## The Team Approach **Managing Mouth Cancer** Thursday 13th October 2010



Every Three Hours someone in the U.K. dies as a result of Mouth cancer.

## IT COULD BE YOUR PATIENT

'The optimal management before, during and after treatment of cancer patient's is multidisciplinary. By acquiring a better understanding of potential oral complications and how to mange them, the dental team will be better equipped to meet the dental and daily needs of cancer patients.

You can help to improve the quality of life of these patients.'

Vindo Joshi Oral care for cancer patients Oral Health in Action

Vol.6 no: 3 2004

#### **Tutors**

Mr T Brooke, Mrs Julie Harrington, Mr C. Bell, Mrs Jane Beckinsale, Mrs Donna Graham Dr Paul Wilson Special Guest - Sasha Holden Regional Officer - South/South West, Changing Faces

#### **Course Aims**

To assist the team in identifying the changes of soft tissues and the method of referral.

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Increase the awareness of mouth cancer.

To provide up to date information on the oral health management of patients, preoperatively and during rehabilitation.

#### **Objectives**

#### By the end of the course participants will be able to –

Recognise changes in the soft tissues that need to be referred.

- Understand the procedure for referral
- Understand the patient treatment pathway
- Have gained knowledge of smoking cessation programes available to dental practice
- Understand the role of the speech therapist in mouth cancer
- Understand how the oral aesthetic and functional rehabilitation is restored.
- Understand the role of the Macmillan support team

#### **Mouth Cancer week 2010**

November 14<sup>th</sup> – 20<sup>th</sup> the official date of the annual campaign to raise awareness of Oral Cancer and its prevention for 2010 The tagline is 'If in doubt, get checked out' and the focus will be aimed at those who maintain an at risk lifestyle, encouraging monitoring for early detection and a change in behaviour. It is important for the dental team to possess sound knowledge of the subject. Misinformation and old wives tales abound and can easily be dispelled by producing a good exhibition and/or information sheets. Free information is available from the BDHF tel: 0870 770 4041. The campaign in November is to raise funds to enable a programme to promote the existence of oral cancer and how to avoid it. The tagline 'If in doubt, get checked out' encourages anyone worried about a change in the mouth to seek help and advice. It could also be used to encourage those caring for cancer sufferers to seek help and support if they are confused about the information they have received regarding daily care.

## Mouth Cancer Update 13<sup>th</sup> October 2010

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#### **Programme**

#### 9.15. Registration

#### 9.30. The What, Why and How of Referral

Mr Tony Brooke, BDS MFDSRCS (Eng) MSNDRCS (Ed) Division of Oral Medicine, Bristol Dental Hospital

#### 10.30 Smoking Cessation - Early Intervention Training Session

Julie Harrington BANES PCT Smoking Cessation Adviser (dental)

#### 11.15 Refreshments.

#### 11.40 The Biopsy and Beyond

Mr C Bell, BDS MSc FDS RCS Department of Oral Surgery, Bristol Dental Hospital

#### 1.00 Lunch

#### 2.00. Speech Therapy for people with Mouth Cancer

Jane Beckinsale, Macmillan SLT.

#### 2.45. The role of the Macmillan Support team

Donna Graham MacMillan Support Nurse

#### 3.00. Oral Aesthetic and functional rehabilitation

Dr Paul Wilson BSc BDS MSc FDSRCPS FDS(RestDent)RCPS DipDSed Consultant in restorative dentistry Bristol Dental Hospital

#### **3.45**. Evaluation & close

### The Team Approach Mouth Cancer

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#### Every Three Hours someone in the U.K. dies as a result of Mouth cancer.

We aim to increase your awareness of mouth cancer in order that you can increase your patient's awareness of this disease. Smoking and drinking increases the risk of developing the disease by up to 30 times, a poor diet can also be a contributing factor. Studies show that 80 percent of mouth cancer sufferers are not even aware of the condition until they are diagnosed.

Mouth cancer can strike any one at any time, so it is vital that patients are informed that a non healing ulcer or a white patch in the mouth may need attention before the next check up, and that early detection considerably increases their chances of survival, and allows for simpler treatment options and a better quality of life.

#### The Dental Team

Reception Staff, Trainee Dental Nurse, Qualified Dental Nurse, Dental Hygienist, Dental Therapist, Dental Surgeon & Clinical Dental Technician

Each member of the team has a role to play in treatment management and oral health awareness

**Reception staff** need to be trained in listening skills and know what to pick up on, if Mrs. J. keeps cancelling her appointment for a filling because her mouth is still sore with an ulcer after several applications of ulcer ointment she bought at her local store, it should be suggested that she attends for a review and chat with the dental surgeon, or Mrs. P who is unable to wear her denture because it rubs and has caused an ulcer, and is waiting for the ulcer to heal before making a new appointment, also needs to be seen, this information should be recorded in the patients notes, and mentioned to the dental surgeon.

#### **Dental Nurses**

Again they need to be aware of what is being discussed, often patients will chat away to nurses and mention something that they do not mention to the dental surgeon. Soft tissue structure is covered in the basic training, so it's well worth remembering your anatomy. Often dental nurses have as good a view as the operator, keep alert during the examination and listen out for clues which will bring you back to observe what's going on in the mouth.

#### **Dental Hygienists**

Hygienists are trained to observe the soft tissue structure more then the tooth structure, it still sometimes is the verbal communication that might first alert you to a potential problem, any soft tissue changes should be recorded in the patient notes and the dental surgeon notified, if a nurse is present allow her to observe the changes.

#### Dental Surgeons, Dental Therapists, Clinical Dental Technicians

You are more likely to have a nurse present, work out a code between you that will alert the nurse to observe in the mouth, (four eyes are better than two) while not alarming the patient, observations can then be added to the notes and a possible referral discussed.

# Mouth Cancer Awareness week $14^{th}$ – $20^{th}$ November 2010 IF in Doubt Get Checked Out

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Mouth Cancer Awareness Week will be held  $14^{th} - 20^{th}$  November and use the tagline 'If in doubt, get checked out' to remind the public of the importance of visiting the dentist if they notice any unusual changes in the mouth.

This year's campaign, organised by the British Dental Health Foundation, aims to make members of the public more aware of possible early symptoms such as mouth ulcers that don't heal or white or red patches in the mouth.

If a person notices any unusual changes in their mouth, the Foundation hopes that the campaign will encourage them to visit the dentist as soon as possible.

Dental practices who want to get involved in Mouth Cancer Awareness Week can now pre-order their free Information Guide direct from the Foundation. As well as containing key information on the condition and this year's campaign messages, the guide will also contain advice on organising an event and information on the many resources the Foundation provides to help you get the message across.

For further information of Mouth cancer week go to www.mouthcancer.org

**Mouth Cancer Awareness Week** is supported by Denplan, and backed by Action on Smoking and Health (ASH), British Association of Head and Neck Oncologists, British Dental Association, The British Association of Oral and Maxillofacial Surgeons, Cancer Research UK, Department of Health in all four UK countries, Kings College London, Medical Council on Alcohol, Mouth Cancer Foundation, QUIT, Pharmacy Health Link, Saving Faces, Scope, and World Cancer Research Fund.

#### Head and neck cancer organisations

This section lists organisations and web sites that may be helpful to people with head and neck cancers and also to their friends and relatives. These organisations are concerned particularly with head and neck cancers, or include head and neck cancers in their range of activities and support.

There are too many to list, the ones below you may find helpful.

**Cancer Research UK** is the largest cancer research organisation in the world outside the USA. It funds doctors and scientists in hospitals, medical schools, universities and research institutes across the UK and is also committed to producing high quality information for people affected by cancer.

Cancer Help UK is one of Cancer Research UK's 5 main web sites <a href="https://www.openuptomouthcancer.org">www.openuptomouthcancer.org</a>

This site provides information for patients and health professionals. www.mouthcancer.org

This web site will provide further information on mouth cancer awareness week.

#### www.quit.org.uk

This site provides information on training courses for health professionals to assist patients to quit smoking. It also provides information for employers, and provides a free phone help line

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www.bda-dentistry.org.uk/about/docs/mouth\_cancer.pdf
This site produced by the BDA provides an excellent guide for dental staff
.www.mouthcancerfoundation.org

#### **Mouth Cancer Foundation**

The restorative dentistry oncology Clinics held at St. Luke's Hospital Bradford and at Pinnderfields Hospital, Wakefield where Dr Vindo K Joshi provides oral care and advice before, during and after patient's cancer treatment. In January 2002, he set up the RDOC Mouth Cancer Awareness web site to complement his work at the clinics. Witnessing the web site's phenomenal growth over the first 2 years, especially the message board's ability to act as a robust online support group, convinced him of the need to establish the Mouth Cancer Foundation in June 2004, a not-for-profit organisation with the intention of becoming a registered charity. In May 2005, the Mouth Cancer Foundation became a registered charity No. 1109298.

#### A message from Dr.Vindo Joshi

Sometimes, there is not the time to talk about how things are going and questions can remain unasked. Sometimes, it is also not possible to answer the questions asked. Our health and lives cannot be taken for granted. Misfortune is a part of our humanity. But together, we can summon the strength needed to face misfortune. This strength is also part of our humanity. Thanks to several of you who agreed to share your experiences with others. I hope that those travelling in the gloom of night are heartened by those who have seen the break of day.

My best wishes to you all DR, Vindo K Joshi BDS (Singapore) DRDRCS (Edinburgh)FDSRCS (England) FICOI consultant in Restorative Dentistry Oncology Clinic

#### **General Dental Practice and Mouth Cancer Week**

With the increase in diagnosed cases the provision of relevant information for the daily oral care and management of patients before, during and after treatment should be paramount. Family members, friends, carers and nursing staff will have daily contact with the patient so should be viewed by dental surgery staff as being effective members of the 'dental team'.

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However they are often unclear of the role they can play in supporting the patient. Information and advice on specific oral care practices can be confusing. Many expect to see instant results and improvement, not realising that any prescribed oral care plan can only be effective if addressed methodically and on a daily bases. Any improvement will take time to observe and often it is only possible to maintain the status quo. The latter often leads carers to presume they are not helping and will give up.

It is essential to enable everyone to appreciate that the main objective of providing, or supporting, daily oral care is to prevent and reduce the incidence and severity of oral complications, which will enhance both patient survival and quality of life

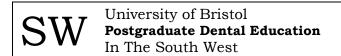
Mouth Cancer is not a subject that lends itself to organising a 'Fun Event' in the way we see with National Smile Month, but it is still possible to come up with some interesting ideas. Just *Handing out information* is a very effective way of getting the message across. Providing written information is the most efficient way. The evidence is that only 20% of information given verbally is remembered, and 10% of that 20% will be remembered incorrectly. Why not offer *Talks & Advice Sessions* by linking in with your local Residential, or Nursing Homes. Your captured audience may well include nursing staff, patients and their family members. It may be possible for those of you looking to increase your patient list to offer a *Free Cancer Screening Consultation*. Doctors' surgeries, Supermarkets and your local pharmacy are just a few areas' to explore a way of *Working in partnership*. By far the easiest way to get a message across is to set up a *Display or Exhibition*. What ever you do advertise it. Make sure you *Approach the Media* and *Send out a press release*. Why not put together your own *website*.

It has not been possible to include all to days presentations in the handout, there is a page for you to write your own notes for each speaker at the back of the pack

What, Why and How of referral Mr Tony Brooke, BDS MFDSRCS (Eng) MSNDRCS (Ed) Division of Oral

## **Smoking Cessation Early Intervention Training Session**

Julie Harrington
BANES PCT Smoking Cessation Adviser (dental)



Mr C Bell, BDS MSc FDS RCS **The Biopsy and Beyond**Department of Oral Surgery, Bristol

Dental Hospital

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# **Speech Therapy for people** with Mouth Cancer

Jane Beckinsale, Macmillan SLT.

## The role of the Macmillan Support team

Donna Graham MacMillan Support Nurse

## Oral Aesthetic and Functional Rehabilitation

Dr Paul Wilson BSc BDS MSc FDSRCPS FDS(RestDent)RCPS



Regional Officer - South/South West, Changing Faces

# ONWARD REFERRAL Oral Medicine:



- Prof S S Prime

## Maxillofacial Surgery:



- Mr P G Guest
- Mr S Thomas
- Mr C Hughes