

# Uncontrolled heart risk factors common in head, neck squamous cell cancer

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The burden of suboptimally controlled cardiovascular (CV) risk factors

and incident risk of stroke and myocardial infarction (MI) are considerable in patients with head and neck squamous cell carcinoma (HNSCC), according to a study published online June 22 in *JAMA Otolaryngology-Head & Neck Surgery*.

Lova Sun, M.D., from the Perelman School of Medicine at the University of Pennsylvania in Philadelphia, and colleagues defined CV risk profiles, incident stroke, MI, and mortality in patients with HNSCC in a retrospective, population-based cohort study including 35,857 U.S. veterans.

Most patients were taking risk-lowering medications, but 47 percent had one or more uncontrolled CV risk factor. The researchers found that Black race was associated with increased risk of having uncontrolled CV [risk factors](#) (relative risk, 1.06), and higher rates of prevalent and uncontrolled risk factors were seen for patients with larynx cancer versus other cancer subsites. The 10-year cumulative incidence of stroke and MI was 12.5 and 8.3 percent, respectively, considering death as a competing risk. Hypertension, diabetes, [carotid artery stenosis](#), [coronary artery disease](#), and presence of uncontrolled CV risk factor(s) were significantly associated with stroke and MI in cause-specific hazard models. Incident stroke and MI were associated with 47 and 71 percent increased risk of all-cause deaths, respectively, in extended Cox models.

"Owing to epidemiologic shifts and therapeutic advances, cancer prognosis for patients with HNSCC has improved during the past few decades," the authors write. "An improved understanding and focus on modifying CV risk is important in improving survivorship care and long-term outcomes for these patients."

Several authors disclosed ties to the pharmaceutical industry.

**More information:** Lova Sun et al, Risk of Cardiovascular Events

Among Patients With Head and Neck Cancer, *JAMA Otolaryngology–Head & Neck Surgery* (2023). DOI: [10.1001/jamaoto.2023.1342](https://doi.org/10.1001/jamaoto.2023.1342)

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