Head and Neck Survivorship: Larynx/Hypopharynx Cancer

This cancer survivorship algorithm has been specifically developed for MD Anderson using a multidisciplinary approach and taking into consideration circumstances particular to MD Anderson, including the following: MD Anderson’s specific patient population; MD Anderson’s services and structure; and MD Anderson’s clinical information. This algorithm is provided as informational purposes only and is not intended to replace the independent medical or professional judgment of physicians or other health care providers. Moreover, this algorithm should not be used to treat pregnant women.

Patient presents:
- A minimum of 30 months after completion of treatment for larynx/hypopharynx cancer
- Treated at MDACC
- Has one post-treatment head and neck CT
- NED

CONCURRENT COMPONENTS OF VISITS

- Physical exam within 6-12 months of transition to HNSVC to include:
  - Flexible fiberoptic laryngoscopy
  - Chest x-ray
  - CT of head and neck with contrast if less than 4 years from completion of treatment
- Physical exam annually with:
  - Flexible fiberoptic laryngoscopy
  - Chest x-ray
  - CT of head and neck with contrast if less than 4 years from completion of treatment

MONITORING FOR LATE EFFECTS

- Consider:
  - Annual audiogram
  - Xerostomia assessment
  - Dental/osteoradionecrosis assessment
  - T4 and TSH annually if treated with radiation therapy

- Dysphagia assessment
- Speech pathology assessment
- Lymphedema assessment
- Neurocognitive dysfunction assessment

RISK REDUCTION/EARLY DETECTION

- Patient education, counseling and screening:
  - Colorectal cancer screening (See Colorectal Cancer Screening Algorithm)
  - Prostate cancer screening (for men)\(^1\)
  - Breast cancer screening (See Breast Cancer Screening Algorithm) (for women)
  - Gynecologic cancer screening (See Cervical Cancer Screening Algorithm) (for women)
  - Lung cancer screening (See Lung Cancer Screening Algorithm)
  - Diet/weight management
  - Exercise/activity (See Physical Activity Algorithm)
  - Tobacco cessation (See Tobacco Cession Algorithm)
  - Sun exposure/skin cancer screening (See Skin Cancer Screening Algorithm)
  - Limit alcohol

PSYCHOSOCIAL FUNCTIONING

- Assess for:
  - Anxiety/depression
  - Body image
  - Financial stressors
  - Social support

DISPOSITION

New primary or recurrent cancer?
- Yes → Return to primary treating physician
- No → Continue survivorship monitoring

Refer or consult as indicated

\(^1\) Based on American Cancer Society Prostate Cancer Screening Guidelines

NED = no evidence of disease
HNSVC = Head and Neck Survivorship clinic
SUGGESTED READINGS


DEVELOPMENT CREDITS

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