

Oral & Oropharyngeal Cancer Screening for Today's Population

The Intraoral Assessment

Oral and oropharyngeal (back of mouth) cancer often goes undetected in its early stages because it can develop without pain or symptoms. Over 70% of cancers in this area are diagnosed at the later stages, greatly impacting the survival rates. If discovered early, the 5-year survival rate for oral and oropharyngeal cancer may be as high as 90%.^{1,2}

Early discovery is key! Perform a systematic intraoral assessment on every client at recommended intervals.

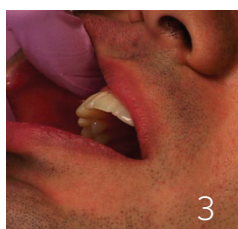
Intraoral Assessment: Lips & Mouth



Examine and palpate the lips.



Examine the inside of the upper and lower lips and gingiva.



Examine the buccal mucosa for red or white patches or swelling and palpate for hardness or tenderness.



Examine the gingiva for red or white patches or swelling and palpate for hardness or tenderness.



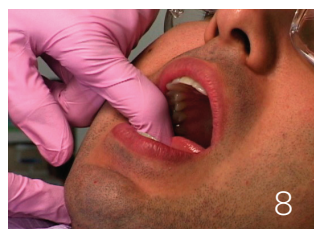
With the client's tongue straight out, examine the dorsal surface, look and palpate as far back as possible for any swelling, texture or colour changes.



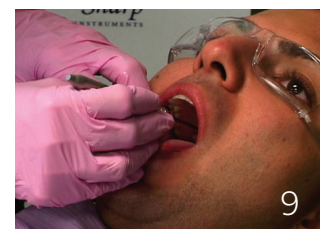
Holding the tongue to the side, examine the lateral borders for any red or white patches or swelling and palpate for hardness or tenderness.



With the client's tongue touching the palate, examine the ventral surface for any red or white patches or swelling and palpate for hardness or tenderness.



Assess the area under the tongue and examine and palpate the floor of the mouth for any swelling, hard spots or changes in colour or texture.



Have the client take a deep breath in through the mouth and say "aah." Depress the tongue and examine the throat and palate for signs of swelling, texture or colour changes.

References

1. National Cancer Institute Surveillance, Epidemiology, and End Results Program. Cancer Stat Facts: Oral Cavity and Pharynx Cancer [Internet]. Bethesda, MD: NCI SEER. Available from: <https://seer.cancer.gov/statfacts/html/oralcav.html>
2. Office of the Chief Dental Officer of Canada. Human papillomavirus and oral health. *Can Commun Dis Rep.* 2020;46(11/12):380–83.