

True burden of head and neck cancer in France underestimated by more than one-third

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A nationwide study of head and neck cancers in France has revealed that the true burden of the disease is underestimated by at least one-third, and that head and neck cancers carry a very high risk of secondary primary cancers, according to two presentations at the ESMO 2016 Congress in Copenhagen.

The EPICORL study is the first nationwide prognosis study of [head](#) and neck cancers in France, using data from the French National Hospital Discharge database from 2008-2012. It identified 131,965 patients discharged with head and [neck cancer](#) from French hospitals, 41% of whom later died in hospital, representing an overall five-year survival rate of 34%.^(1,2)

Distant metastases at diagnosis were recorded in 12% of patients, which was associated with a six-fold increase in the risk of death (HR = 6.2). Relapse during follow-up was recorded in 31% of patients diagnosed at an early stage and 57% of patients diagnosed at an advanced stage, and was also associated with a nearly six-fold increase in the risk of death (HR = 5.9).¹

"Due to its main risk factors of tobacco smoking and alcohol use disorders, head and neck cancer carries a very [high risk](#) of secondary primary cancers and significant burden of severe comorbidities," said investigator Dr Florence Huguet from the Department Of Radiation

Oncology at Tenon Hospital in Paris.

More than half the patients in the study had a cancer other than head and neck cancer, or had severe Charlson comorbidities other than cancer, which were associated with significantly lower survival.

Researchers also noted a high incidence of secondary primary head and neck cancers, which were observed in 6.1% of patients at diagnosis and 2.3% of patients during follow-up.

"We found cumulative incidences of relapse and secondary metachronous H&N cancer in the range of previous reports, though each risk was significantly increased in patients with advanced stage at diagnosis as compared to patients with early stage at diagnosis," Dr Huguet said.

The EPICORL researchers also found that the national cause of death statistics underestimated the burden of head and neck cancer by 38%.² Investigator Dr Caroline Even, from the department of Head and Neck Cancer at Gustave Roussy said this was likely due to the fact that 43% of the 41,503 patients who died in hospital with advanced head and neck cancer were also treated for a cancer other than head and neck.

"Because determining the underlying cause-of-death is conflicting in presence of multiple primary cancer sites, we found unsurprisingly that the presence of former or synchronous cancers other than head and neck cancer were a major explanatory factor of the mortality gap observed in National Statistics," Even said.

While the incidence of head and neck cancer has been reported as decreasing with the decline in the two main risk factors - tobacco smoking and alcohol consumption - the study found the annual death toll of head and neck cancer increased in hospital over the study period.

Commenting on the study, Professor Sandrine Faivre, medical oncologist at Hôpitaux Universitaires Paris Nord Val de Seine, France, said "this study is a major piece of data giving the nationwide spectrum of analysis in a country where the population has been exposed to tobacco and alcohol for the last decades."

"HPV infection does not appear to impact positively in this recent French epidemiology report, which shares the classical features of tobacco/alcohol-induced head and neck cancers".

"The study highlights the burden and the poor prognosis of head and neck cancers linked to tobacco/alcohol, which also induce significant comorbidities in this population of patients. Besides recurrence, of note is the high incidence of second primary other cancers, which warrants screening or explorations toward organ sites of risk, such as other head and neck sites or lung."

"This is a message of warning to physicians in France treating patients with head and neck cancer: in practice we should be reminded of the fragility of such patients who may have multiple comorbidities, making them especially vulnerable to the toxicities of treatments," Faivre concluded.

More information: 1) Abstract 960P - Causes of death statistics underestimate the burden of head and neck (H&N) cancers: a nationwide study from France in 2008-2012 (EPICORL study) will be presented by Dr C. Even at a Poster Session on Sunday 9 October at 13:00 CEST

2) Abstract 963P - Survival of patients with head and neck (H&N) cancers: a nationwide study from France in 2008-2012 (EPICORL study) will be presented by Dr F. Huguet at a Poster Session on Sunday 9 October at 13:00 CEST

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