Exploring the Impact of Public Health Measures in Prevention and Control of Oral Cancer

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Letter to Editor

DEAR EDITOR,

Oral cancer is a significant cause of public health concern in both developing and developed nations. Global estimates reveal that incidence of oral cancer varies from 1 to 10 cases per 100,000 people in most countries.[1] It is ranked as the eleventh most common cancer world-wide, accounting for 130,000 deaths every year.[2] Almost 50% of oral cancer patients present to the health centers in advanced stage of the disease.[2] An inequitable geographical distribution of the oral cancer has been observed due to the regional differences in prevalence of disease-specific risk factors, accessibility and availability of screening/diagnostic measures, socio-economic factors and demographic parameters of the population.[3]

Multiple socio-demographic and habit related risk factors such as male gender;[1] older people;[1] poor education status and socio-economic class;[1,4] smoked/non-smoked forms of tobacco;[1,5] alcohol;[5] human papilloma virus infection;[6] oral sex;[6] and genetic susceptibility;[6] have been attributed in the causation of oral cancer. In the global campaign to minimize the burden of oral cancer, diversified challenges such as low awareness among people;[7] poor knowledge among doctors;[8]

diagnosis in advanced stages;[3] unaffordable treatment modalities;[3] poor utilization of mass-media;[9] inaccessibility to health centers/trained health professionals;[3] and dilemma associated with screening methods;[10] have been encountered. These barriers have restricted the scope of public health benefit to a great extent as sooner the patient realizes the lesion and comes for treatment; better are the chances of survival.[10]

To ensure early detection of oral cancer measures such as mass screening or screening of high-risk group population;[10] reducing the delay from patients' side by creating awareness about signs/symptoms of oral cancer, involvement of community members;[2,9] and reducing the delay from doctors' side by training health professionals to have a high index of suspicion in high-risk groups and routine oral screening during health check-ups;[1,4] should be strategically formulated and implemented.

Large scale studies should be planned for obtaining the epidemiological data regarding the distribution, potential risk-factors and barriers that have limited the utilization of health-care services. Based on the study findings, measures should be directed against the risk-factors and the identified barriers for minimizing the morbidity

and mortality associated with oral cancer.[1,4,7] For designing public health solutions, best results will be obtained when oral health screening services are integrated with other national health programs.[1] Sustained political commitment is an indispensable component in building effective oral health policies; establishing linkage with the technical support agencies/international organizations/non-governmental organizations; for ensuring the mandatory display of pictorial warning and messages on tobacco products; and for the implementation of community-based screening projects for facilitating early detection of oral cancer.[1,3,4] Further, expansion of diagnostic aids and adoption of newer modes of treatment can also be looked upon as the potential solutions to counter the problem of oral cancer.[1,2,4]

To conclude, the need of the hour is to develop evidence-based strategies focusing on primary prevention, health education strategies for the community, early detection through screening methods and initiation of appropriate treatment at the earliest.

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