



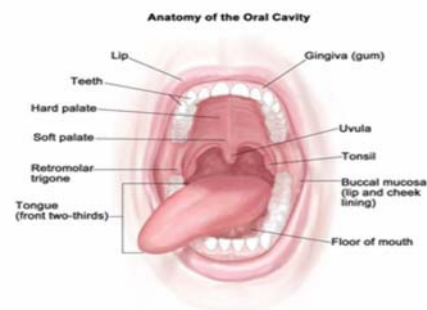
Prevention

Head and Neck Cancer Awareness Month April 2018

HEAD AND NECK CANCER AWARENESS MONTH

HEAD AND NECK CANCERS

Cancers of the head and neck (H&N) are grouped primarily by anatomic proximity, but most of them also share similar histology and causal factors. These include cancers of the lip and oral cavity, pharynx and larynx. Pharyngeal cancers are divided into nasopharyngeal, oropharyngeal and hypopharyngeal cancers. Most of these cancers have squamous cell histology and similar causal factors. However, nasopharyngeal cancers and cancers of the paranasal sinuses and salivary glands have distinctive epidemiology and histology.



RISK FACTORS

Risk Factors in the US: The most important risk factors for head and neck cancers in the US are tobacco, including smokeless (chewing) tobacco, heavy alcohol use and human papilloma virus (HPV) infection. HPV infection, usually with the type 16 strain, adds a 15-fold increased risk of oropharyngeal cancers by about 15-fold, although HPV-associated H&N cancers have a better prognosis and receive less aggressive treatments.

Betel-quid: The south Asian practice of chewing betel-quid, called gutka when tobacco is added, increases oral cavity cancers. Only the areca nut, one of three betel-quid components, is carcinogenic

EBV and Nasopharyngeal Cancer: Epstein-Barr virus (EBV) infection increases the risk of nasopharyngeal cancer more than 30-fold in natives of endemic areas, including southern China, southeast Asia, arctic regions, and the Middle East and North Africa. EBV infection alone, 90% prevalent worldwide, is insufficient to cause cancer. Risk increases with anti-EBV antibody, and cell-free EBV DNA, found in patients with active nasopharyngeal cancers but not in healthy controls or cured patients, may be causal or simply produced by active tumors.

SCREENING AND PREVENTION

Screening: Screening options are limited. Like skin cancer, early diagnosis of head and neck cancer relies on visual inspection, although only the lip and oral cavity and oropharynx can be directly visualized without instrumentation. Most oral inspections occur as part of dental examinations. Otolaryngologists investigate suspicious oral signs and symptoms and examine established patients.

Preventing Exposures: Prevention efforts have focused on avoiding or stopping tobacco and heavy alcohol use. Smokeless tobacco has risen in young males. Avoiding exposure is the preferred approach. The cancer risk falls by 30% within 4 years of stopping smoking and falls to nonsmoker risk after 20 years or more. Stopping alcohol exposure reduces risk later but also falls to non-exposure levels after 20 years. However, understanding the causal role of HPV infection in H&N cancers, first appreciated for cervical and anal cancers, offers an important new preventive strategy, HPV vaccination. HPV vaccination reduces the prevalence of HPV infection by more than 90% 4 years later.

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SOURCE: National Institutes of Health National Cancer Institute

For further information please visit www.strang.org

The Strang Cancer Prevention Cookbook

Root Vegetable Lasagna

Reduce your Risk for Cancer by Eating a Healthy Diet!

Serve as a colorful nutritious entrée or a vegetable side dish

Use a mandolin to produce uniform thin slices of the root vegetables

6 Servings

2 ancho chiles

1 ½ cups vegetable stock or low-sodium canned broth

1 teaspoon olive oil

2 large baking potatoes (about 1 pound), peeled and sliced lengthwise 1/8 inch thick

2 medium sweet potatoes (about 14 ounces), peeled and sliced lengthwise 1/8 inch thick

2 medium parsnips (about ½ pound), peeled and sliced lengthwise 1/8 inch thick

3 medium turnips (about ¾ pound), peeled and sliced 1/8 inch thick

salt

¾ cup diced roasted peppers, drained if jarred

2 cups shredded low-fat cheddar or Monterey Jack-cheese (about ½ pound)

Preheat the oven to 375 F

In a small saucepan, simmer the ancho chilies in the stock for 10 minutes. Turn off heat and let steep while you prepare the lasagna. Rub a casserole or baking pan (about 3-quart) with the olive oil. Arrange the root vegetable slices in the pan starting with a layer of slightly overlapping potatoes, followed by sweet potatoes, parsnip, and turnips; repeat the sequence.

Season each layer with salt to taste and sprinkle with diced roasted pepper and shredded cheese, reserving about 1/3 cup of shredded cheese. Strain the stock, discarding the chiles, and pour evenly over the casserole. Cover with foil and bake for 50 minutes. Remove the foil, sprinkle with the reserved cheese, and bake for 15 more minutes. Let cool for 15 minutes before serving.

High in Fiber-20 percent of the daily requirement

Calories 285

Protein 13 g

Carbohydrates 41g

Fat 8 g

Cholesterol 0 mg

Dietary Fiber 5 g

Saturated Fat 1 g

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THIS NEWSLETTER IS DEDICATED TO FRANCIS OSBORNE



April is Head and Neck Cancer Awareness Month



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