

unplug



On the rise

Oral cancer is striking younger people at higher rates. Early detection can mean survival.

BY KATHRYN ATKINS

I SERVED ON THE PTA with Pam Geer 15 years ago but didn't know until recently that she was diagnosed with Stage II tonsil cancer in 2009, several months after contracting a nasty sinus infection. Not the typical cancer sufferer (*male, 60s, smoker and drinker*), Geer was under 50 when she was diagnosed.

During the course of treatments, an implanted feeding tube helped Geer recover and ultimately survive through the surgery, radiation and chemotherapy phases. She credits Dr. Robert del Junco of Orange-based ENTrust – a medical group composed of ear, nose and throat specialists – along with a team of doctors at St. Joseph Hospital, also in Orange, with saving her life.

"I was lucky on several counts," Geer says. "The cancer had not traveled to my lymph nodes, and my wonderful doctors, husband, daughters and friends helped me through it."

After seeing the heartbreaking fight by well-known figures such as Roger Ebert, and hearing the speculation about how Michael Douglas developed throat cancer, it is becoming

PAM GEER WAVES to the crowd at St. Joseph Hospital's annual Circle of Life Fashion Show in 2011.

more public because the disease is on the rise. Some of that may be attributed to an increase in the incidence of HPV (*human papillomavirus*), especially in younger people.

“These days, more men and women under 40 are diagnosed with oral cancers as a result of HPV,” del Junco says.

HPV does not strictly cause cancer, according to the Centers for Disease Control and Prevention. In fact, most types of this sexually transmitted infection disappear on their own, causing no harm. A few types, however, may cause oral cancer if a person’s body does not fight off the virus and/or because of increased risk factors such as heavy use of tobacco and alcohol.

Statistics from the National Institutes of Health show that the five-year survival rate with the disease still localized at the time of diagnosis is 82 percent, compared with only 28 percent in cases in which the cancer has spread to other parts of the body.

Fortunately, detection is not invasive. On a routine checkup, your dentist or doctor may see a discolored patch on your tongue or on the sides or back of your mouth, or feel something abnormal. If there’s any concern, he will send you for a biopsy to determine if cancer is present.

If the biopsy reveals cancer, you will be referred to physicians such as del Junco who will gather a team to plan the best course of treatment for your specific case.

No one knows why some people get cancer and others don’t. But you can prolong your life by having regular screenings and knowing that your best chance for survival is early detection.

+ **Prior to last year**, the National Institutes of Health predicted that some 36,000 people would be diagnosed with cancers in the mouth, tongue and tonsils in 2013.



Know what to look for

If you have any of the following signs or symptoms, with or without pain, that persist for more than a month, it’s best to get checked out:

- A sore throat
- Difficulty swallowing
- White or red patches
- Enlarged tonsil or tonsils
- A lump in your neck
- An earache

