


Chapter 14


Palliative Care in Oropharyngeal Cancer

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ABSTRACT

Palliative care is an approach that aims to improve the quality of life for patients with serious, incurable illnesses by focusing on symptom relief. Oropharyngeal cancer is often diagnosed at advanced stages and presents a range of physical and psychological symptoms. This chapter aims to synthesize information regarding oropharyngeal cancer and its approach through palliative care, emphasizing the importance of an interdisciplinary perspective to improve quality of life by alleviating symptoms such as pain, difficulty swallowing, and breathing problems. Adequate nutritional support is crucial, given the significant impact of the disease on the patient's food intake and nutrition. Furthermore, the need for public policies that ensure equitable access to palliative care and its integration into the healthcare system should be emphasized. It is, therefore, evident the importance of investing in the education and training of professionals in this type of care for global public health.

INTRODUCTION

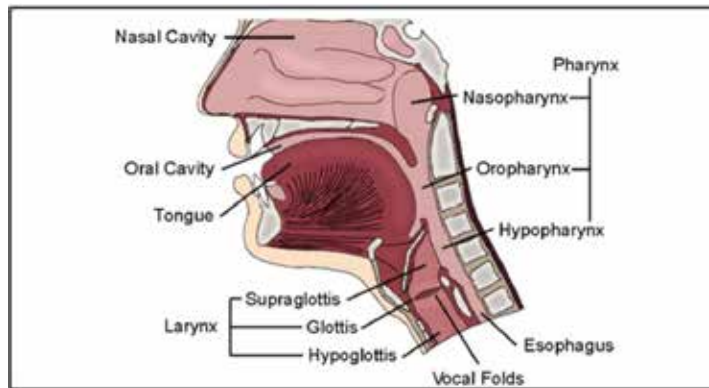
Oropharyngeal cancer (OPC) is one of the types of head and neck cancer, which is classified by the anatomical area where it arises: oral cavity, pharynx, oropharynx, hypopharynx, larynx, and salivary glands. The oropharynx encompasses the intermediate part, including the soft palate, uvula, base of the tongue, tonsils, tonsillar pillars, and oropharyngeal wall, playing roles in both respiratory and digestive functions (Góis Filho 2022a); Figure 1.

The types of cancer that can affect the oropharynx are related to the types of local tissues. Thus, since the region is composed of epithelial, lymphatic, and glandular tissue, the cancers that may arise in the region are carcinomas, lymphomas, and adenocarcinomas, respectively. The most common histological

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type of cancer in the oropharynx is squamous cell carcinoma (SCC), also known as squamous cell carcinoma (SCC) or epidermoid carcinoma (EC) (Tommasi 2021).

Figure 1. Sagittal Section of the Upper Aerodigestive Tract and Anatomical Sites Affected by Head and Neck Cancer



Source and Credits: Liebertz et al. (2010).

The blood supply to this region is provided by the external carotid artery, while venous drainage is carried out by the internal jugular and subclavian veins, which drain into the brachiocephalic veins. The lymphatic tissue responsible for this region includes lymph nodes known as the palatine and lingual tonsils (Lima, Vasconcelos, and Andrade 2023). The lymphatic drainage of this region is carried out by the jugulodigastric or retropharyngeal lymph nodes (Neville et al., 2021). Malignant tumors spread through the lymphatic pathways. Metastatic nodes present with increased volume, are hardened and become fixed in advanced stages (Lima, Vasconcelos, and Andrade 2023).

The age-adjusted incidence of OPC is 1,4 per 100.000 inhabitants (2,3 for men and 0,5 for women), with countries having a high Human Development Index showing the highest proportional incidence between men and women (Góis Filho 2022b). Globally, in 2020, approximately 530.000 new cases (2%) of oral cavity cancer were estimated. Among men, there were 373.000 new cases, corresponding to 8,46 cases per 100.000. Among women, 157.000 new cases were estimated, equivalent to an estimated risk of 3,2 per 100.000 women. The highest incidence rates among men are observed in Melanesia, Southeast Asia, and Western Europe; among women, in Melanesia and Southeast Asia (INCA 2023). An analysis of cancer incidence data between 1993 and 2012 from 42 countries using the *Cancer Incidence in Five Continents* database volumes V to XI observed an increase ($p < 0.05$) in 19 and 23 countries for men and women, respectively (Zumsteg et al. 2023). In recent decades, there has been an increase in the number of OPC cases associated with HPV infection. Worldwide, it is estimated that 30% of oropharyngeal squamous cell carcinomas, which mainly involve the tonsils and the base of the tongue, are driven by HPV, with HPV16 being the most common subtype associated with malignancy (Ndon et al. 2023). The characteristic epidemiological profile is of white men of varying ages, with higher socioeconomic status and risky oral sexual behavior (Lima, Vasconcelos, and Andrade 2023).

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