

# Policy Statement 6.10 – Oral Cancer Screening

## 1. Introduction

- 1.1. The incidence of oral cancer in Australia is increasing. It affects 26.9 persons per 100,000 population for lip, oral cavity and oropharynx cancers.
- 1.2. Oral cancers in Australia account for 2.9% of all cancers, and 1.6% of deaths from cancer. In 2012, there were 659 deaths from oral and oro-pharyngeal cancer in Australia, with a male to female ratio of 2.2:1.
- 1.3. Despite efforts to improve survival outcomes, the rate of mortality for oral cancer has remained stable over the last 3 decades.
- 1.4. Over the past decade, Australia has recorded a worrying 33.7% increase in cancers of the tongue and 12.3% increase in oral squamous cell carcinoma in other regions of the mouth. This translates to 8 oral cancers being diagnosed, and 2 persons dying from oral cancer daily.
- 1.5. It is now well established that early detection of oral cancer and potentially malignant oral lesions can improve the clinical outcome for patients. Dentists are well-trained to identify such lesions. An oral cancer examination, as part of a comprehensive oral examination, takes only a short time.
- 1.6. The American Cancer Society recommends an annual cancer-related check-up for all individuals aged 40 years and older, and every three years for those between the ages of 20 and 39 years. Included in this recommendation is an examination for cancers of the oral cavity.
- 1.7. Reviews and other studies suggest that systematic examination of the oral cavity should remain an integral part of dental and medical practice. There is evidence that visual oral examinations could potentially prevent 37,000 oral cancer deaths worldwide.
- 1.8. High risk factors for oral and oropharyngeal cancer include tobacco and alcohol use, sun exposure and chronic human papillomavirus (HPV) infection.

### Definition

- 1.9. SCREENING is a test carried out on a large number of apparently healthy people to detect unsuspected disease.

## 2. Principles

- 2.1. Cancer screening for all patients is essential.
- 2.2. Early detection is critical for decreasing the morbidity and mortality associated with oral and oropharyngeal cancer.
- 2.3. Cancer screening is a responsibility of all health care practitioners.

## 3. Policy

- 3.1. All people, including the edentulous, should be encouraged to attend a dentist at least annually for comprehensive oral examinations.
- 3.2. Oral mucosal examination should be part of any oral examination. Inspection for oral cancer includes direct visualization and palpation of the mucosa of the oral cavity and external lip, as well as palpation of the head and neck lymph nodes.
- 3.3. Public health programmes should be developed to discourage high risk behaviours including:
  - Tobacco and alcohol use;
  - exposure to HPV for example through oral-genital contact;
  - excessive sun exposure.
- 3.4. All young people should be vaccinated against HPV.

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