Head and Neck Survivorship: Oropharynx 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 presentation:**
- A minimum of 30 months after completion of treatment for oropharynx cancer and
- Treated at MDACC and
- Has one post-treatment head and neck CT and
- NED1

**Concurrent components of visit:**
- Physical exam within 6-12 months of transition to HNSVC2 with:
  - Chest x-ray
  - CT of head and neck with contrast if less than 4 years from completion of treatment, then
- Physical exam annually with:
  - Chest x-ray
  - CT of head and neck with contrast if less than 4 years from completion of treatment

**Surveillance:**

**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 Cessation 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

*HNSVC = Head and Neck Survivorship clinic
1 Based on American Cancer Society Prostate Cancer Screening Guidelines
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NED = no evidence of disease
Approved by the Executive Committee of the Medical Staff on 01/31/2017
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SUGGESTED READINGS


DEVELOPMENT CREDITS

This practice consensus algorithm is based on majority expert opinion of the Survivorship Head and Neck Faculty at the University of Texas MD Anderson Cancer Center. It was developed using a multidisciplinary approach that included input from the following medical, radiation and surgical oncologists.

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