

Head & Neck Cancer Reference Handout

Head & Neck Anatomy

Sites:

Nasopharyngeal

nasal cavity, paranasal sinuses

Oral

lips, oral cavity, hard palate, anterior tongue, mouth floor

Salivary Gland

parotid, sublingual, submandibular

Oropharyngeal

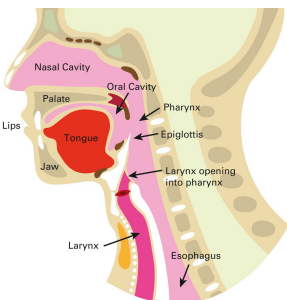
posterior tongue, tonsils, soft palate, posterior pharyngeal wall

Laryngeal

supraglottis, glottis, subglottis

Hypopharyngeal

pyriform sinus, pharyngeal walls, postcricoid



Staging:

T Size

T1 = < 2 cm

T2 = 2-4 cm

T3 = > 4 cm

T4 = local invasion

N Stage

N1 = LN < 6 cm

N2 = contralateral

N3 = LN > 6 cm

Nasopharyngeal Treatment

Stage I (T1N0)

Surgery or Radiation Therapy

Stage II-III (T1N+, T2-T4Nx)

ChemoRT +/- Chemo

Cisplatin/RT → Cisplatin/5FU

Stage IV (metastatic, recurrent)

Chemo

Cisplatin/Gemcitabine

Oral & Salivary Gland Treatment

Very Early Stage (T1-T2N0)

Surgery +/- SLNB or Neck Dissection

Early Stage (T1-T2, N1)

Surgery + Neck Dissection

Locally Advanced (T3-T4, N2-N3)

Surgery + Neck Dissection
+ Adjuvant RT or ChemoRT

+ PNI, + LVI,

+ Margins, + ECE

Oropharyngeal Treatment

Early Stage OP

T1-T2, N0-N1 (single LN < 3 cm)

Surgery or RT monotherapy

Surgery + Adjuvant RT if: R1, ECE, LVI, PNI

Locally Advanced OP

T3-T4 Nx, Tx N2-N3

ChemoRT

Cisplatin (Q3 week or weekly) + RT

Alternatives: carboplatin/5FU or cetuximab

Important Side Effects:

cisplatin → nephropathy, neuropathy, ototoxicity

Local Recurrence: Surgery (check PET >12 weeks)

Metastatic HNSCC

Front-Line Systemic Therapy

Chemotherapy

NP: Cisplatin + Gemcitabine

OP: Cisplatin + 5FU + Pembrolizumab

Immunotherapy

Pembrolizumab (PDL1 > 1%)

Nivolumab

Hypopharyngeal & Laryngeal Treatment

Very Early Stage Laryngeal & Hypopharyngeal

T1N0

Surgery

Advanced Stage Laryngeal & Hypopharyngeal

T1N+, T2-T3Nx, T4N0

1. Induction Chemo → RT (CR) or ChemoRT (PR)

TPF (Docetaxel/Cisplatin/5FU)

2. Surgery + Neck Dissection → RT (CR) or ChemoRT (PR)

3. ChemoRT

Cisplatin/RT

Second-Line Systemic Therapy

Immunotherapy (any PDL1)