

BOOK REVIEW

Oral Cancer: Symptoms, Management and Risk Factors

Editor: Sheng-Po Hao (Department of Otolaryngology Head and Neck Surgery, Comprehensive Oral Cancer Center, Shin Kong Wu Ho-Su Memorial Hospital, Medical School, Fu-Jen University, Taiwan)

This publication is edited by a internationally renowned Professor of Otolaryngology, Head and Neck Surgery, Sheng-Po Hao, in the School of Medicine, Fu-Jen University, Taipei, Taiwan. He has organised contributors from many countries, many of which also work in Taiwan, where oral cancer is notoriously for its highest incidence in the world. It is intended that this publication shares their experience with other who fight this disease in other parts of the world, and was written primarily for all the experts from every specialty who are involved in this multimodality health care team.

The book format is presented in 18 chapters, with a comprehensive index of some 15 pages, each chapter is extensively references (up to 2012), with tables, figures, graphs and several clinical pictures – many in black and white, with the occasional colour picture / table. Chapter 1 discusses the epidemiology of oral cancer in Taiwan and its policy implications. Oral Cancer in Taiwan has had a tenfold increase in incidence in the last two decades, with a six-fold increase in mortality in the age group 30 – 54 years of age. The aetiology is associated with a mix of betel quid chewers, smoking and excessive alcohol drinking. Chapters 2 – 6; concentrates on genetics, aetiology, chemoprevention, and prognosis. Chapters 7 – 11; discusses diagnosis (narrow band imaging), evaluation (imaging) of oral cavity tumours, classification of neck dissections, and assessment of cervical metastases. Chapter 10; written by authors from Japan (Hasegawa and Saikawa) who expand on their proposal for changing the classification and nomenclature system for neck dissections – this was proposed in 2005 and a follow-up revised modification in 2009. The reasoning for this proposal is that the classical neck dissections of the past have progressed to less surgically radical into a more selective and functional procedure. They agree that their proposal is “work in progress”. Chapter 12 & 14; discusses the management the mandible and the use of free flap reconstruction procedures (ALT ad Fibula). Chapters 13 & 15 - 17: discusses photodynamic therapy for oral pre-cancers and cancers, the use of brachytherapy, the use of robotic image-guided fractionated stereotactic radiotherapy for recurrent oral cavity cancer and the use of targeted therapies. Chapter 18; reviews therapy induced oral mucositis from biology to management.

The content of the book concentrated on the clinical challenge of oral cavity cancer from aetiology, evaluation and treatment options with discussion of results – this is a very medical book and avoids involvement of the non-medical members of the “multidisciplinary collaboration team” who look after the psychology, rehabilitation and terminal care of the many patients who demand an equal amount of time from the health service as does the diagnosis and therapeutic management. The single chapter on mucositis is an excellent review and could have expanded more on the prevention, avoidance and management during treatment schedules.

The book is well produced, and maybe a bit expensive at \$150.00. As always includes some readership annoyances in spite of the medical content and topic reviews: most of the clinical pictures could and should have been published in colour, some of the figures are hazy suggesting that they have been published directly from pdf slide presentation, all figures should be drawn and

produced to reader uniformity and consistency. There is a mix of chapter presentation, five using the Harvard (“author-date”) system while the majority, thirteen using the Vancouver (“author-number”) system – as a result there are a number of references duplicated in the chapters that used the Harvard system. Maybe when the second edition is produced some of these comments may be incorporated.

All-in-all a good effort, which has highlighted the unknown problem, that our clinical colleagues have an explosion of oral cavity cancer in Taiwan, and there is a need for the Government and Health Care Bodies to actively get involved in “patient education about head and neck cancer” and initiate a public awareness of the risk of developing oral cavity cancer with an association with betel quid chewing, cigarette smoking and indulging in the drinking of “excessive alcohol”, without this involvement the situation is likely to become much worse before reality will force a hugh need to health care investment to offer treatment rather than prevention.

*Review provided by **Professor Patrick J Bradley**, MBA FRSC, Head and Neck Oncologic Surgeon, Nottingham University Hospitals, Emeritus Honorary Professor, Faculty of Medicine, University of Nottingham, England*