



Prevention

Head and Neck Cancer Awareness Month April 2022

HEAD AND NECK CANCER AWARENESS MONTH

PREVENTING HEAD AND NECK CANCERS

Note to readers: Fear of COVID exposure sharply but mostly transiently **reduced medical visits and preventive care** in 2020. We have added information about cancer prevention during the pandemic.

Summary: COVID-related reduced primary care visits may have increased disparities in head and neck cancer incidence and outcomes in unappreciated ways. **Early HPV vaccination (before age 15)** is the best prevention. Emerging **HPV strain-related variations in head and neck cancer** may alter prevention strategies.

CANCER PREVENTION DURING COVID

COVID-related **decreases in primary care visits** probably **added to disparities** in head and neck cancer prevention because they reduced or delayed **human papilloma virus (HPV) vaccination** and counseling against ethanol and tobacco consumption. A recent review identified less known risk factors, including geographic barriers of **rural life, dietary behavior and nutritional effects** and access to **telehealth**.¹

Early vaccination is critical to preventing **oropharyngeal cancer (OPC)**, the **most common HPV-associated cancer to avoid prior exposure to HPV**. HPV vaccination in older populations, including the 27- to 45-year-old age group more recently approved by the FDA, is far less effective. **Vaccination at age 11 or 12 is recommended**, so **missed primary care visits** could delay or overlook vaccination.

PRIMARY PREVENTION: HPV VACCINATION

HPV vaccination of older populations may be more effective against OPC than against cervical cancer, depending on sexual practices.

HPV genotypes are associated with cancer site, cancer type and cancer behavior. A single-institution study found **HPV16 in most head and neck cancers**, especially **the oropharynx**, but **HPV18** is associated with an **aggressive small-cell variant**.²

SECONDARY PREVENTION: ORAL SCREENING

The Indian Kerala Oral Cancer Screening Trial found that **screening by visual inspection** reduced **head and neck cancer mortality by 27%** in **tobacco and alcohol users**.³ **Targeting screening to heavier-users could reduce costs but preserve most mortality benefits (20%)**.⁴

Any tobacco-related cancer, including head and neck cancer (HNC) are high risk and appropriate for low-dose **CT lung cancer screening**.

For further information please visit strang.org

Authors: James A. Talcott MD, SM, Senior Scientist **Strang** Cancer Prevention Institute
Michael P. Osborne MD, MSurg, FRCS, FACS President **Strang** Cancer Prevention Institute

REFERENCES

1. Salinas M, Chintakuntlawar A, Arasomwan I, Eltahir A, Price KAR. Emerging disparities in prevention and survival outcomes for patients with head and neck cancer and recommendations for health equity. *Curr Oncol Rep* 2022.
2. Mashiana SS, Navale P, Khandakar B, Sobotka S, Posner MR, Miles BA, et al. Human papillomavirus genotype distribution in head and neck cancer: Informing developing strategies for cancer prevention, diagnosis, treatment and surveillance. *Oral Oncol* 2021;113:105109.
3. Sankaranarayanan R, Ramadas K, Thomas G, Muwonge R, Thara S, Mathew B, et al. Effect of screening on oral cancer mortality in Kerala, India: a cluster-randomised controlled trial. *Lancet* 2005;365:1927-33.
4. Cheung LC, Ramadas K, Muwonge R, Katki HA, Thomas G, Graubard BI, et al. Risk-based selection of individuals for oral cancer screening. *J Clin Oncol* 2021;39:663-74.

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

Recipe Laura Pensiero, R.D., **Strang** Nutrition Consultant

Chef, Dietitian, Restaurateur, Author

Owner, Gigi Hudson Valley Trattoria & Catering, Rhinebeck, New York



THIS NEWSLETTER IS DEDICATED TO FRANCIS OSBORNE



April is Head and Neck Cancer Awareness Month



Strang Cancer Prevention Institute

575 Madison Avenue 10th Floor

New York, NY 10022

Tel: (212) 501-2111

www.strang.org

Editor | Research Associate

Merle K. Barash MA AEd, MA Psya

© Strang Cancer Prevention Institute