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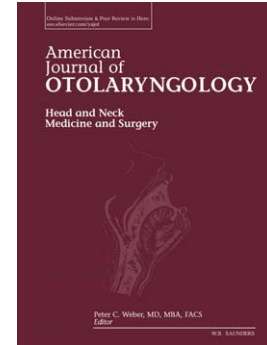
Impact of treatment modality on quality of life of head and neck cancer patients: Findings from an academic medical institution

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Impact of treatment modality on quality of life of head and neck cancer patients: Findings from an academic medical institution

Introduction

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There are approximately 436,000 head and neck cancer survivors in the United States currently [1], with 5-year survival rates reported at 63.2% for oral cavity and pharynx and 60.6% for larynx [2]. Virtually all head and neck cancer (HNC) patients present with one or more oral or dental complications [3], which can be mild and include discomfort and pain, or more serious, with morbidities such as dysphagia, mucositis, xerostomia or osteoradionecrosis [4-6]. Further, these complications impact quality of life (QOL) long after treatment [5]. Increasing survival rates among HNC patients emphasize the importance of long-term management of these issues in order to optimize health and well-being [5].

Selection of treatment modality and survival among those with HNC are both related to clinical stage at presentation [7]. When patients present with localized tumors (stage I or II), surgery or radiation therapy is usually the treatment of choice, and such single modality treatment usually has a better prognosis and lesser functional and QOL impact [7]. Unfortunately, a majority of patients tend to present with later stages (III and IV) [7, 8], often requiring a combination of surgery, radiation therapy, and/or chemotherapy [7]. These treatment modalities have a profound effect on QOL; surgical and non-surgical modalities (radiation therapy and chemotherapy) have shown similar survival benefits,

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