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STAGING FOR ORAL CANCER

This leaflet has been designed to improve your understanding of your forthcoming treatment and contains answers to many of the common questions. If you have any other questions that the leaflet does not answer or would like further explanation please ask any member of the Head and Neck team.

What is the problem?

You have recently been diagnosed as suffering from oral cancer. As part of the preparation for deciding which treatment is best for you, your doctors will “stage” your cancer. This leaflet tells you what is involved in that staging process and why it is important for your care.

What is staging?

Staging is the way your disease is measured. Three aspects are important:

- The size of the cancer inside your mouth (T stage).
- Whether there has been any spread of the cancer to the lymph glands in your neck (N stage).
- Whether there has been any spread of the cancer to other parts of your body (M stage). This form of spread is unusual in oral cancer.

This forms the basis of a classification known as a ‘TNM’ staging.

Why have staging?

Your treatment depends on the stage of your disease. Studies have shown that the more accurate your staging the better your treatment can be tailored to your cancer to give you the best chance of cure.

Staging also forms a common language between health care professionals looking after you. Research and development work constantly aims to improve treatments and a common language for comparison helps new treatments to be evaluated in a reliable way.

How is staging done?

There are two main ways in which your cancer is staged.

Clinical examination - quite a lot can be determined about your cancer simply by looking and feeling. Sometimes this can be done whilst you are awake, but often it may be necessary for you to have a short general anaesthetic (ie: to be put to sleep completely) to allow a full assessment. Whilst you are asleep we may take the opportunity to take a good look at the back of your nose, throat, voice box and gullet to make sure that there are no problems elsewhere.

Radiological - some sort of scan is usually carried out (eg CT or MRI scan). These specialised scans look at your head, neck and other parts of your body in detail, so providing important extra information.

Other X-rays (eg CT of chest, jawbone) may be arranged depending as well.

What will happen after staging?

Your staging represents a detailed description of your cancer. It helps decide whether you need surgery, radiotherapy, or a combination of both to give you the best chance of cure.

Once your staging investigations have taken place you will be reviewed by the Head and Neck team. The results of the investigation will be discussed with you and a decision made on which treatment is best for you.

Asking questions

At all times everybody in the team will do all they can to answer your questions as clearly and accurately as possible. It will be a frightening time for you and you should

not be afraid to bring relatives and friends to clinic appointments with you, writing down questions to ask if need be. If you are not sure that you have understood the answer to any question please ask again.

For further advice and information please see the web pages of The British Association of Oral & Maxillofacial Surgeons www.baoms.org.uk