



# Oral Cancer Screening in India: Three Good Reasons

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## Short Communication

In India, oral cancers are becoming a public health problem. According to the Indian Council of Medical Research, around 70% to 80% of patients with oral cancer patients in the country present at a stage where surgical resection is difficult to achieve. Surgery is the main modality of treatment for Oral Cancer (OC). Non-surgical modality like radiation alone and chemo-radiation rarely achieves a lasting or definitive cure. Advance stage at presentation of OC patients is mainly because of delayed reporting by these patients to cancer treatment centers. A single centric study from India has shown that, major reason for delay in seeking treatment for OC is due to patient delay [1]. Patient delay is the period from the onset of symptoms due to the disease to seeking first medical attention or advice.

Oral cancers can be managed effectively by minimal surgery at early stages with lesser morbidity to the patient. However, advanced OC would require major reconstructive surgeries followed by radiotherapy. Additionally, major surgical procedures for the treatment of OC add to the morbidity and contribute in facial disfigurement of patients. Because of loss of function and esthetic damage that usually accompanies major surgery for OC, patients suffer from depression and anxiety [2]. Furthermore, as a result of major reconstructive surgeries for advanced OC, patients have to bear an additional financial burden. The cost of treatment for OC in a government run institute in India increases with the stage at diagnosis, and has been seen to increase from stage I to stage III disease [3]. Thus, minimal surgical interventions like plain wide excision in early OC for Stage I and II diseases without reconstructive procedures will reduce the catastrophic expenditure due to major surgical procedures (reconstructive surgery) and associated medical costs, which is a cause of worry particularly in a middle income country like India [4]. In India, it is worthwhile to note that, most patients with oral cancers are from a socio-economically poor background.

It has been established that screening for oral cancers can reduce mortality in high risk populations in the country [5]. Oral cancer is likely to become a cause of concern for health planners in the absence of effective primary prevention measures, as evidenced by its rising incidences. And, with the prevalent oral habits of betel quid chewing, use of chewable tobacco, smoking, and alcohol consumption in the Indian population, the present burden of OC patients will worsen. Control of oral cancer morbidity and mortality will thus become the prime need in this part of the world in not too distant future. Early diagnosis of oral cancers by screening will improve outcomes following treatment, it will help to lower the economic burden of higher treatment costs for advance stage diseases, and lastly, it will better the quality of life of patients treated for oral cancers.

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