

The Massachusetts Dental Society (MDS) is pleased to make this publication available to our member dentists as a way of communicating important oral health information to their patients.

Information in **WORD OF MOUTH** articles comes from dental health care professionals of the MDS and other leading professional dental organizations, including the American Dental Association. If you have any questions about specific content that may affect your oral health, please contact your dentist. For timely news regarding oral health, visit the “For the Public” section of the MDS website at [www.massdental.org](http://www.massdental.org).

Your comments and suggestions regarding **WORD OF MOUTH** are always welcome. All correspondence and requests for additional copies may be forwarded to Melissa Carman, Managing Editor, Massachusetts Dental Society, Two Willow Street, Suite 200, Southborough, MA 01745-1027, or email [mcarman@massdental.org](mailto:mcarman@massdental.org).

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# HPV and the Changing Face of Oral Cancer

According to the Oral Cancer Foundation, approximately 37,000 Americans are diagnosed with oral cancer each year. This includes cancers of the mouth and throat that cause more than 8,000 deaths. That’s more than one person every hour, every day. Previously, poor lifestyle choices—namely, smoking and drinking—were considered the prime culprits behind oral cancer. However, the Massachusetts Dental Society (MDS) wants to spread the word that tobacco use and alcohol consumption aren’t the only factors that contribute to oral cancer and that it is actually a virus that is causing oral cancer rates to rise at alarming rates, especially among younger adults. While oral cancer is often difficult to talk about, early detection is of paramount importance.

When we think of someone being diagnosed with oral cancer, usually a person who smokes cigars or cigarettes, drinks alcohol excessively, or has chewed smokeless tobacco for years comes to mind. However, new research shows that certain types of oral cancers can also be caused by the human papillomavirus (HPV), and the number of cases is growing. HPV is a virus that has more than 100 strains, including two sexually transmitted types known as HPV-16 and HPV-18, which are both aggressive, high-risk strains that can also lead to certain types of cervical and oral cancers.

According to the American Dental Association (ADA), HPV infection is now considered an important risk factor for oral cancers, even among younger patients who don’t use tobacco products or drink alcoholic beverages. (HPV-negative oral cancers are the cancers that are linked to tobacco and alcohol use, while HPV-positive oral cancers are associated with the human papillomavirus.) The virus has specifically been connected to squamous cell carcinomas of the tonsils and the base of the tongue area.

“A decade ago, most patients we saw with head-and-neck cancer were smokers or heavy drinkers,” says Dr. Robert I. Haddad, chief of the Head and Neck Oncology Program at the Dana-Farber Cancer Institute in Boston. “Right now, only 20 percent of patients are smokers and drinkers, and the other 80 percent get this cancer because of HPV infection. We are clearly seeing an epidemic of HPV-related head-and-neck cancer—the numbers are rising dramatically, and we’re not clear right now why.”

It has been suggested that the use of the HPV vaccine may reduce the rate of oral and throat cancers, but additional studies are still needed.

The Advisory Committee on Immunization Practices, which advises the United States Centers for Disease Control (CDC), recently voted to recommend that boys ages 11 and 12 receive the HPV vaccine, Gardasil, to battle the human papillomavirus, and boys and men ages 13 to 21 receive a “catch-up” dose of the vaccine, if they were not yet vaccinated. Previously, the CDC had only recommended HPV vaccination for girls and women ages 11 to 26, since the human papillomavirus is also associated with 70 percent of cervical cancer cases. For more information about the HPV vaccine, which is administered in a three-dose series, you should speak with your doctor or your child’s physician.

The MDS says that it is important for patients to receive an oral cancer examination from their dentist, usually beginning in the late teenage years, since HPV-related oral cancers tend to occur in younger patients. Dentists are specially trained to

identify suspicious areas in the mouth and on the tongue that could be cancerous. The oral cancer exam usually consists of a thorough examination of the tongue, soft palate, and head and neck. Dentists will also often check for swollen or enlarged lymph nodes in the neck, which can sometimes be an early indicator of oral cancer. Dentists are able to perform brush biopsies on any suspicious oral lesions and can also refer patients to specialists for further diagnosis or treatment.

“Dentists and dental hygienists are uniquely positioned to catch these cancers early, and it is of paramount importance that oral lesions are identified early and patients are referred for an evaluation and biopsy,” says Dr. Haddad.

Oral cancer is particularly worrisome since, in its early stages, it often goes unnoticed. It is extremely important for patients to be aware of the warning signs of oral cancer, which include lingering pain in the mouth or jaw, any area inside the mouth that bleeds easily, and difficulty or pain when swallowing. In addition, any type of sore, lesion, or white and red patches in the mouth that do not heal can be signs of oral cancer.

The ADA states that the detection of oral cancer at an early stage significantly increases the five-year survival rate.

When it comes down to it, education and early detection are the keys to beating oral cancer. Be aware and proactive when it comes to your child’s and your own oral health.