

Dentists need more training in oral cancer detection

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More than 92 percent of Illinois dentists provide oral cancer examinations for their patients, but many are not performing the procedures thoroughly or at optimum intervals, according to a new University of Illinois at Chicago study.

With an incomplete understanding of the nature of pre-malignant lesions and of proper examination techniques, some dentists in Illinois "are not doing all they should be doing to detect oral cancers in their patients," said Charles LeHew of the UIC Cancer Center's Center for Population Health and Health Disparities and the Institute for Health Research and Policy.

More than 500 dentists in 19 Illinois counties responded to the 38-item questionnaire that was used to gauge the extent of their knowledge of oral cancer prevention and early detection. A greater than 60 percent response rate indicated that Illinois dentists "take seriously their important role in addressing the state's oral cancer burden," said LeHew, who was the lead researcher of the study.

According to LeHew, the majority of dentists correctly identified squamous cell carcinoma, the most common form of oral cancer, as well as the most common sites for oral cancer and the most-common types of early lesions. Many, however, were not able to answer those questions correctly.

Moreover, dentists lacked knowledge needed for risk assessment and

counseling. For example, when asked which of several risk factors is least important, the most frequent answer was age -- which is actually an important factor, LeHew said.

"Some dentists incorrectly identified tobacco or alcohol as the least important risk factor, when in fact they are the two most important," he said.

Two-thirds of the dentists had had oral cancer continuing education; however, 40 percent had trained more than two years prior to the survey. And training in risk counseling was rare, LeHew said. "There is a clear need for additional training and for greater vigilance."

Approximately 31,000 Americans will be diagnosed with oral or pharyngeal cancer this year; it will cause more than 8,000 deaths. Of the newly diagnosed patients, only half will be alive in five years, according to the Oral Cancer Foundation. Survival has not significantly improved in decades.

The death rate for oral cancer is higher than for cervical cancer; Hodgkin's disease; and cancer of the brain, liver, testes, kidney or skin (malignant melanoma).

Early detection is essential in increasing the survival rate for oral cancer. Symptoms include a mouth sore that fails to heal or that bleeds easily; a white or red patch in the mouth that may not be painful but will not go away; a lump, thickening or soreness in the mouth, throat or tongue; and difficulty chewing or swallowing food.

"Illinois dentists face many barriers to providing early detection and risk counseling services to their patients," said Dr. Linda Kaste, associate professor of prevention and public health sciences who co-authored the study. "Lack of proper training and adequate time appear to be chief

among them."

To increase awareness of the disease, UIC has been working with organizations in several Illinois counties that have high incidences of oral cancer to develop and distribute public health education materials, Kaste said. Oral cancer screenings are also provided to the underserved populations. The counties are located in northeast, central, western, and southwestern Illinois.

LeHew said the findings of the study were similar to studies in other states. Illinois dentists are performing at levels similar to dentists in other parts of the country, he said.

"Dentists are not going to diagnosis cancer," he said. "They are going to find potentially dangerous lesions and refer the patient to an oral surgeon. Because dentists are intimately familiar with the oral cavity, they can take a look around while they are examining a patient.

"The expectations are not clear for what dentists should do in regards to oral cancer. We need to identify what the best practices are. There is still a lot of work to be done to get there."

Source: University of Illinois at Chicago

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