

PATIENT INFORMATION

Lip and Oral Cavity Cancer

What is cancer of the lip and oral cavity?

Cancer of the lip and oral cavity is a disease where cancer cells are found in the tissues of the lip or mouth.

How is lip and oral cavity cancer diagnosed?

Your doctor will examine your mouth using a mirror and light and ask you about your medical history, signs and symptoms. Your doctor will ask for an x-ray to be taken of your jaws. Your doctor may then order a special x-ray called a CT scan, which uses a computer to make a picture of the inside of your head and neck. Another special scan called an MRI scan may also be done. If tissue that is not normal is found, your doctor will need to cut out a small piece of tissue and look at it under a microscope, this is called a biopsy. Sometimes the biopsy can be done in the Outpatients Department and sometimes it is necessary to do this under a general anaesthetic which may require an overnight stay in hospital.

What types of treatment are available?

The treatment you will have depends on the size of the cancer, and whether it has spread.

- 1. Surgery is a common treatment for cancer of the lip and oral cavity, surgery may involve removing cancerous tissues from lip, tongue, inside the cheek, along the floor of your mouth or from the roof or palate of your mouth. It may be necessary to replace this tissue with a piece of skin from elsewhere on your body, this if called a 'free flap'. Your doctor will explain this to you in more detail. If cancer has spread into the lymph nodes in the neck, some or all of the lymph nodes may be removed, this is called a neck dissection. The average length of stay will be 2-14 days depending on the extent of your surgery. (Ask for separate leaflet about neck dissection). This operation may be performed at the Royal Devon and Exeter Hospital.
- 2. Radiotherapy can be used to destroy cancerous cells. Radiotherapy can be used before or after surgery. This decision will be made by the team looking after you and is based on the results of the scans and biopsies.
- **3.** Chemotherapy means treatment with drugs. This may be used to treat lip and oral cavity cancer and can sometimes be given before, alongside or after radiotherapy.

Care is provided throughout by a large team of doctors, nurses, dietitians, physiotherapists and speech and swallowing therapists all offering support and information for you and your family

What problems can occur?

Surgery If you need to have surgery inside your mouth you may not be allowed to eat or drink for the first 10 days. If this is the case feeding will be continued by a naso-gastric tube through your nostril into your stomach. This special feed will be carefully monitored by the dietitian. Mouthwashes will be given to you to keep your mouth clean and fresh. Any infection can usually be easily treated with antibiotics. If you suffer any pain it is important that you tell the doctors and nurses looking after you. Painkillers will be available for you as you need them. Sometimes speech and swallowing can be difficult in the period following surgery. The speech and swallowing therapist will visit you on the ward on following discharge as necessary to help you with this. (Also refer to neck dissection leaflet).

Radiotherapy - Radiotherapy will cause some of your salivary glands to produce less saliva; this will lead to permanent dryness of the mouth. Sore skin and mouth, taste changes and swallowing can also be a problem with radiotherapy to the mouth area. Your oncologist and specialist nurse can discuss ways to help with these problems.

How quickly will I recover?

Recovery depends very much on the type of treatment you have undergone as well as your own individual healing. Resuming daily activities, including work, as soon as you are able can help the healing process.

Your feelings

You are likely to experience a number of different emotions; from shock and disbelief to fear and anger. These feelings are quite natural and it is important for you to be able to express these feelings if you wish. Everyone has their own ways of coping with difficult situations; some people find it helpful to talk to family and friends, while others prefer to seek help from professionals, and some will prefer to keep their feelings to themselves. There is no right or wrong way to cope, but help is there if you need it. Talk to your specialist nurse for further information about the help available. Remember, there are other patients who have gone through the same situation. Your specialist nurse can put you in touch with someone who knows what it is like.

Contacts:

Head and Neck Specialist Nurses ☎ (01803) 655044
Macmillan Support Line ☎ 0808 808 00 00
www.macmillan.org.uk

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.