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

Patient presents:
● 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

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

MONITORING FOR LATE EFFECTS

Patient education, counseling, and screening:
● Colorectal cancer screening (See Colorectal Cancer Screening Algorithm)
● Prostate cancer screening (for men)3
● 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

RISK REDUCTION/EARLY DETECTION

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

PSYCHOSOCIAL FUNCTIONING

DISPOSITION

New primary or recurrent cancer?
Yes
Return to primary treating physician

No
Continue survivorship monitoring

Refer or consult as indicated

NED = no evidence of disease
HNSVC = Head and Neck Survivorship clinic
1 Based on American Cancer Society Prostate Cancer Screening Guidelines
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SUGGESTED READINGS


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.

Katherine Bell, ACNS
Mark Chambers, MD
Eduardo Diaz Jr., MD
Bita Esmaeli, MD
Michelle Cororve Fingeret, Ph.D
Steven Frank MD†
Paul Gidley, MD
Ann Gillenwater, MD
Dan Gombos, MD
Ehab Hanna, MD
Amy Hessel, MD
Theresa Hofstede, MD
Shonice Holdman, BA*
Kate Hutcheson, MD
Michael Kupferman, MD
Stephen Lai, MD
Jan Lewin, MD
Carol Lewis, MD
Paula Lewis-Patterson, DNP, RN, NEA-BC
Guojun Li, MD
Clemente Logronio Jr., BSN, RN-BC*
Charles Lu MD‡
Jeffrey Myers, MD
Kristen Pytynia, MD, MPH
Charles Schreiner, ACNP
Erich Sturgis MD†
Randal Weber, MD
Mark Zafereo, MD‡

† Core Development Team Lead
* Clinical Effectiveness Development Team