Foreword

The management of squamous cell carcinoma of the upper aerodigestive tract has evolved significantly during the past two decades. For patients with carcinoma of the oropharynx, hypopharynx, or larynx, functional organ preservation through the application of nonsurgical modalities has become the overarching principle of treatment, as the quest for therapies that provide significant survival benefit continues.

In contrast, surgery remains the primary treatment for patients with cancer of the oral cavity and has been demonstrated to provide better disease control and functional outcome than nonsurgical methods. Some 40 years ago, it was established that definitive radiation for squamous cell carcinoma of the oral cavity was associated with an unacceptable incidence of severe fibrosis, xerostomia, and osteoradionecrosis of the jaws. Contemporary methods of reconstruction introduced in the late 1980s permitted transfer of vascularized soft tissue and bone to reconstruct the tongue, floor of the mouth, and mandible with a high degree of success and acceptable functional outcome. Reliable free tissue transfer provided the oncologic surgeon with the latitude to resect tumors with adequate margins, knowing that advanced reconstruction would provide restoration of form and function and well-vascularized tissues that could better withstand postoperative radiotherapy. It is likely that the combination of better surgical resection—guided by contemporary imaging to more accurately assess the local extension of oral cavity tumors—and advanced reconstruction has contributed to the improved survival witnessed in these patients over the past decade.

Oral Cancer: Diagnosis, Management, and Rehabilitation is an important addition to the existing textbooks devoted to head and neck oncology. Editor John Werning, M.D., D.M.D., sought contributions from an expert field of clinicians to produce a textbook firmly advocating the multidisciplinary approach to cancer treatment that will afford patients the optimal chance for cure. Clearly articulated is the concept that comprehensive therapy will provide a high degree of tumor control and cosmetic and functional restoration. Dr. Werning has assembled in logical progression the key information necessary for the diagnostic evaluation, staging, and treatment of patients with oral cavity cancer.

Oral Cancer begins with a discussion of epidemiology and the molecular events that are precursors to invasive cancer, providing an understanding of the molecular biology of oral cancer progression that is critical to developing risk assessment models and identifying targets for new therapies. On this broad foundation, subsequent chapters provide an in-depth discussion of patterns of disease progression and a comprehensive management approach for the oral cavity subsites. The chapters focusing on cancer treatment are written in tandem by Dr. Werning, a head and neck surgical oncologist, and his University of Florida colleague, noted radiation oncologist William M. Mendenhall, and provide a comprehensive multidisciplinary management philosophy. Their approach leads to a consistency that is elusive with many multi-authored texts.

A key element in the treatment of patients with oral cancer is state-of-the-art reconstruction, and leaders in the field have contributed site-specific chapters covering the reconstructive options that are time tested and effective for restoring form and function. Appropriately, prosthetic rehabilitation, implantology, and speech and swallowing rehabilitation are covered in depth and serve as an adjunct to the chapters on therapy and surgical reconstruction. The textbook appropriately concludes with a discussion of future directions in cancer therapy, novel therapeutics that are on the horizon, and options for managing treatment sequelae that can significantly affect a patient’s quality of life.

Oral Cancer: Diagnosis, Management, and Rehabilitation is an important new resource for the multidisciplinary team dedicated to the care of patients with oral cancer. Its comprehensive coverage of oral cancer prevention, diagnosis, therapy, reconstruction, and rehabilitation will assist providers in improving both therapeutic outcome and patient quality of life.

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Preface

The management of head and neck cancer is inherently multidisciplinary—that is, optimal outcomes are usually achieved through collaboration among clinicians from several disciplines, including radiology, pathology, dentistry, surgical oncology, radiation oncology, and medical oncology. Consequently, most head and neck cancer textbooks are compilations of chapters that have been written by contributors from several fields of specialization. Unfortunately, while the intent of such a textbook is to provide the reader with a multidisciplinary management perspective, the final offering is more frequently a collection of topical overviews from each author's viewpoint. The big picture becomes “lost in translation,” and the reader is left to assimilate fragmented pieces of insightful information into his or her own treatment philosophy.

Oral Cancer: Diagnosis, Management, and Rehabilitation departs from this formulaic approach by interweaving the insights provided by each contributor into a unified management philosophy that is both multidisciplinary and evidence-based. These two concepts are interdependent on each other: The coordination of treatment between various disciplines is facilitated by knowledge of the best current evidence, and implementation of effective evidence-based treatment often requires interdisciplinary collaboration. Accordingly, the various evidence-based diagnoses and treatment recommendations offered by each author have been consolidated into a single multidisciplinary perspective that, I believe, supplies the reader with a different educational paradigm that will engender a more standardized approach to the management of oral cancer.

Over the past decade, most of the observed improvements in survival and quality of life for patients who have undergone treatment for head and neck cancer are the product of medical and scientific progress that has been more incremental than exponential and more evolutionary than revolutionary. In the absence of research that leads to revelatory scientific knowledge or a paradigmatic shift in treatment philosophy, the establishment of a unified evidence-based management philosophy would seem to afford the head and neck cancer field with the best opportunity to improve the quality of care.

It is my hope that Oral Cancer: Diagnosis, Management, and Rehabilitation provides readers with a more sophisticated appreciation for the complexities and nuances of oral cancer management, increases their knowledge and technical skills, and facilitates meaningful communication between each member of the multidisciplinary head and neck cancer team so that our patients may ultimately benefit by having improved chances for cure and enhanced quality of life.

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