Maximizing Cures and Preserving Function in Head and Neck Cancers

Head and neck cancers are a fascinating collection of tumors that challenge the multidisciplinary oncology team to maximize rates of cure while preserving some of the most vital functions in a patient’s day-to-day life. Advances in tumor biology and medical technology have contributed to our understanding of these diseases, helping us develop better treatments.

This issue of Cancer Control highlights the role of radiotherapy with or without chemotherapy and surgery for the management of selected neoplasms of the head and neck. We have included several topics that highlight areas of our evolving understanding and goals of organ/function preservation in this oncology setting.

Dr Naghavi and colleagues provide an overview of the management of oropharyngeal cancer in the era of human papillomavirus (HPV). The observation that HPV-associated oropharyngeal cancer confers a better prognosis has increased our understanding into new areas of management. A key idea is the focus on treatment deintensification — a rare opportunity in oncology to maximize the rates of cure with less therapy and fewer rates of toxicity — to maximize quality of life.

Another example of organ/function preservation is the management of squamous cell carcinoma (SCC) of the glottic larynx. Dr Mendenhall and colleagues highlight treatment outcomes for SCC in a large population of patients from their institution as well as from published reports from the medical literature.

Dr Ahmed and coauthors describe proton beam radiation as a highly conformal approach for the management of skull-base tumors. In this setting, proton therapy can be used to exploit its physical dose-distribution characteristics in an advantageous way in numerous critical structures, including the skull base, cranial nerves, visual apparatus, and brainstem.

Dr Strom and colleagues review treatment options for cutaneous basal cell carcinoma and SCC. Skin cancers make up the most common form of human malignancy, and most cases occur on the sun-exposed skin of the head and neck.1-3 Although patients with skin cancer commonly undergo surgery, radiotherapy is also a curative option and offers better cosmetic outcomes in select patients. Thus, the role of radiotherapy in cutaneous oncology is growing.

Drs Hu and Persky present a balanced approach to paragangliomas of the head and neck. Although they are generally benign, these tumors can also cause significant morbidity. The authors underscore that an experienced multidisciplinary team should manage these tumors because these specialists can present patients with all the available care options, including observation alone. Drs Hu and Persky also provide algorithmic plans of care for radiotherapy or surgery in optimally selected patients.

Dr Mifsud and colleagues provide a review on the broad and complex topic of salivary gland cancers, an interesting group of tumors typically managed with surgery. The role of adjuvant radiotherapy and chemotherapy has evolved in this setting.

We hope you find this issue of Cancer Control to be helpful in your practice of head and neck oncology.

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References