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Evaluation, treatment and functional outcomes in patients with head and neck cancer

Jan S Lewin

MD Anderson Cancer Center, USA

Speech and swallowing dysfunction are frequent consequences of head and neck cancer and its treatment. Combined modality treatment has replaced highly morbid operations for the treatment of patients with advanced disease. Endoscopic transoral laser and robotic surgeries along with intensity modulated radiation therapy regimens of photons or protons, offer alternatives for functional preservation by sparing uninvolved tissues, essentially saving critical physiology. Despite the often remarkable therapeutic gains, even organ sparing treatment regimens have frequently been accompanied by significant early and late toxicities, including dysphagia and chronic aspiration. Findings from laryngeal preservation trials show aspiration rates up to 40% in unselected groups of head and neck cancer patients. Up to 80% of symptomatic patients will aspirate when laryngopharyngeal function is impaired; and 50% of those who aspirate will do so silently without indication (coughing or throat clearing). Treatment de-intensification is critical, especially for patients with HPV-associated oropharyngeal cancers who are younger, nonsmokers, who have better cancer treatment response and an increased life expectancy. Recent data support proactive, preventative exercise models as best practice to optimize long-term functional outcomes. Appropriate functional evaluations can provide clear prognostic indicators and guide treatment selection especially for patients in whom cancer cure and survival are comparable. Data demonstrate that prospective implementation of appropriately designed treatment regimens offers the best methods for avoiding long-term dysfunction. This session provides a comprehensive overview of the tumor characteristics, risk factors, treatment regimens and associated toxicities as they relate to the long-term functional outcomes of patients with head and neck cancer.

Biography

Jan S Lewin is a Professor in the Head and Neck Surgery Department and Section Chief of Speech Pathology and Audiology at UT MD Anderson Cancer Center. She received her undergraduate and graduate degrees from the University of Michigan and her PhD from Michigan State University. She is a recognized authority on functional outcomes in oncology patients. She is a regularly invited participant to national and international cancer survivorship programs and public education networks. Under her direction, the speech pathology and audiology program at MD Anderson is recognized as the premier program for functional rehabilitation of oncology patients.

jlewin@mdanderson.org

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