

Head & Neck Cancer : Experience of least developed country Nepal.

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Introduction:

Cancer is becoming a common health problem in the developed country. Nowadays it is increasing in developing and least developed nation like Nepal. Head and neck cancer is seen in population with tobacco users other than smoking. In Nepal tertiary cancer centre Head and neck is 3rd commonest among malignancies.

Methodology:

Retrospective study from 2005- 2010 to study demographic trends treatment and outcome in patients visiting B.P. Koirala Memorial Cancer Hospital Bharatpur case records were reviewed.

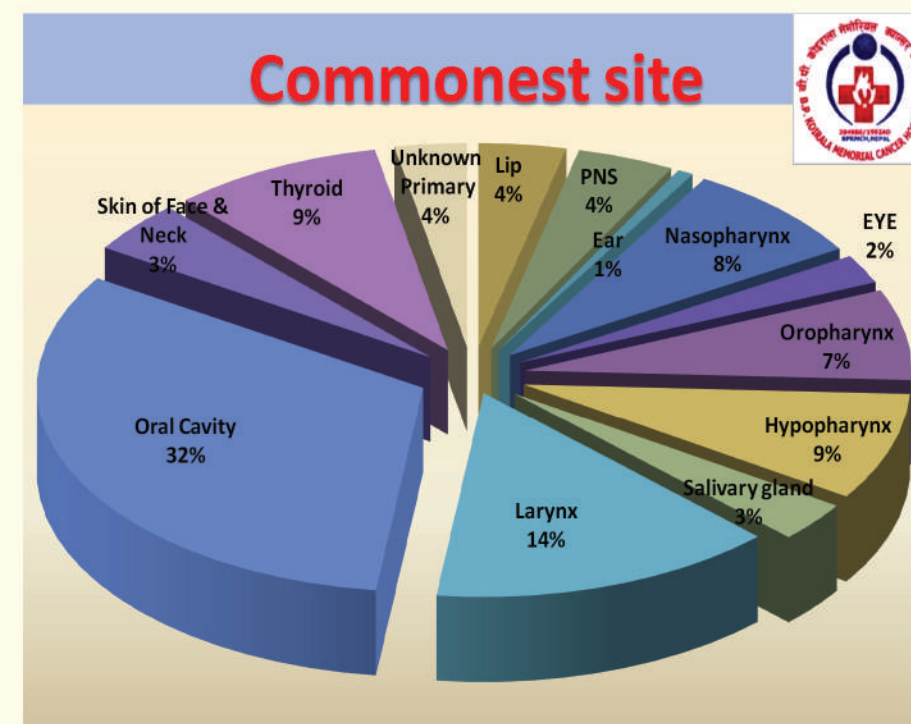
Results:

Incidence:

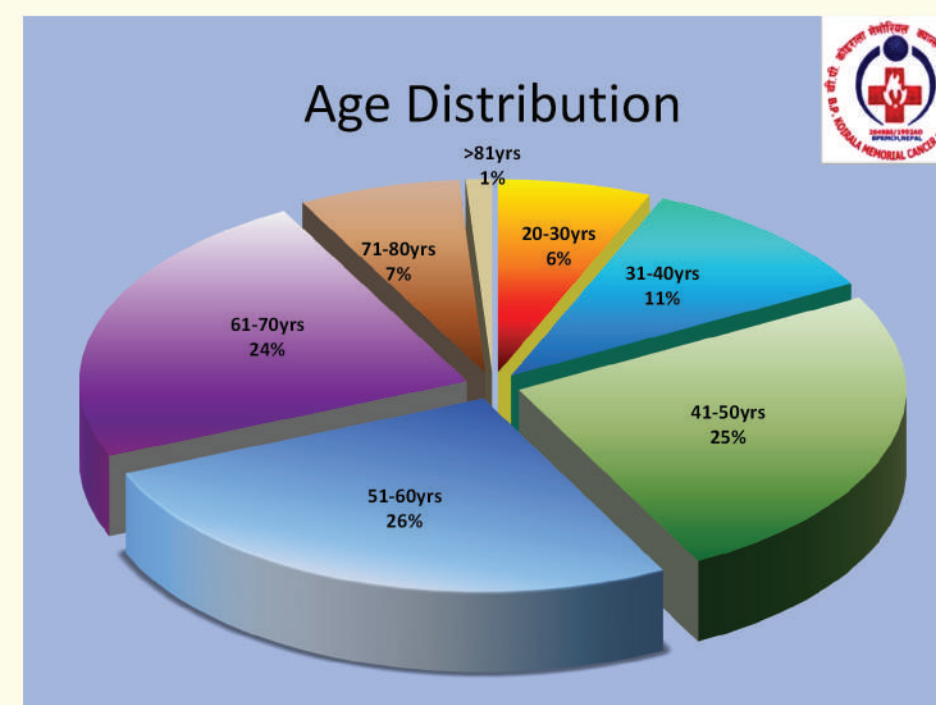
Year	ENT Cases	Total Cancer	No of registration
2000	153	994	
2001	152	1362	26439
2002	181	1682	23499
2003	181	1885	21156
2004	241	1871	20760
2005	419	3049	20637
2006	514	2861	19750
2007	526	3317	20691
2008	385	3386	21698
2009	597	3692	22041
2010	671	4160	23696

(Table to show Head Neck Cancer & total Cancer diagnosed at B.P.K.M.C.H.)

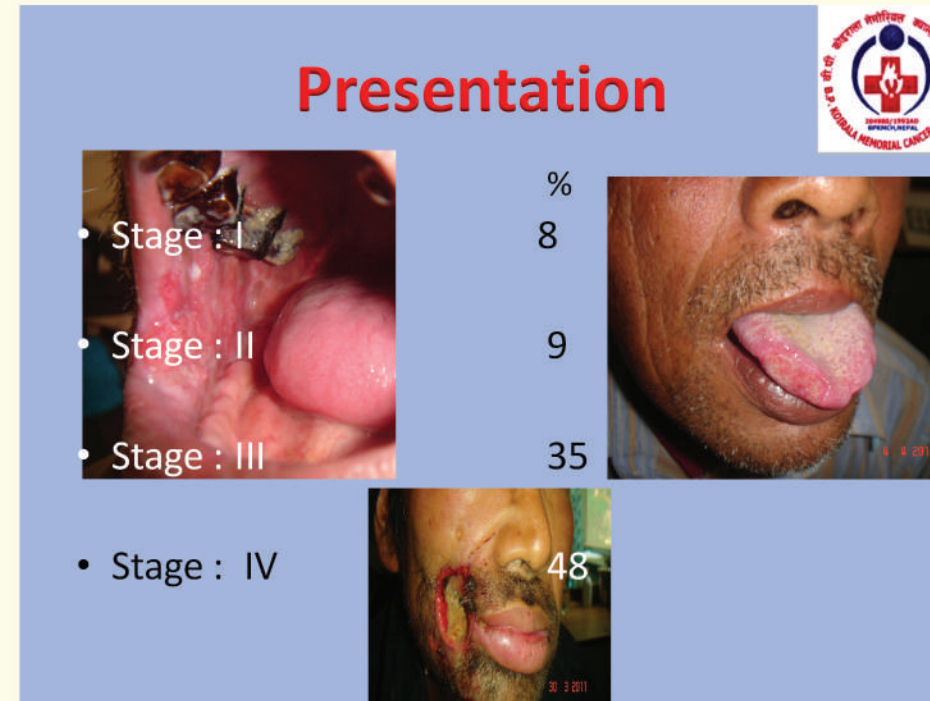
Site:



Age:



Stage:



Treatment:

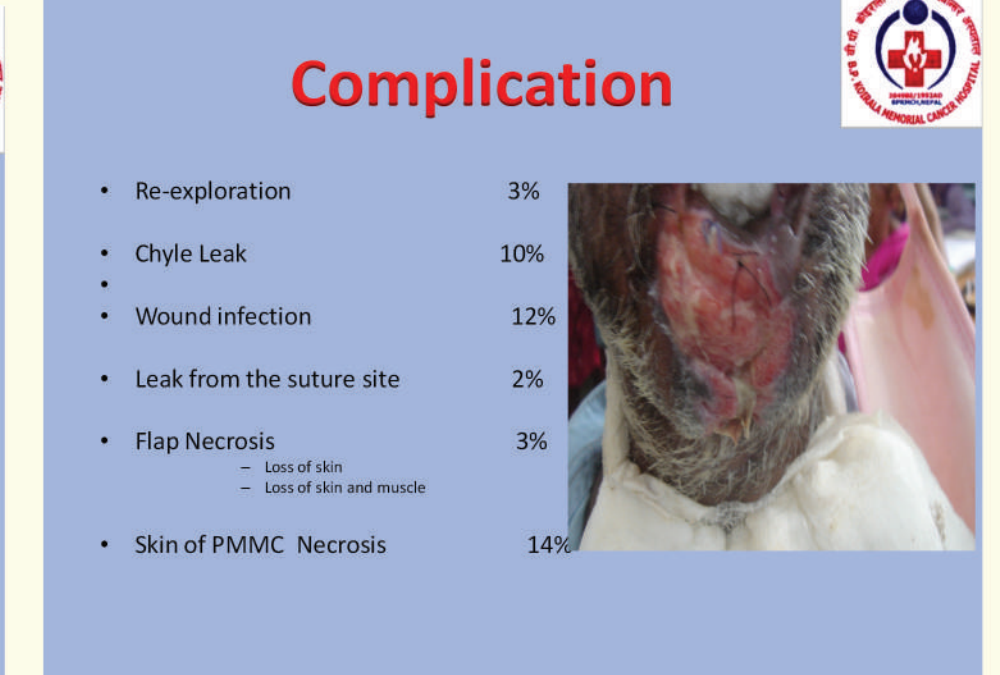
- 1) surgery alone 10%
- 2) Surgery + radiotherapy: 21%
- 3) Surgery + Chemoradiation: 52%
- 4) curative radiation :6%
- 5) palliative treatment: 9%

Surgical Treatment:

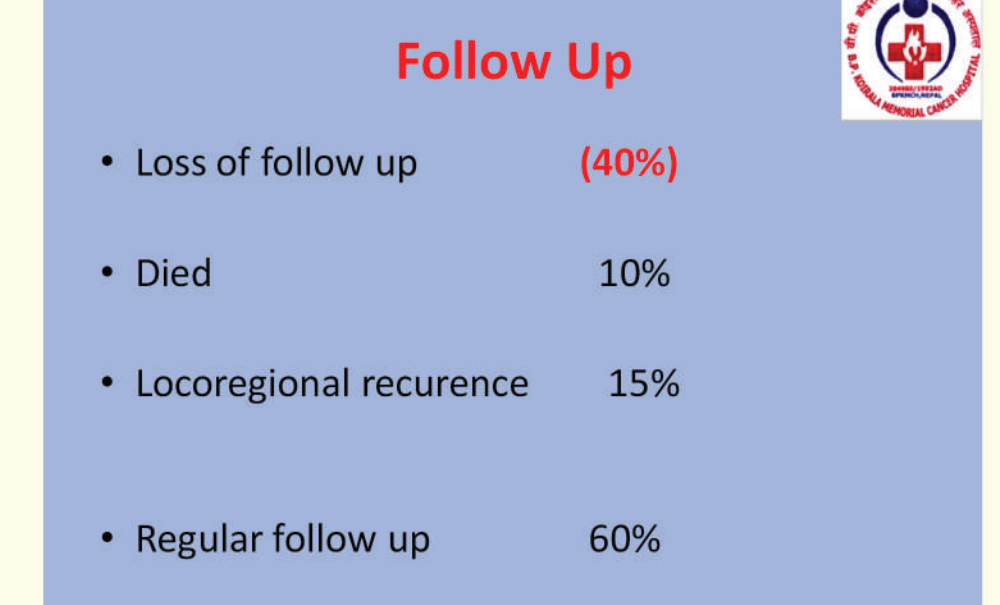
Commonly performed surgery

S.N	Types of surgery	05	06	07	08	09	10
1	Micro laryngeal surgery	19	22	15	28	35	137
2.	FESS	13	11	12	35	55	68
3.	Total Thyroidectomy + neck dissection	8	9	7	15	7	36
4	Hemi Thyroidectomy + neck dissection	-	9	12	6	1	2
5	maxillectomy	3	2	3	13	7	24
6	Superficial parotidectomy	5	-	-	-	-	-
7	Total parotidectomy	2	8	5	12	20	21
8	Total laryngectomy + neck dissection	1	13	5	7	6	27
9	Segmental mandibulectomy+ neck dissection	2	-	3	8	9	12
10	glossectomy+ neck dissection	2	5	7	5	16	17
11	WLE Buccal Mucosa + PM Flap	1	8	20	43	36	63
12	WLE Buccal Mucosa + Primary Closure	-	9	17	14	11	19
13	Misc.	3	61	96	106	216	201
Total		59	157	202	296	419	626

Surgical Complications:



Followup:



Limitations:

- No facility for free flap.
- No facility for laser and robotic surgery.

Conclusions:

- Head and neck cancer is increasing in Nepal in all age group.
- Tobacco especially chewing is common practice.
- Oral cavity is commonest site in Head and Neck. Advanced stage at presentation is common.
- Poor socioeconomic status and lack of education is major factor for late presentation.
- Complication rate are satisfactory. However, follow-up is not adequate.
- Modern facilities of organ preservation and reconstruction like laser, robotic surgery and free flap reconstruction are still not available due to cost and expertise.

