

# Oral Cancer Screening

For Today's Population



How much do you know about oral cancer? Knowledge is power.  
Take the test and learn how you can reduce your risk for oral cancer. (Circle true or false)

1. Oral cancer may be transmitted through sexual contact. T / F

2. Oral cancer is diagnosed 3X more commonly than cervical cancer and is responsible for 3X as many deaths of Canadians per year. T / F

3. Occasional cigar smoking combined with alcohol use does not pose a significant risk to developing oral cancer. T / F

4. Daily intake of recommended servings of fruits and vegetables may reduce your risk of oral cancer. T / F

5. Oral cancer is the 9th most commonly diagnosed cancer in Canadian males and the 14th for Canadian females. T / F
6. Having multiple sexual partners does not increase the risk of developing oral cancer. T / F

7. Oral cancer is on the increase in younger populations who do not smoke cigarettes or consume alcohol. T / F

8. Smokeless tobacco products do not present any increased risk for development of oral cancer. T / F

9. Early discovery can increase the 5-year survival rate from 50% to close to 90%. T / F

10. Annual oral cancer screening examinations performed by a dental hygienist are critical to early discovery of oral cancer. T / F

Scoring:  
0 – 2: Minimal awareness. You have learned a lot today as to how to significantly reduce your oral cancer risk.  
3 – 7: Moderate awareness. You have now increased your knowledge today and can further reduce your oral cancer risk.  
8 – 10: High awareness. Congratulations on being well informed on how to reduce your oral cancer risk.

Answers: 1. T, 2. T, 3. F, 4. T, 5. T, 6. F, 7. T, 8. F, 9. T, 10. T

## DidYouKnow?

- Get The Facts:
- There are three times as many cases of oral cancer compared to cervical cancer and three times as many oral cancer deaths every year.
  - Oral cancer can be sexually transmitted. The culprit is the human papillomavirus (HPV), which also causes cervical cancer in women. You can have HPV without ever knowing it because the virus often has no noticeable signs or symptoms. Most people will clear the virus naturally and never know that they were exposed or had it. The virus can lie dormant for years.
  - The fastest growing new patient profile are non-smokers in the 25–50 age range. White, non-smoking males between the ages of 35 and 55 are most at risk, 4 to 1 over females.

## TheGoodNews

- You Can Reduce The Risk:
- Eliminate use of tobacco products and avoid excessive alcohol consumption.
  - Avoid combining tobacco and alcohol use.
  - Eat a well-balanced diet with recommended servings of fruits and vegetables.
  - Avoid unprotected exposure to the sun.
  - Limit number of sexual partners to reduce risk of HPV infection.
  - Consider the HPV vaccination before becoming sexually active.
  - Have regular dental hygiene visits including oral cancer screenings.

## WhatToLookFor?



- Red or white patch in the mouth.

• Lump or thickening of tissue in the mouth, neck or face.

• Sore in the mouth, including under a denture or appliance, which bleeds easily or does not heal within 14 days.

• Numbness in the mouth or face.

• Persistent earache in only one side.
- Continuous sore throat or persistent infection that lasts for a long time or recurs.

• Hoarseness or change in speech.

• Pain or difficulty swallowing, speaking, chewing or moving the jaw or tongue.

• A lump in the throat or feeling that something is caught in the throat.



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[www.cdha.ca/OCS](http://www.cdha.ca/OCS)





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Oral cancer is often not noticed in its early stages because it can develop without pain or symptoms. If the cancer is detected early, and before it has spread to other tissues, the 5-year survival rate may be as high as 90%.

1. Laronde DM, Hislop TG, Elwood JM, Rosin MP. Oral cancer: Just the facts. J Can Dent Assoc. 2008;74(3):269-72.

Dental professionals could potentially detect about 84% of the number of new oral cancer cases.<sup>1</sup>



## What To Look For...

- A red or white patch in the mouth
- A lump or thickening of tissue in the mouth, neck or face
- Sore in the mouth, including under a denture or an appliance, which bleeds easily or does not heal within 14 days
- Numbness in the mouth or face
- Persistent earache in only one ear
- Continuous sore throat or persistent infection that lasts for a long time or recurs
- Hoarseness or change in speech
- Pain or difficulty swallowing, speaking, chewing or moving the jaw or tongue
- Wart-like masses in the mouth
- A lump in the throat or feeling like something is caught in the throat



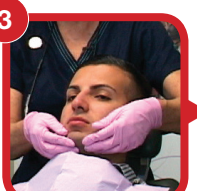









www.cdha.ca/OCS



## Extraoral Assessment Head & Neck




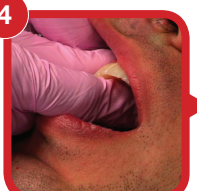
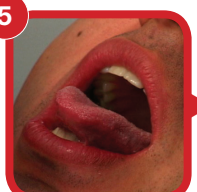




The dental hygienist examines and palpates the following areas:

-  Palpate jaw joint for clicking, tenderness or restricted movement when the mouth is opened and closed.
-  Palpate the parotid salivary gland and the masseter muscle in the cheeks for swelling or tenderness.
-  Palpate submental lymph nodes under the chin area.
-  Palpate submandibular lymph nodes under the angle of the jaw.
-  Palpate cervical lymph nodes along both sides of the neck.
-  Palpate supraclavicular lymph nodes above both sides of the collar bone.
-  Palpate occipital lymph nodes at the base of the skull.
-  Palpate postauricular lymph nodes behind the ear.
-  Palpate preauricular lymph nodes in front of the ear.
-  Palpate thyroid gland for restricted movement during swallowing.



## Intraoral Assessment Lips & Mouth

The dental hygienist pays close attention to changes in colour, size, and texture when examining the following areas:

-  Lips: examine with finger and thumb.
-  Upper and lower lip: examine the gingiva or gums and inside of the lip for any changes.
-  Inside of the cheeks: look for red or white patches or swelling, hardness or tenderness.
-  Gingiva or gums: look for red or white patches or swelling, hardness or tenderness.
-  When the tongue is straight out, palpate and visually examine the upper surface, looking as far back as can be seen for any swelling, texture or colour changes.
-  Holding the tongue to the side, examine each side for any red or white patches, and palpate for tenderness, swelling or hard spots.
-  While the tongue is touching the roof of the mouth, visually examine and palpate the surface for any swelling, red or white patches or hard spots.
-  While the tongue is elevated, visually examine and palpate the area bimanually 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 change.