

Oropharyngeal squamous cell carcinoma

Non-surgical treatment option

Information for patients



You have been diagnosed with a cancer that has started in a part of the throat called the oropharynx, (the part of the throat directly behind the mouth) and that there is likely spread of the cancer to lymph nodes (sometimes called lymph glands) in the neck.

We are offering you treatment and our intention is to try to cure you of the cancer.

You have a choice of treatments:

1. Surgery +/- radiotherapy +/- chemotherapy

2. Non-surgical treatment (radiotherapy alone or chemoradiotherapy)

This leaflet describes the option of **non-surgical treatment**, considered the standard treatment in the UK. You will be given a separate leaflet describing surgery followed by radiotherapy, a more recent approach which is believed to have an equally high cure rate.

In making your decision it is important to understand that, in most patients, the main difference is treatment related side effects rather than chance of cure.

Please consider the information in both leaflets carefully but be assured that you will be able to discuss your thoughts and feelings with the clinical nurse specialist and allied health professional team before any treatment is planned/decided upon.

Chemoradiotherapy

This treatment consists of standard radiotherapy - 30-35 treatments over 6-7 weeks, Monday to Friday. There will be up to three treatments with Cisplatin chemotherapy (or alternative if cisplatin is unsuitable for you) during your radiotherapy treatment, usually in weeks one, four and seven. Your treatment will be given as an outpatient at St James's University Hospital, Bexley Wing. You may require admission to St James's during or after treatment if you have side effects which cannot be managed as an outpatient.

As with any cancer treatment, side effects are likely to occur. People vary in how they respond so this can be difficult to predict precisely on an individual basis. The expected side effects, however, are listed below:

Radiotherapy

- Pain and soreness of mouth and throat, which is temporary, but is likely to require very strong painkillers for a period of time
- Redness and sometimes ulcers in the skin of the area being treated
- Loss of sense of taste
- Tiredness
- Dryness of the mouth, which is usually permanent
- Difficulty eating, drinking, chewing & swallowing, some of which is hopefully temporary, but may not fully recover
- You may require high calorie drinks or be fed through a nasogastric tube
- Ulcers in the mouth and dental problems

Chemotherapy

- Nausea and vomiting
- Tiredness
- Infection
- Some thinning of hair
- Constipation
- Soreness of mouth

The above are usually very short term at the time of treatment.

- Hearing loss (possibly permanent, but rare)
- Very small risk of death

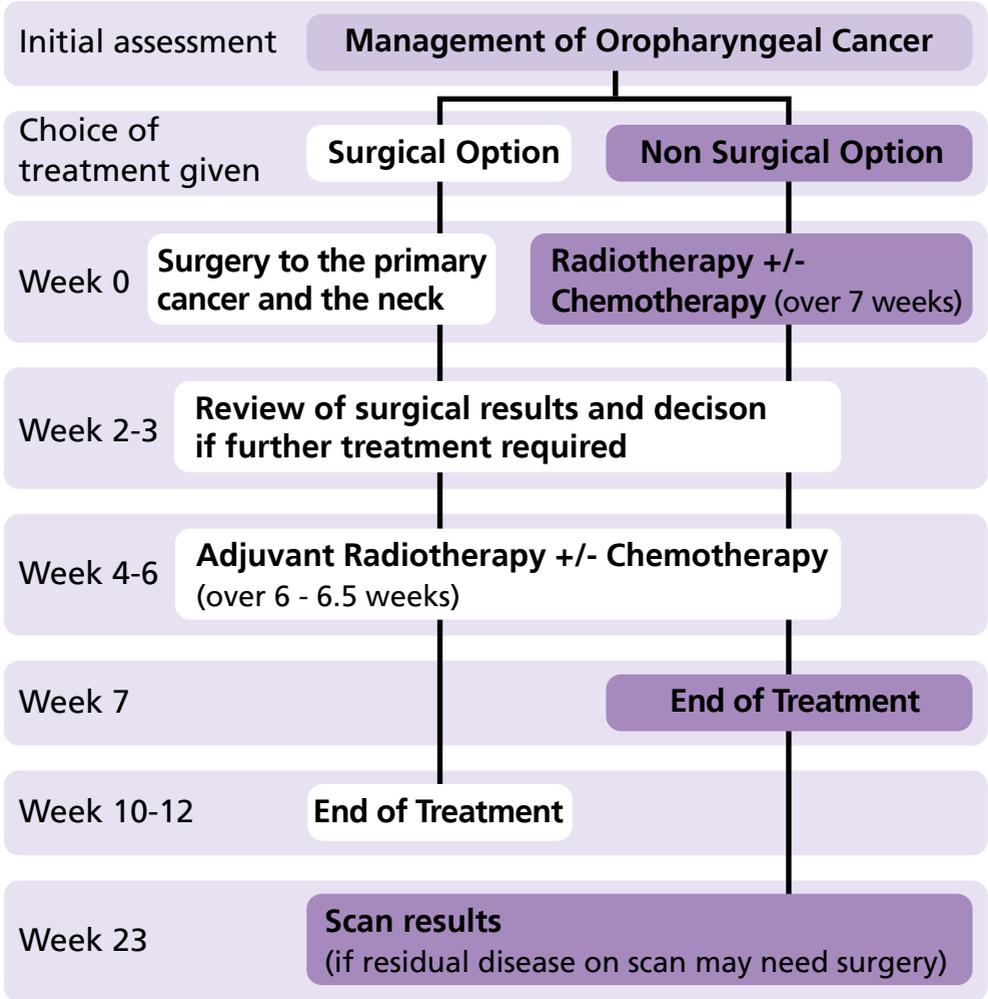
Further down the line, there is a small (approximately 5% risk in the reported literature) risk of 'osteoradionecrosis', a condition where the jaw bone in areas treated by radiotherapy loses vitality and become exposed.

HPV related oropharyngeal cancer

About half of oropharyngeal cancers are caused by a specific virus called Human Papillomavirus. HPV-related oropharyngeal cancer appears to respond very well to chemoradiotherapy and, depending on the findings of clinical trials in progress, in the future patients in this group may be offered less treatment with equal chance of cure.

If you have HPV related oropharyngeal cancer, this may contribute to your decision-making, however it is important to know that until the evidence is available you would receive the established chemoradiotherapy treatment with its associated possible side effects.

Timeline



References

1. Mehanna H, Evans M, Beasley M, et al. Oropharyngeal cancer: United Kingdom National Multidisciplinary Guidelines. *J Laryngol Otol.* 2016;130(S2):S90–S96. doi:10.1017/S0022215116000505.
2. Cancer of the upper aerodigestive tract: assessment and management in people aged 16 and over. NICE Guideline 36. Full guideline February 2016.
3. <https://www.cancerresearchuk.org/about-cancer/mouth-cancer> (accessed 29th May 2020).

Leeds Cancer Support

Complementing care provided by your clinical team, offering access to information and a wide range of support, in a welcoming environment for all. We can be found in the information lounges in Bexley Wing and also in the purpose built Sir Robert Ogden Macmillan Centre.

Contact numbers for Leeds Cancer Support

Information Lounge Level -2 Radiotherapy Department

Open from 8.00am - 6.00pm Tel: **(0113) 206 7603**

Information Centre Level 1 Outpatients Department

Open from 9.00am - 4.00pm. Tel: **(0113) 206 8816**

Sir Robert Ogden Macmillan Centre

Open from 10.00am - 4.00pm. Tel: **(0113) 206 6498**

All the above services can be emailed on:

leedsth-tr.cancersupport@nhs.net

Maggie's Centre

A warm, welcoming place where you can meet people who are experiencing similar things to you. Next to the multi storey car park.

Open Monday to Friday 9.00 am - 5.00pm. Tel: **(0113) 427 8364**

website: www.maggiescentres.org

Macmillan Cancer Support

Freephone: **0808 808 0000** Open 8am to 8pm seven days a week.

A textphone service for deaf and hard of hearing people is also available. Textphone: **18001 0808 808 0000**

website: www.macmillan.org.uk



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