

## *Foreword*

In general, with one exception, unlike physicians and surgeons, dentists (dental doctors) do not kill patients even though their diagnoses and treatment may sometimes cause pain and suffering. The exception is failure to diagnose early oral and oro-pharyngeal cancer. This can subsequently lead to the death of the patients concerned. In 2004, prior to the entry of Bulgaria and Romania, over 67,000 new cases of oral cancer were registered in the European Union (EU), and oral and pharyngeal cancer was the seventh commonest cancer. Since then, the problem appears to be growing and the lifetime risk for European men to develop oral or pharyngeal cancer has been estimated at just under 2% and under 0.5% for women. In the EU, the highest incidence and mortality rates are found in Eastern Europe.

One recent development has been a rise in the incidence of oral and oro-pharyngeal cancer in younger men and women. The cancers concerned are often seen in conjunction with the human papilloma virus (HPV), which is associated with genitals as well as the oral cavity. One study has suggested that 25% of patients with oral cancers associated with HPV are non-smokers.

Prevention and early diagnosis are the keys to improving this situation. Smoking, particularly if coupled with high alcohol consumption, is a major risk factor for oral and oro-pharyngeal cancer. It has been estimated that at least 75% of all oral cancers could be prevented if tobacco smoking was stopped and alcohol consumption reduced. Apart from quantity, the type of alcohol consumed may well be significant in that potential carcinogens in home distilled spirits may promote oral cancer, whereas anti-oxides in red wine may be protective. In different countries, there may be local dietary peculiarities which can also be risk factors, for example impure paprika in Hungary and betel in South Asia. Dentists and other oral health care professionals have a clear role in warning their patients of the risk factors, especially those who smoke, drink excessive quantities of alcohol, and chew betel.

One major problem is that often those who at greatest risk are least likely to visit a dentist or a doctor and, as a result, are only diagnosed when

the cancer has reached an advanced stage. In some countries, there have been interesting initiatives to try to reach this group. In the United Kingdom, every November, there is an annual oral cancer awareness week that seeks to raise the profile of the disease with the public. In the past, in Hungary, one project targeted economically poor adult males with advertisements on television and posters in bars in the poorest areas of cities offering free oral health checks and mucosal screening.

It is essential that all patients are screened for oral cancer when they visit their dentist and that all areas of their oral mucosa are examined. This is easy to recommend. However, it does not always happen and even when it does, the clinician concerned may not diagnose the problem or manage it. Early referral from a general dentist or doctor to a hospital specialist is key. In the United Kingdom, to address this priority, there is now a requirement that patients referred to hospital for suspected cancer are seen by a specialist within two weeks of the date of their referral.

There is clearly much for all health care workers and especially dentists to do to try to improve the current situation and decrease the incidence of oral and oro-pharyngeal cancer. It is sad to say but it is all too easy to forget about the potential problem and concentrate on the teeth rather than the soft tissues of the mouth and the whole patient.

This will be the last Foreword that I will write in 2010. May I wish all readers a very happy Christmas and a happy, healthy and prosperous New Year. A good New Year's resolution would be always to screen every patient's oral mucosa! Looking further into the New Year, I hope to meet many of you during the IXth International Congress of Oro-dental Health and Management in the Black Sea Countries, which will be held in Mamaia, Romania, from 25th to 27th May 2011 and then from 28th May to 3rd June 2011 on a cruise ship in the Mediterranean Sea.

Prof. Dr. Kenneth A. Eaton  
Editor in Chief