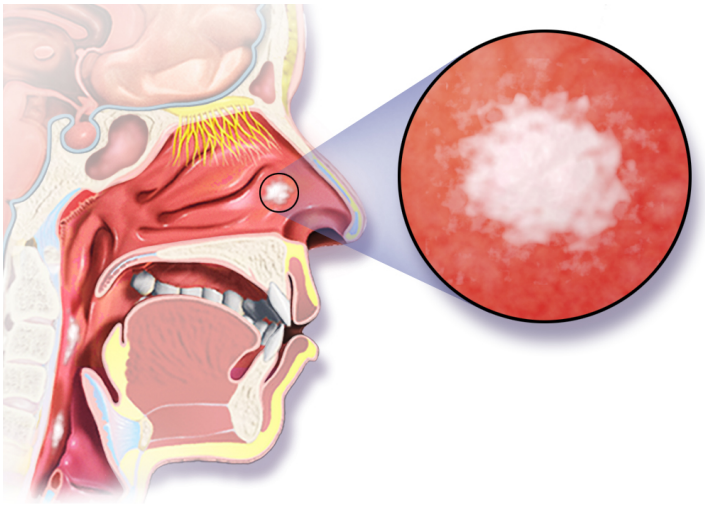
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World Head and Neck Cancer Day- A growing burden that can be curbed

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Despite great advancements in this specialty, the management of Head and Neck cancers still remains a problematic and intriguing issue due to the complex anatomy of the various sites.



The total burden of cancer across the globe is estimated to be around 22 million. Approximately 10 million new cases of cancer are diagnosed every year across the globe. Head and neck cancers account for more than half a million of the total cancer cases reported in India every year, putting India in the sixth place worldwide.

Dr Vikram Kekatpure, Senior Consultant Head & Neck Surgical Oncology, Cytecare Cancer Hospitals, Bengaluru, shared his concerns on the lack of appropriate guidelines for head and neck cancer treatment in India. “Majority of the head and neck cancers in India are in advanced stages. The kind of tumors we see here in India are at a way beyond stage seen in the US and Europe. Typically, cancer is categorized from stage 1 to stage 4, but we see cases which are termed between stage 6 to stage 10. There are no clear guidelines on how to go about with treating such advanced stages”, he said.

While head and neck cancers form one of the most common cancers in South and Southeast Asian countries, they form only 1–4 per cent of all cancers in the Western world.

“There are no guidelines being set and followed in India for treating this cancer, which is a problem. That is the reason our outcomes are inferior compared to the western world. With so much collective experience in our country, the overall outcome remains poor. It is best to have a multi- disciplinary team, including the surgical oncologist, medical oncologist, radiation oncologist, pain & palliation expert, and interventional oncologist to address this prevailing condition”, mentioned Dr Kekatpure.

Recently, the Head and Neck Oncologists at Cytecare Cancer Hospital in association with The Foundation for Head and Neck Oncology, Association of Otolaryngologists of India & Bangalore Chapter and Association of Oral and Maxillofacial Surgeons of India & Karnataka State Chapter, conducted first of its kind Annual Symposium in Bengaluru on “Consensus Guidelines for Management of Advanced Head and Neck Cancer in India”. The resulting guidelines are yet to get from approval from the regulatory bodies. The main objective of the event was to create awareness for improving access to health care facilities, early diagnosis, treatment, and palliative care for head and neck cancer.

“Though International Consensus Guidelines are available for the management of tongue cancer, it is not entirely feasible to apply these guidelines to the Indian population owing to differences in incidence of the disease in different parts of India, socioeconomic factors, and availability of resources. We need to adapt to our situation in India. We cannot simply follow what the western world is doing. We need to plan our own guidelines”, said Dr Anil D Cruz, Director, Tata Memorial Centre, Mumbai.

The number of health care institutes dedicated to cancer care is sadly inadequate when compared with Western countries. There are 27 dedicated cancer hospitals (regional cancer centers), and there are about 300 more general or multispecialty hospitals which give cancer care to the patients.

“In order to plan a treatment, particular guidelines are required. For example, there are National Comprehensive Cancer Network (NCCN) guidelines in the western countries. In India we have developed guidelines through ICMR for various cancers. But India is so vast, appropriate facilities are not available everywhere, and so we need to give out balancing recommendations to hospitals across the country”, said Dr. K S Gopinath, Consultant Surgical Oncologist, Healthcare Global Enterprises Ltd.

“There is a definite need for implementing more multispecialty hospitals in India. It will help in detecting early cases of cancer. If a good biopsy examination is conducted, cancer can be detected early. Biopsy can be combined with CT scan and MRI to plan the treatment. Nowadays, the role of neoadjuvant chemotherapy has a lot of potential in the treatment of head and neck cancer. Apart from this, organ preservation technology should also be adapted in various hospitals”, stated Dr Ajay Rao P, Radiation Oncologist, Cytecare Hospitals, Bengaluru.

Dr. Vijay Agrawal, Senior Consultant Medical Oncologist, Healthcare Global Enterprises Ltd. explained how immunotherapy is revolutionizing head and neck cancer treatment scenario. “Immunotherapy drugs such as Nivolumab and Pembrolizumab have recently been approved by FDA for advanced and metastatic head and neck cancer patients who have progressed on standard chemotherapy and have very little treatment options available. Less that 20 per cent of the patients respond to this drug, but the patients who do respond have a very durable response with minimal side effects and have excellent quality of life. Another immunotherapy drug is a targeted antibody Cetuximab which is now standard of care in both early (in combination with Radiotherapy) and late (in combination with chemotherapy) stages of head and neck cancer and have shown excellent results”, he said.

“There is ongoing active research at HCG evaluating the role of immunotherpy techniques such as 'activated T cell lymphocyte infusion' and 'dendritic cell vaccination' in patients with advanced head and neck cancers”, he further mentioned.

The need for the future is to have sufficient numbers of trained oncologists and associated medical workers along with infrastructure and dedicated treatment guidelines. Government commitment and approval is required to tackle head and neck cancer as the major disease burden. Along with this, special emphasis needs to be given to prevention programs by the government, as head and neck cancers are potentially preventable.

WHO has categorically stated that in 2020, regions with traditionally low numbers of cancer deaths could see alarming increases in the mortality rates. India being a major contributor to population explosion is likely to run a great risk of producing cancer burden.

Head and Neck Cancer Incidence (percentage) across the world

Type	India	China	UK	US	France	Canada	Australia
Lip	0.9	0.7	1.9	4.1	3.9	9.8	10.9
Tongue	**9.3**	5.1	2.1	4.2	7.5	2.6	2.9
Mouth	**9.2**	9.1	3.3	7.5	9.1	4.1	3.6
Tonsil	2.8	1.2	1.2	3.9	6.5	1.4	4.4
Larynx	**9.7**	5.8	6.3	17.3	13	8	9.8
Nasopharynx	0.8	21.4	0.6	0.5	1.2	9.2	0.9
Hypopharynx	**7.6**	2.8	1.3	3.7	12.9	1.4	4.3
Nose (Para nasal sinus)	1.2	0.8	0.8	1.2	1.4	0.7	1.2
Salivary gland	0.6	0.8	0.7	2.9	1.3	4	1.2

Thyroid	5.1	5.6	2.4	0.1	9.1	4.1	3.8

https://www.ncbi.nlm.nih.gov/pubmed/24568456

Highest incidence of head and neck cancers in different parts of India

Mizoram	Lower pharynx, Tongue
Puducherry	Mouth
Nagaland	Nasopharynx

https://www.ncbi.nlm.nih.gov/pubmed/24568456

Cancer Hospitals Facts-

27 dedicated cancer hospitals

300+ general or multispecialty hospitals proving cancer care

Proposed treatments for Advanced Head and Neck Cancer-

- Multi-disciplinary approach
- Neo-adjuvant chemotherapy
- Organ preservation technology
- Early detection techniques
- Balanced guidelines