

ORAL CANCER - RISK FACTORS/CAUSES

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Oral Cancer – Risk Factors/Causes (in North America)

1. Tobacco & Alcohol – The most recognized and acknowledged is the use of tobacco (including smokeless) and alcohol.

2. Sexually Transmitted HPV-16 and -18 – Exposure to HPV-16 (human papilloma virus) is the fastest-growing risk factor for oral cancer. This is the same virus responsible for the vast majority of cervical cancers. The virus presents a fivefold increase in incidence under the age of 40, which means all patients over the age of 17 should be screened annually.

Why age 17? According to the CDC's Advisory Committee on Immunization Practices in recommending the new HPV vaccine "Gardasil" for cervical cancer prevention... "We chose 11 and 12 years because most girls have not had sex at that age." It added: "By 15 years of age, about 25% of American young people have become sexually active. And by age 17, 50% have already done so." – revolutionhealth.com

The HPV Connection – some startling statistics:

One of the most common virus groups in the world today – affecting the skin and mucosal areas of the body – is the human papilloma virus. More than 100 different types of HPV have been identified. Different types of HPV are known to infect different parts of the body. The most visible forms of the virus produce warts (papillomas) on the hands, arms, legs, and other areas of the skin. Most HPVs of this type are very common, harmless, noncancerous, and easily treatable. There are other forms of HPV which are sexually transmitted, and are a serious problem. The most common of these are; HPV- 16, -18, -31, and -45. These cancer-associated types of HPVs cause growths that usually appear flat and are nearly invisible, as compared with genital warts caused by HPV-6 and -11.

The FDA estimates that 70 percent of cervical cancers are associated with HPV-16 or -18. New studies have confirmed a significant link to oral cancer as well. In the oral environment, these manifest themselves primarily in the posterior regions, such as the base of the tongue, back of the throat (oropharynx), tonsils, and tonsillar pillars.

It has now been established that the path which brings people to oral cancer contains at least two distinct etiologies; one through tobacco and alcohol and another via HPV, particularly version 16, though other versions of the virus might be implicated as the research unravels further. There are further delineations that seem to be apparent between the two. In general, it appears that HPV-positive tumors occur most frequently in a younger group of individuals than tobacco-related malignancies. They also occur more frequently in white males, and in nonsmokers. The HPV group is the fastest-growing segment of the oral cancer population.

3. History of Oral Cancer – Patients who survive a first encounter with the disease have a 20 times higher risk of developing a second cancer; this increased risk can last for five to 10 years after the first occurrence.

4. Verrucous Leukoplakia – Approximately one-third become cancerous.

5. Erythroplakia – 91 percent show signs of dysplasia or malignancy.

6. Compromised Immune System – HIV