

Oral Cancer in Sulaimani: A Clinicopathological Study



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Abstract:

Oral cancer is one of the most debilitating and disfiguring of all malignancies; it is one of the most frequently occurring cancers in the body. This study is designed to achieve a retrospective and a prospective epidemiological study on oral cancer in Sulaimani city.

In the retrospective cases of oral cancer in ten years (1995-2004) were reviewed, and the prospective study included oral cancer cases diagnosed during the study period. Seventy three cases in the retrospective part and 18 cases in the prospective part were recorded. All cases were analyzed according to age, sex, site and histopathological presentation.

In the retrospective part, the patients were 44 males and 29 females with male to female ratio 1.5:1. The lip was the most commonly affected site by oral cancer (32 cases 43.84%), followed by tongue (16 cases, 21.92%). The peak onset of oral cancer seen in age groups (51-60) and (61-70) years. Squamous cell carcinoma was the major histopathological version, followed by tumor of salivary gland region. In the prospective part of the study the patients were 15 males, and 3 females. Age group (41-50) was the most commonly affected. The lip was the most commonly affected site. The most frequent histopathological type was squamous cell carcinoma.

It was obvious that almost all the cases were seen in an advanced stage, the delay was found to be mainly due to ignorance of the patients, and delay in diagnosis and referral by dental practitioners. Lack of information about habitual smoking and drinking, were noticed. Necessity of cancer registry in Sulaimani is suggested.

Keywords: Oral cancer, Squamous cell carcinoma, patients, habits, smoking, and cancer registry.

Introduction

Oral cancer can be defined as a neoplasm involving the oral cavity, which begins at the lip and ends at the anterior pillar of the fauces [1].

In the absence of any specialized center for cancer registry in Kurdistan Region, particularly in Sulaimani, it becomes necessary to establish a baseline data for cancer information center in the region. This can be achieved gradually by an interested team. As far as we are concerned, all available information and records regarding oral cancer will be documented in an attempt to start the first step in cancer registry formulation in the region.

In general, neoplasms are major causes of fear, morbidity and mortality all over the world. Cancer is one of the five main causes of death in all societies [2]. Oral cancer remains one of the most debilitating and disfiguring of all malignancies. It puts the whole dental team with important obligations, challenges and a real opportunity to save lives.

The most common intraoral malignancy is squamous cell carcinoma [3]. Complications often occur in the mouth either as a direct result of the malignancy or an unwanted effect of treatment. Oral cancer is regarded as a serious public health problem. In certain areas in the

world, oral cancer is number one of the most common cancers in human. The high incidence reflects the prevalence of specific risk factors such as tobacco and alcohol use.

Epidemiological studies showed that the incidence of oral cancer varies considerably between different parts of the world with the highest levels in the Indian subcontinent and the lower ones in Western Europe and North America [4, 5]. The most frequently affected sites of oral cancer in Western countries are the ventro-lateral aspects of the tongue and the floor of the mouth, which account for more than 50% of the cases [5,6]. Other sites affected are the buccal, retromolar, gingiva, and soft palate mucosa, and the least commonly involved sites are the dorsum of the tongue and the hard palate [7]. The lip is the most commonly affected site in some communities [5-7]. In the southeastern part of the Asian continent, parts of Saudi Arabia and Sudan, oral cancer is significantly high mostly on the buccal and commissural mucosa and is considered as one of the most common cancers of the body; this is attributed directly to the use of "especially" unrefined topical tobacco and other carcinogenic stuff which are kept in the mouth for long periods [8-10]. According to the report of the World Health Organization [11], oral cancer is the sixth most common cancer.

The five years survival rate for oral cancer remains high at approximately 50% even with modern medical services (3). The most acceptable explanation for the high mortality rate is the difficulties in early detection. Hence it is important that the diagnosis of oral cancer at its early stages should be born in mind by all dentists; Moreover, early diagnosis means that the patient will get better therapeutic services, less morbidity and longer survival time [12].

The aim of the present study is to achieve a simple epidemiological study on oral cancer in Sulaimani city in an attempt to establish a more precise documentary center for oral cancer.

Materials and methods:

1 -The Sample:

A. The Retrospective study:

The main source of the collected data was the cancer registry center in Iraq (Iraqi cancer Board, Ministry of Health, Baghdad). Other sources of information were the Department of Pathology Sulaimani Teaching Hospital, Department of Oncology, Sulaimani General Hospital and files of the private laboratories of Sulaimani city from the period between 1995- 2004.

All the cases including in the present study were diagnosed histologically as malignant lesions. These cases were analyzed according to type, age, sex and site distribution based on individual case sheet of each case. The files were cross checked and duplicated cases were eliminated.

B. The prospective study:

Cases of oral cancer referred to the Oral and Maxillofacial Department in the Teaching Hospital throughout the period of one year (from 2005 to 2006) were followed up from the first day of attendance to the clinic. Detailed information about each case was recorded together with other necessary documents (photographs, images.....etc).

The oral site distribution and histopathological diagnosis of the lesions in both the retrospective and prospective studies were recorded and categorized according to ICD cods 10 as recommended by International Classification of Disease for Oncology (ICD-O).

Results:

A -The Retrospective study:

1. Annual occurrence:

Table 1 shows that the total number of the cases collected from Sulaimani centers and those referred to the cancer registry center in Baghdad were 73 throughout the period from 1995 to 2004. The patients were 44 males and 29 females, the highest number of cases were seen in 2004 (13 cases).

2-Age and Sex:

The distribution of oral cancer according to age and sex is showed in table 2.

Females were generally less affected than males and the highest affected age groups were those above 60 years, the peak of total malignant oral tumor was seen in their 6th decades of life (27.4%, 20 cases). Male to female ratio was 1.5:1.

3-Oral site distribution:

Cancer cases of the lip represented the highest affected site for oral cancer (43.84%, 32 cases). The tongue was representing the second more affected site (21.92%, 16 cases). Site distributions of all oral cancers are shown in table 3.

Table 1: Total annual number of new cases of oral cancer registered from (1995-2004)

Year	No.	Male	Female	% of total
1995	12	6	6	16.44%
1996	4	4	0	5.48%
1997	4	4	0	5.48%
1998	9	6	3	12.33%
1999	5	5	0	6.85%
2000	3	3	0	4.1%
2001	8	4	4	10.96%
2002	10	6	4	13.70%
2003	5	3	2	6.85%
2004	13	3	10	17.81%
Total	73	44	29	100.00%

Table 2: Distribution of total oral malignant tumors according to age and sex

age	<-20	21-30	31-40	41-50	51-60	61-70	71-80	>81	Un known	total
Total	2	2	3	9	20	25	8	1	3	73
%	2.74	2.74	4.11	12.33	27.40	34.25	10.96	1.37	4.11	100%
M	1	1	2	6	11	16	5	1	1	44
F	1	1	1	3	9	9	3		2	29
M:F	1.00	1.00	2.00	2.00	1.22	1.78	1.67		0.50	
male to female ratio			1.5:1							

Table 3: Site distribution of oral cancer cases.

Site	male		Female		TOTAL	
	No.	%from total	No.	%from total	No.	%
Lip	24	75%	8	25%	32	43.84
Tongue	8	50%	8	50%	16	21.92
Gum	1	25%	3	75%	4	5.48
Floor of mouth	0	0.00	0	0.00	0	0.00
Palate	2	28.57%	5	71.43%	7	9.59
Other and unspecified parts of oral cavity	9	64.29%	5	35.71%	14	19.18

3- Histopathology:

The histopathological diagnoses of the 73 cases of oral malignancies are displayed in table 4. Squamous cell carcinoma comprised the majority of the lesions (57 cases, 78.08%). Malignant tumors of glandular epithelial origin of the salivary glands were second most commonly described neoplasms.

B -The prospective study:

In the prospective part of the study (18) cases were seen during the year 2006. Out of 18 cases, 15 were found in males and only 3 cases were found in females with male to female ratio (5:1). The peak onset of oral malignant lesion was in the age group (41-50) years (5 cases, 27.78%), as shown in the table 5.

Histopathology and oral site distribution :

The majority of oral cancer were seen in the lip (6 cases, 33.33%) and the majority of cases were squamous cell carcinoma (11 cases ,61%) as shown in table 6.

Discussion:

The figure obtained in the present investigation does not seem to represent the actual number of oral cancer cases in Sulaimani city for several reasons. The problem is partly administrative due to absence of any specific information center dealing with cancer in general. The oral cancer patients were seen and treated by general surgeons in the absence of team management including expert oral pathologists and maxillofacial surgeons.

Table 4: Histopathological descriptions of the cases are as mentioned in the records.

Histopathology	Lip	Tongue	Gum	Non-specified	Total
Adeno carcinoma	1		1	1	3
Basal cell carcinoma	1				1
Ductal carcinoma				2	2
Adenocystic carcinoma		1		1	2
Malignant neoplasm	4	1	1	0	6
Basoquamous carcinoma	1			0	1
Mucoepidermoid carcinoma				1	1
Sq. cell ca.	26	18	4	9	57

Table 5: Age and sex distribution oral cancer in the prospective study.

Age	<-20	21-30	31-40	41-50	51-60	61-70	71-80	>81
Total	1	1	0	5	4	4	3	0
M	1	1	0	5	3	3	2	
F			0		1	1	1	

Table 6 : Histopathological description of the cases

Histopathology	Lip	Tongue	Gum	Unspecified site	palate	floor of mouth	Total
Adeno carcinoma			1				1
Malignant melanoma	1						1
Osteosarcoma				1			1
Adenocystic carcinoma					1		1
Polymorphus low grade Adeno carcinoma					1		1
Hodgkin's lymphoma				1			1
Metastatic lymphoma				1			1
Sq.cell ca.	5	3	2	1			11

Other patients were seeking treatment outside the city or the country. Another problem was the difficulties in collecting data from different sources due to absence of archiving and problems in retrieving records. In the last three years the situation changed; oral and maxillofacial

surgeons and oral pathologists became available in the city. This is probably the reason why in the prospective study, the number of oral cancer patients was higher than those seen in any single year in the retrospective study.

Several studies were carried out on the occurrence of oral cancer in Iraq, mainly retrospective in nature [13-19]. The Iraqi National Cancer Registry (INCR) has listed the most common ten cancers for different periods depending on the International Coding System. The lip, tongue, salivary glands, and mouth were listed as separate entities making them out of the range of ten most common cancers. However, considering these regions as part of the oral cavity, oral cancer falls within or close to the ten most common cancers in Iraq following breast, bronchi and lung, urinary bladder, Non-Hodgkin's lymphoma, and larynx. Age and sex distribution was within the same range in all previous studies and the present study. Male to female ratio was about 2:1 and

most commonly affected age group was 50-70 years. These findings are close to those reported from Europe [20- 22].

Although oral cancer has been described as tumors of elderly [23], the incidence is increasing among younger patients worldwide. There is a general agreement that males are affected more commonly than females; in fact two thirds of oral cancer cases are seen in male [24]. The lip was the most commonly affected site by oral cancer. Carcinoma of the tongue was the second most frequently affected site. Similar finding, were reported by other investigator from Iraq [13-16]. The results of the prospective study did not contradict with the findings of the retrospective study.

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شیرپه نجهی دهم له سلیمان

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پوخته

شیرپه نجهی دهم له هه موو شیرپه نجهکان مه تر سیدارو بلاو تره ، له م تویرینه وهیه دا رو پیوئیکی کلینیکی و تاقیگه یی نه نجام دراوه سه بارهت به بلاوی نه نه خوشیه له شاری سلیمانی و به مهستی دانانی بهردی بناغه یهک که پتر هه موو جوهره کانی شیرپه نجه بگریته وه له ههریمی کوردستاندا .

له م تویرینه وهیه دا هه موو حاله ته کانی شیرپه نجهی دهم له سالانی (۱۹۹۵-۲۰۰۵) به شیوازی گه باوه یی و حاله ته کانی سالی (۲۰۰۵-۲۰۰۶) به شیوازی پیشکه وتووی .

نه نجامه کان وایان پیشانداوه که شیرپه نجهی دهم له نیرینه کاندایا پتر تره له چاو میننه کاندایا بهرێژهی (۲ : ۱) . لێو و زمان له هه موو جیگه کانی تری ناوده م پتر دوو چاری شیرپه نجه بووه نه ته وه . و به راژهی (۴۴٪) (۲۳٪) یهک له دوا ی یهک ، که ته مه نیان له نیوان (۵۱-۷۱) سالبوو .

ههروه ها نه نجامی تویرینه وه که نه وه نیشان ددان که لاوازی هه یه له به دوا دا چوون و هه نگرتنی داتا کانی نه م نه خوشیه له مه ئه نده ته ندروستی پیوئری یه کاندایا له شاری سلیمانی .

لیره وه تویرنه ره کان رینمایی ده که ن که زور پیوئستی به بهرنامه یه کی پته و تره یه و ووردبینی له به دوا دا چوونی توشیوانی نه م نه خوشیه هه یه . ههروه هارینمایی ده که ن به دامه زانندی مه ئه ندیکی پیوئری سه ره کی له مه پ تومار کردنی حاله ته شیرپه نجه یه کانی به گشتی و شیرپه نجهی دهم به تاییه تی، نه وه ش بو پزشکی کانی چاره سه ری شیرپه نجه و تویرنه وه کانی که به دوا دا چوونیان هه بیت به جوړیک که هاوکاری کاربن له نزمبوونه وهی رێژهی مردن و که مکر نه وهی کیشه کانی دوا ی چاره سه رکردنه که .

سرطان الفم فی السلیمانیه

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الخلاصة

يعتبر سرطان الفم من بين أكثر أنواع السرطانات خطراً وشيوعاً، وقد تم في هذه الدراسة إجراء مسح سريري ومختبري بشأن انتشار مرض سرطان الفم في مدينة السليمانية، بهدف وضع حجر الأساس لدراسات أكثر شمولية بشأن أنواع السرطانات كافة ومنها سرطان الفم في إقليم كوردستان عامة.

تم في هذه الدراسة مراجعة حالات الإصابة بسرطان الفم على مدى عشر سنوات ۱۹۹۵-۲۰۰۵، ومتابعة الحالات المرضية خلال سنة إعداد الدراسة (۲۰۰۵-۲۰۰۶).

لقد أظهرت نتائج الدراسة ان سرطان الفم أكثر شيوعاً لدى الذكور بنسبة (۱:۲) مقارنة بالإناث، وان الشفة واللسان هما أكثر أجزاء الفم إصابة بهذا المرض، وبنسبة (۴۴٪) و(۲۳٪) على التوالي، وان اعمار اكبر عدد من المرضى المصابين، تراوحت بين (۵۱-۷۰) عاماً.

كما أظهرت نتائج الدراسة، ضعف متابعة وارشفة حالات الإصابة بسرطان الفم في المراكز الصحية المتخصصة في مدينة السليمانية، من هنا يوصي الباحثون بضرورة اتباع برنامج أكثر جدية ودقة لمتابعة المصابين بهذا المرض، واستحداث مركز تخصصي مرجعي لتسجيل الحالات السرطانية بعامة وسرطان الفم بخاصة، وذلك لتمكين الأطباء المعالجين والباحثين من متابعة هذه الحالات بنحو يسهم في خفض حالات الوفيات ويقلل من مشاكل ما بعد العلاج.

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