



Head and Neck Cancer

What is Head and Neck cancer?

Head and Neck (H&N) cancer is the term used to describe a variety of cancerous (also called malignant) tumours which develop in the mouth (oral cavity), throat (pharynx), voice box (larynx), salivary glands, and the nose and sinuses. In some H&N cancer centres, cancers of the skin of the scalp, face and neck may also be treated by the H&N cancer team. Cancer of the Thyroid gland is discussed in a separate section.

*ILLUSTRATION COMING SOON

Figure 1. Different areas coming under the umbrella of head and neck cancer

Around 12 000 new H&N cancers are diagnosed in the UK every year. For up-to-date information about the number of patients affected by Head and Neck cancers, please visit the [Cancer Research UK](#) website.

What causes Head and Neck cancer?

Between 46 and 88 out of 100 cases of H&N cancer are preventable.

The following are risk factors for Head and Neck Cancer.

Smoking and alcohol:

Traditionally, patients diagnosed with a head and neck cancer tended to be in their late 60's and 70's. They tended to be heavy smokers and/or drink excessively. These are still risk factors for a H&N cancer.

Human Papilloma Virus:

Over the last couple of decades, we have found that a younger group of fit non-smokers were also getting diagnosed with a type of H&N cancer affecting the throat (tonsils and back of the tongue). This cancer is caused by a virus called the [Human Papilloma Virus or HPV](#).

Social deprivation:

Poor diet and social deprivation contribute to different types of cancer and not just H&N cancers.

Excess sun exposure:

Excessive sun exposure, especially in Caucasian people, can cause skin cancer. Skin cancers that affect the scalp, skin of the ears, skin of the nose, the face, the neck, and lips are treated in by some H&N cancer

teams.

What symptoms can H&N cancer cause?

Symptoms of H&N cancer can be like symptoms that we expect to get when we have a viral throat infection (such as a sore throat or swollen neck glands) or when we become hoarse after shouting such as at a football match or singing loudly at a concert. We expect these symptoms to get better or disappear after around 3 weeks.

An appointment with your GP is recommended:

- when these symptoms persist beyond 3 weeks
- these symptoms get worse over time
- there is no specific cause for your symptoms (such as no coughs and colds, or you have not been using your voice too much)
- when you get a few of these symptoms at the same time

Symptoms of H&N cancer may depend on where the primary cancer is (where the cancer starts). You may experience one or more of the following symptoms.

Voice box (Larynx):

A hoarse voice which is persistent (not intermittently hoarse, not fluctuating, not getting better after around 3 weeks, the expected time for a viral illness to resolve). There is no preceding cause for the hoarse voice (unexplained) such as viral laryngitis or shouting.

There may also be soreness of the throat with or without difficulty swallowing, or you may have coughed up some blood.

Neck lumps:

Lumps and bumps on the neck that persist beyond 3 weeks (the expected time for a viral illness to resolve) should be assessed by a specialist. In some H&N centres, there are dedicated clinics for patients with high-risk [neck lumps](#).

Cancerous lumps tend to be painless and get gradually larger. They do not tend to get smaller over time

Sometimes patients present with only a lump and may not have any other symptoms in their mouth, voice box or throat.

Throat:

- a persistent sore throat (not getting better after 3 weeks, the expected time for a viral illness to resolve)
- pain localised to one side of the throat
- pain from the throat into the ear on the same side
- difficulty swallowing at the level of the throat with weight loss
- pain on swallowing
- bleeding from the throat

Although the above symptoms are not on the list of symptoms which would prompt your GP to refer you on the Adult with suspected Head and Neck cancer (2 week wait) pathway, your GP may refer you urgently to an ENT specialist for an assessment.

Mouth:

- unexplained ulcer or a lump inside the mouth or on the lips which has not improved or resolved after 3 weeks.
- a new unexplained white patch or a red patch in the mouth which has not healed after 3 weeks (but present for less than 6 months)

The following symptoms may also be concerning, and your GP or Dentist may refer you urgently to the OMFS specialist (oral and maxillofacial surgeons) to be seen:

- difficulty opening the mouth (called trismus)
- difficulty or pain on moving the jaw or tongue
- unexplained numbness of the mouth or tongue
- unexplained loose teeth
- unexplained bleeding from the mouth (e.g., not related to gum disease)

Skin cancer:

- a new black or blue spot on the face or a change in an existing one (malignant melanoma)
- a rodent ulcer or [skin swelling](#)

Early diagnosis and prompt treatment can result in the successful treatment of H&N cancer.

We encourage patients with **persistent** and **unexplained** symptoms described above to ask for a GP appointment.

Remember that many of the above symptoms can also be associated with other, less serious, problems in the head and neck. These tend to get better over time and do not need any assessment in the hospital. Your GP will assess your symptoms and refer you to see a Specialist, if needed.

How is a Head and Neck cancer diagnosed?

Your GP will refer you on an Adult with suspected Head and Neck cancer (some people call it the 2 week wait) pathway based on your symptoms and their duration. The hospital ENT (or OMFS) department will offer you an appointment within 2 weeks of the GP or Dentist referral.

You will be seen by an ENT specialist who will take a medical history. A thorough examination of the neck, mouth, and throat will be performed in the clinic. The examination often involves using a [small flexible camera to examine the throat](#).

You may need some tests to exclude or confirm a H&N cancer such as scans (CT and/or MRI scans), a biopsy from a neck lump (often this is with ultrasound guidance) or an [examination of the throat or voicebox](#) under general anaesthetic.

How is a H&N cancer treated?

Your treatment will depend on the type of cancer, where the cancer is in the head and neck, the size, whether it has spread to lymph glands in the neck, or spread elsewhere in the body, and how aggressive the cancer is. Your fitness level and wishes will also be considered to make a shared decision on the best way to treat the cancer.

Your treatment will be managed by a multidisciplinary cancer team (MDT). The team consists of H&N cancer surgeons, Oncologists, Radiologists, Pathologists, Restorative Dentist, Cancer Nurse Specialists (CNS), Speech and Language Therapists (SLT), Dieticians, amongst others.

Treating early cancer

Treatment is with an intention to cure, although there is no 100% guarantee. Broadly speaking, surgery or radiotherapy is used to treat an early cancer.

Treating an advanced cancer

Treatment is again with an intention to cure. Broadly speaking, surgery or radiotherapy or a combination of chemotherapy and radiotherapy are used. Sometimes a combination of all three is needed.

Treatment to control cancer

Sometimes, a patient presents with late-stage H&N cancer. In these situations, unfortunately, the cancer cannot be cured. Treatment is given with the intention of controlling the symptoms of the cancer. This is called Palliative Care.

The H&N cancer team will help your symptoms with painkillers and other medicines, nutrition, and psychological support. In some patients, immunotherapy or chemotherapy may be appropriate. In others, some radiotherapy may be used.

Further reading

For further information, please visit the following websites:

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| Cancer Research UK | <ul style="list-style-type: none">• https://www.cancerresearchuk.org/about-cancer/head-neck-cancer• https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/head-and-neck-cancers |
| Macmillan Cancer Support | <ul style="list-style-type: none">• https://www.macmillan.org.uk/cancer-information-and-support/head-and-neck-cancer |
| The Mouth Cancer Foundation | <ul style="list-style-type: none">• https://www.mouthcancerfoundation.org• info@mouthcancerfoundation.org |
| The Throat Cancer Foundation | <ul style="list-style-type: none">• https://www.throatcancerfoundation.org |
| Rare Cancer Alliance | <ul style="list-style-type: none">• https://rare-cancer.or |
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***Disclaimer:** This publication is designed for the information of patients. Whilst every effort has been made to ensure accuracy, the information contained may not be comprehensive and patients should not act upon it without seeking professional advice.*

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