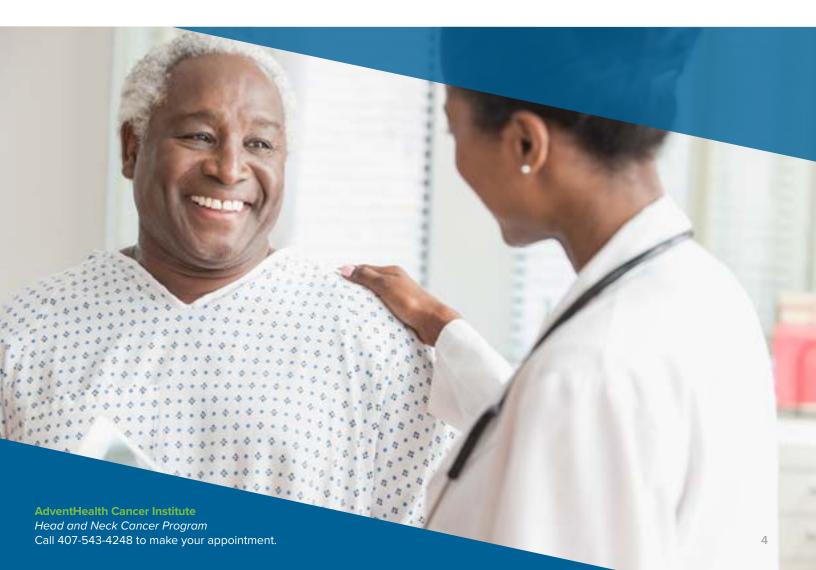
Oral Cancer

Oral cancer makes up 30 to 35 percent of all head and neck cancers, and 90 percent are squamous cell carcinomas. Oral cancer can start anywhere on the lips or inside of the mouth, but is most often found on the tongue, lip, or roof of the mouth, and the salivary glands.

Many oral cancers can be found with regular screenings by a dentist or your primary care doctor. While these cancers tend to spread fast to lymph nodes, early treatment can bring most patients good results.

Salivary Tumors

You have six major salivary glands and hundreds of minor salivary glands. Together, they make enzymes that start breaking down food before it gets to your stomach. Most salivary gland tumors are found in the parotid gland (located on both sides of your upper cheeks) and are not cancerous. However, when salivary gland tumors are malignant, they need elective surgical treatment.





Oropharyngeal Cancer

The oropharynx is the part of your throat (pharynx) that is right behind your mouth. It includes the very back of your tongue; the soft palate (back, roof of your mouth); side and back walls of your throat; and tonsils. Most oropharyngeal cancers affect squamous cells that line the oropharynx and many are associated with the human papilloma virus.

Laryngeal Cancer

The larynx, or "voice box," is located above the windpipe in the center of your neck, part of which is referred to as the "Adam's apple." The larynx is important for normal breathing and voicing. It houses the vocal cords that vibrate to help make the sound of your voice.

Someone with laryngeal cancer may notice voice changes, a sore throat or breathing difficulty when advanced. It may spread to nearby lymph nodes.

Thyroid Cancer

The thyroid is a butterfly-shaped gland in the lower, front part of your neck. As part of the endocrine system, it makes thyroid hormone to control important bodily functions like heart rate, metabolism, blood pressure and body temperature. Cancer can affect different types of cells in the thyroid. The type of cancer cell determines how serious the cancer is and the patient care plan, but most thyroid cancers are treatable with a good prognosis.

Skin Cancers

Skin cancer of the head and neck can occur on the face, nose, ears, lips or scalp. The American Cancer Society reports that in the United States skin cancers are the most frequently diagnosed malignant cancers. The most common skin cancers of the head and neck are basal cell carcinoma and squamous cell carcinoma. Melanoma is more serious but less common. Screening and early treatment can cure most skin cancers.



What causes head and neck cancer?

There is no certain cause of head and neck cancer, but there are risk factors that can increase your chances of developing them.

At the cellular level, head and neck cancer happens because of changes to your body's genes that control the way cells (mostly squamous cells) grow and divide.

Genetic changes can be passed down from your family members, happen randomly, or happen because of an environmental exposure to cancer-causing chemicals like those in tobacco or the sun's ultraviolet radiation that damages cell DNA.

What can I do to prevent head and neck cancer?

There is no certain way to prevent all head and neck cancers, but there are ways to reduce your risk factors for them. You can reduce your risks by:

- Protecting yourself from the sun's ultraviolet (UV) rays
- Avoiding too much alcohol
- Avoiding tobacco smoke and products

While they may have some things in common, each type of head and neck cancer has its own prevention tips, risk factors and warning signs.

Oral and Oropharyngeal Cancers

WARNING SIGNS

- Mouth sore not healing (most common)
- A lump or mass in the neck
- Pain in the mouth not going away
- Lump/thickening in cheek
- White or red patch or lump on the gums, tongue, tonsil, or lining of the mouth
- Sore throat or a feeling something is caught in the throat that doesn't go away
- Trouble chewing or swallowing
- Trouble moving the jaw or tongue
- Numbness of the tongue or mouth
- Swelling of the jaw
- · Loosening of the teeth
- · Voice changes
- · Weight loss

RISK FACTORS

- Age 55 and older
- Being a man
- HPV infection
- Certain genetic syndromes
- Lichen planus
- Weakened immune system
- Smoking/tobacco products
- Poor nutrition
- Ultraviolet (UV) light from the sun
- Heavy alcohol consumption
- Decaying or sharp teeth

PREVENTION TIPS

- Protect yourself from HPV infection
- Find and treat precancerous growths
- Use sun protection (SPF sunscreen and other skin barriers)
- Eat a healthy diet
- Avoid alcohol
- Avoid smoking
- Get regular dental care

SCREENINGS

Many oral cancers can be found by an oral cancer screening. Many dentists and doctors perform this screening as a regular part of their exams.

Laryngeal Cancer

WARNING SIGNS	RISK FACTORS	PREVENTION TIPS
 Hoarseness Sore throat Earache Lump in the neck Breathing difficulty (advanced)	Heavy alcohol consumptionSmoking/tobacco productsBeing maleHPV infection	Avoid alcoholAvoid smoking

SCREENINGS

If you have three weeks of continuous hoarseness in your voice, it is recommended to have an evaluation by an ear, nose and throat specialist.

Salivary Tumors

WARNING SIGNS	RISK FACTORS	PREVENTION TIPS
 Lump or swelling in neck, mouth, cheek, or jaw Head/neck pain not going away or earache Asymmetry of face/neck Facial numbness Weakness of face Trouble opening your mouth widely Fluid draining from an ear Trouble swallowing 	 Aging Being a man Radiation exposure Workplace exposure to metals Family history Smoking/tobacco products Heavy alcohol consumption 	 Avoid alcohol Avoid smoking

SCREENINGS

Many salivary gland cancers can be found early if screened for during a general medical and dental check-up.



Thyroid Cancer

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- Lump in the neck, sometimes fast growing
- Swelling in the neck
- Pain in the front of the neck, sometimes going up to the ears
- Hoarseness/voice changes that don't go away
- Trouble swallowing
- Trouble breathing
- A constant cough not due to sickness

RISK FACTORS

- Aging (women between 40-50 and men between 60-70)
- Being a woman
- Hereditary conditions/ other diseases
- Family history
- · Diet low in iodine
- Radiation exposure

PREVENTION TIPS

Be cautious of radiation exposure to the head and neck.

SCREENINGS

Most lumps in the thyroid can be found early with routine screenings, often done by your primary care doctor during your yearly exam. An ultrasound of your thyroid gland can also be helpful for screenings.

Skin Cancer

WARNING SIGNS **RISK FACTORS PREVENTION TIPS** Aging **Basal Cell:** Limit sun exposure • Flat, firm, pale or yellow areas · Being a man Stay in shade Raised reddish patches Personal history Cover up with sunscreen, a shirt, hat and sunglasses • Small, pink/red, translucent, Family history shiny, pearly bumps Avoid tanning beds · Long-term/severe skin inflammation Avoid harmful chemicals · Pink growths with raised edges or lower in the center Weakened immune system Don't smoke Open sores · Radiation exposure · Light-colored skin Squamous Cell: Moles (melanoma) Rough or scaly red patches, • Ultraviolet (UV) light from might bleed/crust the sun Open sores Smoking · Wart-like growths Melanoma: · New spot on skin · Changes in shape, size, color, or surface texture of a mole/ skin growth · Sore not healing Spread of skin color/pigment from border of a spot on the skin · Change in sensation on

SCREENINGS

Do your own monthly skin self-checks. Skin cancer screenings can also be done regularly by your doctor or a dermatologist, who specializes in treating the skin.

skin spot

· Itchy spot not going away



How is head and neck cancer diagnosed?

Your medical team will order different screening and diagnostic tests depending on your medical history, symptoms, risk factors and findings from your physical exam. Here are some of the ways your doctor or dentist might screen for head and neck cancer:

- Feeling your neck's lymph nodes, front of your throat, and outside of your cheeks
- Looking at the skin on your face, lips, ears, scalp and neck
- Looking inside your mouth at your gums; insides of your cheeks/lips; tonsils/throat; roof and floor of your mouth; and your tongue (especially the back and sides)
- Using a special light or dye to see possible abnormal cells

If your doctor sees anything during the screening, he or she might take a tissue sample to look at the cells under a microscope, or send it to a lab for testing. This will tell your doctor if the cells are cancerous. These diagnostic tests can involve:

- Brush Biopsy: A surface scraping of tissue with a brush
- Incisional Biopsy: Removal of a small piece
 of tissue from the growth—done in a doctor's
 office or operating room depending on the
 cancer's location and size
- Fine Needle Aspiration (FNA): Removal of cells from the growth, often in the neck walls, with a very thin needle attached to a syringe—often used to diagnose oral cancer

Get the right treatment plan for you.

Your treatment plan for head and neck cancer will depend on its type, location and stage; however, it usually involves local or systemic treatments, or a combination of them. Sometimes, there are additional treatment options, such as immunotherapy, clinical trials or alternative and complementary therapies.

Local treatments target the tumor without affecting the rest of your body. Examples of local treatments are surgery and radiation therapy. The specific type of head and neck cancer will guide your doctor's treatment plan.

Systemic treatments involve drugs (given by mouth or delivered directly into the bloodstream), which reach cancer cells wherever they are in the body.

These treatments include chemotherapy, pain and symptom management, hormone therapy and targeted therapy.

If caught early, many head and neck cancers can be treated with surgery alone. If not, these cancers can metastasize (spread) because they are so close to the lymph nodes in the head and neck. If they do spread, radiation, chemotherapy or additional surgeries and therapies might be needed.

Beyond the medicine, you'll work with nutritional, spiritual and emotional support experts to ensure you're able to successfully make lifestyle changes to help contribute to successful cancer treatment, like quitting smoking and increasing exercise.





Why should you select our head and neck cancer program?

The Head and Neck Cancer Program is part of the AdventHealth Cancer Institute, which is the largest cancer care provider in Florida.

The Head and Neck Cancer Program has an elite surgical and medical staff combined with a renowned clinical research team that works tirelessly to screen for, detect, diagnose and treat head and neck cancer with the best possible results.

Our program features Central Florida's largest group of otolaryngologists, radiation oncologists, medical oncologists and other specialists.

Otolaryngologist head and neck surgeons provide sophisticated restorative techniques to rebuild the soft tissues and jaws by transplanting

tissue from another part of the body.

The team also includes principal investigators of head and neck cancer clinical trials and research studies, as well as support services that include genetic counseling, spiritual counseling, support groups, specialized rehabilitation programs, and

Let's talk in person.

For more information about the AdventHealth Cancer Institute Head and Neck Cancer Program, call 407-543-4248.

This guide is provided to the general public to disseminate healthrelated information. The information is not intended to be used for diagnosing or prescribing. Please consult your physician before undertaking any form of medical treatment and/or adopting any exercise program or dietary guidelines.

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