



cancer.org | 1.800.227.2345

If You Have Oral or Oropharyngeal Cancer

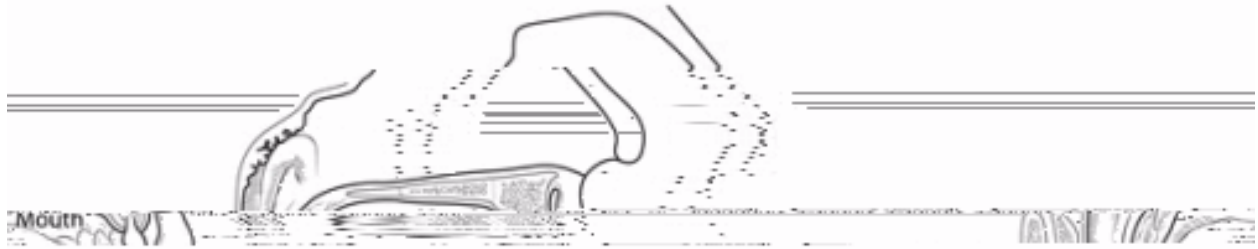
- [What is oral cavity and oropharyngeal cancer?](#)
- [Are there different types of oral cavity and oropharyngeal cancer?](#)
- [How does the doctor know I have oral cavity and oropharyngeal cancer?](#)
- [How serious is my cancer?](#)
- [What kind of treatment will I need?](#)
- [What will happen after treatment?](#)

What is oral cavity and oropharyngeal cancer?

Oral cavity and oropharyngeal cancers are cancers that start in the head and neck area. Cancer that starts in the mouth is called **oral cavity** cancer. Cancer that starts in the middle part of the throat is called **oropharyngeal** cancer. These cancers start when cells in the oral cavity or oropharynx grow out of control and crowd out normal cells.

Cancer that starts in the head and neck area can have many different names depending on where the cancer starts. Ask your doctor to write down the exact kind of cancer you have because it can be confusing.

The information after the picture below is about oral cavity and oropharyngeal cancers. **If you are not sure where the cancer is, ask your doctor to use these pictures to show you.**



Cancer cells can spread to other parts of the body. Cancer cells in the oral cavity or oropharynx can sometimes travel to the lungs and grow there. When cancer cells do this, it's called metastasis. To doctors, the cancer cells in the new place look just like the

look at these areas.

Panendoscopy: This exam is done in the operating room after you are given drugs to make you sleep. The surgeon looks inside your nose, mouth, and throat and sometimes the esophagus (swallowing tube) and trachea (windpipe) through thin tubes called scopes and may take out pieces of tissue (biopsies) to be checked in the lab.

Biopsy: For this test, the doctor takes out a small piece of tissue with surgery, a needle, or scraping the abnormal area, where the cancer seems to be. The tissue is checked for cancer cells. This is the best way to know for sure if you have cancer.

Gene and protein tests: The cancer cells in the biopsy tissue might be tested for genes or proteins. Knowing which genes or proteins your cancer has can help the doctor decide if treatments like immunotherapy might help.

The cancer might also be tested for a protein that is linked to [HPV infection](#)³. If HPV infection is found (meaning the tumor has that protein), this might have an effect on the cancer [stage](#)⁴ and treatment options.

CT scan: This is also called a CAT scan. It's a special kind of x-ray that takes detailed pictures to see if the cancer has spread to the lymph nodes, lungs, or other organs. CT

Dental exam: Your dentist will probably do a complete exam and maybe some x-rays of your teeth and jaw before any radiation is given because radiation can damage the saliva (spit) glands and cause dry mouth. The dentist might also remove bad teeth to lower the chances of cavities and infection.

Hearing test: The most common chemo drug used to treat oral cavity and oropharyngeal cancer, cisplatin, can cause ringing in the ears or even hearing loss. You might have your hearing checked (with an audiogram) before starting treatment and your chemotherapy might be changed if your hearing is poor to start with.

Nutrition and speech tests: A **nutritionist** might check your nutrition status before, during, and after treatment to try and keep your body weight and protein levels as normal as possible. A **speech therapist** might test how well you swallow and speak. They might give you exercises to do to help strengthen the muscles so that you can eat and talk normally after finishing treatment.

Blood tests:

type of treatment is best for you.

The stage describes the spread of the cancer in the place it started. It also tells if the cancer has spread to nearby organs or to organs farther away.

Your cancer can be stage 0, 1, 2, 3, or 4. The lower the number, the less the cancer has spread. A higher number, like stage 4, means a more serious cancer that has spread from where it started. Be sure to ask the doctor about the cancer stage and what it means for you.

Questions to ask the doctor

- Do you know the stage of the cancer?
- If not, how and when will you find out the stage of the cancer?
- Would you explain to me what the stage means in my case?
- Based on the stage of the cancer, how long do you think I'll live?
- What will happen next?

What kind of treatment will I need?

There are many ways to treat cancer of the oral cavity or oropharynx.

- Surgery and radiation are used to treat only the cancer. They do not affect the rest of the body.
- Chemotherapy, targeted therapy drugs, and immunotherapy drugs go through the whole body. They can reach cancer cells almost anywhere in the body.

You might get more than one type of treatment. The treatment plan that's best for you will depend on:

- Where the cancer started growing – the oral cavity (mouth) or the oropharynx (the middle part of the throat right behind the mouth)
- The stage of the cancer
- If the cancer is linked to an HPV infection
- The chance that a type of treatment will cure the cancer or help in some way
- How treatment will affect the way you talk, breathe, and eat
- Your age
- Other health problems you have

- Your feelings about the treatment and the side effects that come with it

If your doctor suggests radiation treatment, talk about what side effects might happen. Side effects depend on the type of radiation that's used and the part of your body that's treated. The most common side effects are:

- Skin changes where the radiation is given
- Feeling very tired (fatigue)
- Hoarse voice
- Taste changes
- Mouth and throat sores
- Dry mouth
- Trouble swallowing or eating

Most side effects get better after treatment ends and many can be treated. Some might last longer. Ask your cancer care team what you can expect.

Chemo

Chemo is the short word for chemotherapy – the use of drugs to fight cancer. The drugs may be given into a vein or taken as pills. These drugs go into the blood and spread through the body. Chemo is given in cycles or rounds. Each round of treatment is followed by a break. This gives the body time to recover. Most of the time, 2 or more chemo drugs are given. Treatment often lasts for many months.

For oral cavity and oropharyngeal cancer, chemo is often given along with radiation. This is called

Side effects of targeted drug therapy

Side effects of targeted drug therapy depend on which drug is used. These drugs can make you feel sick to your stomach and cause low blood counts. They can also cause skin changes of the hands and feet. These side effects usually go away after treatment ends.

There are ways to treat most of the side effects caused by targeted therapy drugs. If you have side effects, talk to your cancer care team so they can help.

Immunotherapy

Immunotherapy is treatment that either boosts your own immune system or uses man-made versions of parts of the immune system that attack the oral cavity or oropharyngeal cancer cells. Immunotherapy drugs may be given into a vein.

Side effects of immunotherapy

Immunotherapy can cause many different side effects depending on which drug is used. These drugs may make you feel tired, sick to your stomach, or cause a rash. Most of these problems go away after treatment ends.

There are ways to treat most of the side effects caused by immunotherapy. If you have side effects, talk to your cancer care team so they can help.

Clinical trials

Clinical trials are research studies that test new drugs or other treatments in people. They compare standard treatments with others that may be better.

Clinical trials are one way to get the newest cancer treatment. They are the best way for doctors to find better ways to treat cancer. If your doctor can find one that's studying the

[your symptoms](#)⁷. These may not always be standard medical treatments. These treatments may be vitamins, herbs, special diets, and other things. You may be curious about these treatments.

Some of these are known to help, but many have not been tested. Some have been shown not to help. A few have even been found to be harmful. Talk to your doctor about anything you're thinking about using, whether it's a vitamin, a diet, or anything else.

Questions to ask the doctor

- What treatment do you think is best for me?
- What's the goal of this treatment? Do you think it could cure the cancer?
- Will treatment include surgery? If so, who will do the surgery?
- What will the surgery be like?
- Will I be able to talk normally after surgery?
- Will the treatment affect the way I look? Can anything be done to fix that?
- Has my cancer been tested for HPV infection?
- Will I need a feeding tube?
- Will I need other types of treatment, too?
- What's the goal of these treatments?
- What side effects could I have from these treatments?
- What can I do about side effects that I might have?
- Is there a clinical trial that might be right for me?
- What about special vitamins or diets that friends tell me about? How will I know if they are safe?
- How soon do I need to start treatment?
- What should I do to be ready for treatment?
- Is there anything I can do to help the treatment work better?
- What's the next step?

What will happen after treatment?

You'll be glad [when treatment is over](#)⁸. For years after treatment ends, you will still have appointments with your cancer doctor. Be sure to go to all of these follow-up visits. You will have exams, blood tests, and maybe other tests to see if the cancer has come back.

Follow-up doctor visits after treatment may be needed as often as every few months for the first year, every 3 to 6 months during the 2nd year, and a little less often after that.

8. www.cancer.org/cancer/types/oral-cavity-and-oropharyngeal-cancer/after-treatment/follow-up.html
9. www.cancer.org/cancer/risk-prevention/tobacco.html
10. www.cancer.org

Words to know

Biopsy (BY-op-see): taking out a small piece of tissue to see if there are cancer cells in it

Epiglottis (EP-uh-**GLOT**-is): A thin, valve-like, cartilage flap at the base of the tongue that covers the vocal cord area when you swallow. This keeps food and drink from getting into the windpipe.

Esophagus (eh-SOF-uh-gus): the tube that carries food from the mouth to the stomach

Glottis (GLOT-is): the part of the larynx that contains the vocal cords

Hypopharynx (hi-po-**FAIR**-ingks): the lower part of the throat, from the voice box down to the esophagus

Larynx (lair-ingks): the voice box, which sits below the base of the tongue and at the top of the windpipe. It contains the vocal cords, which make sound.

Metastasis (muh-TAS-tuh-sis): cancer cells that have spread from where they started to other places in the body

Nasal cavity: the inside of the nose above the roof of the mouth

Nasopharynx (NAY-zoh-**FAIR**-ingks): the part of the throat that's behind the nose

Oropharynx (OR-oh-**FAIR**-ingks): the part of the throat that's behind the mouth

Subglottis (sub-GLOT-is): the lower part of the larynx, from just under the voice box to the top of the windpipe

Supraglottis (sub-GLOT-is): the upper part of the larynx, above the voice box

Trachea (TRAY-key-uh): the windpipe, the big tube that carries air in and out of the

