

## Cause for reflection on prevalence, risk factors, awareness of the patient, other specialists' referral and importance of new screening technologies: retrospective analysis on tongue cancer

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**Objective:** To characterize the outpatient oral medicine referral pattern for tongue lesions with particular emphasis on cancer.

**Methods:** Records of patients referred to the Oral Medicine department for any tongue lesions between 2009 and 2016 were retrospectively analyzed. All cases of tongue cancer were screened for medical history, referral pattern, type of treatment/diagnosis/follow up.

**Results:** Among 266 patients sent for consultation, 39 (14,7%) were diagnosed with cancer. 43,6% were smokers and 10,3% alcohol consumers. 38,5% complained about pain, which was the reason for seeing the doctor; 53,8% was aware of the lesion, whereas 46,2% were referred from another specialist who noticed it. For people aware of the lesion, the mean time waited before asking consultation was 7,9 months. In 53,8% of cases, Narrow-Band-Imaging was used to guide a biopsy. In 29 patients, biopsy was performed the exact day of the visit. Patients were referred from dentists (42,1%), Primary care Physician (10,5%), Emergency Dental Unit (7,9%), Radiotherapist (7,9%), Otolaryngologist (7,9%), Dermatologist (26%), Infectious diseases unit (2,6%). Auto-referral was done in 18,4% of cases. Lesion was defined as "malignant" or "suspicious" by referring doctor in 13,1% of cases, in the remaining cases as white (10,5%), vegetans (5,3%), Lichen-like (5,3%), ulcerative (2,6%), tumor (26,3%), bolla (2,6%). An unweighted Kappa Value of 0.024, assessed low concordance between referral diagnosis and diagnosis performed by the Oral Medicine specialist before the biopsy.

**Discussion and conclusion:** Patients with oral lesions are not always aware of the risk of oral cancer. Accurate information should be provided to patients as well as to other specialists rather than just dentists as regard as the risk factors for Oral Cancer, the importance of referral to specialized departments and timing. The use of new technologies such as NBI should be widespread and used as powerful aid in early detection and conservative treatment.