# Oral Cavity Cancer: recent survival trends

# **NCIN Data Briefing**

# Introduction

Oral cavity cancer is one of the most common types of head and neck cancer. In 2011 in England and Wales over 2,000 people were diagnosed with oral cavity cancer, 60% of which were men. The main risk factors are smoking, excessive alcohol consumption and the chewing of tobacco or paan (areca nut/betel leaf). This briefing looks at recent trends in 1 and 3 year relative survival in England and Wales. It highlights the effect of stage is detected as this is a key factor in survival.



#### **KEY MESSAGE:**

survival trends for men and women with oral cavity cancer have improved slightly in England and Wales in recent years. Patients diagnosed at an early stage have significantly better prognosis than patients diagnosed with late stage cancer. Early detection remains important for further increases in survival.

#### Recent trends in relative survival

In general survival for women is better than for men. The 1 year relative survival for patients diagnosed between 2004 and 2011 with oral cavity cancer in England and Wales remains stable at 80% for men and 81% for women in 2011 (figure 1). The 3 year relative survival has significantly improved for men, rising from 58% in 2004/06 to 66% in 2008/10. Over the same time 3 year relative survival also increased for women, from 64% in 2004/06 to 68% in 2008/10, although the increase in women was not statistically significant.

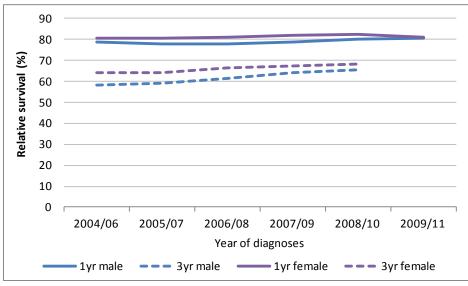


Figure 1: three year rolling trends in 1 and 3 year relative survival for men and women in England and Wales diagnosed with oral cavity cancer between 2004 and 2011 from DAHNO (Data for Head and Neck Oncology).

## Survival and stage of diagnosis

The stage at which cancer is first detected predicts prognosis with patients presenting at an earlier stage of the disease having better survival than those at a late stage. In DAHNO (data audit for head and neck oncology) the recording of stage is good (78% in the latest year) so this has been used to analyse survival by stage. Figure 2a shows survival at 1 year is over 90% if diagnosed early. Relative survival at 1 year for late stage cancer is significantly worse. The gap has widened after 3 years: over 80% of patients diagnosed with early stage are still alive compared to under half those initially

diagnosed at a later stage (see Figure 2b).



(a) 1 year relative survival by stage (b) 3 year relative survival by stage

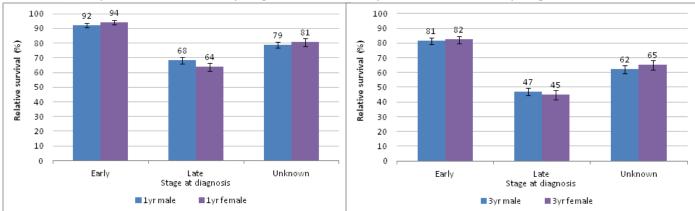


Figure 2: relative survival for men and women by stage at 1 and 3 years between 2004 an 2011

Since 2004 the proportion of people diagnosed with early stage cancer has remained relatively consistent at around 40% of all cases. Despite accounting for 60% of total cases of oral cavity cancer men make up only 56% of early stage diagnoses.

# Recommendations

- Increasing awareness amongst the public of the main lifestyle risk factors for oral cancer could lead to a reduction in the number of cases of cancer
- Increasing awareness about the early signs and symptoms of oral cancer could reduce the proportion of patients presenting at a late stage. See NHS Choices for <u>symptoms check</u>
- Effective ways of targeting groups at risk of late presentation should be considered

# **Further information**

This briefing was produced by the South East KIT in conjunction with the NCIN Head and Neck Cancer Site Specific Clinical Reference Group. For more information about oral cavity cancer and other types of head and neck cancer see the <a href="Head and Neck Cancer Hub">Head and Neck Cancer Hub</a> on the NCIN website <a href="https://www.ncin.org.uk">www.ncin.org.uk</a>

i Relative survival is the ratio of the observed cumulative probability of survival in the cancer patients and the survival that would have been expected if the group had the background mortality in the general population (from England and Wales 2009 life tables). ii Stage is based on the size of the tumour(T), the extent of lymph node involvement (N) and the degree of metastatic spread (M). Early is defined as TNM stages 1 to 2 and late stage is 3 to 4.

#### **FIND OUT MORE:**

South East Knowledge and Information Team (SEKIT)

is the lead Cancer Registry for Head and Neck Cancer http://www.[organisation website]

### Other useful resources within the NCIN partnership:

Cancer Research UK CancerStats – Key facts and detailed statistics for health professionals http://info.cancerresearchuk.org/cancerstats/

The National Cancer Intelligence Network is a UK-wide initiative, working to drive improvements in standards of cancer care and clinical outcomes by improving and using the information collected about cancer patients for analysis, publication and research. Sitting within the National Cancer Research Institute (NCRI), the NCIN works closely with cancer services in England, Scotland, Wales and Northern Ireland. In England, the NCIN is part of the National Cancer Programme.

The National Cancer Intelligence Network will be part of Public Health England from 1<sup>st</sup> April 2013.