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HOSPITAL



HEALTHY
MEDICAL TESTING
SERVICES

Living with
**Head and Neck
Cancers**

Your first step in your
triumph over head
and neck cancer

SUNWAY
MEDICAL CENTRE



This booklet has been written to contain information to help patients and their caregivers, have better understanding of head and neck cancer. This booklet also contains stories from survivors who have shared their experience with cancer.

The endeavour to produce this booklet would not have been possible without the guidance and support of Clinical Oncologist, Dr John Low. Appreciation is also extended to the patients that shared their stories for the development of this booklet.

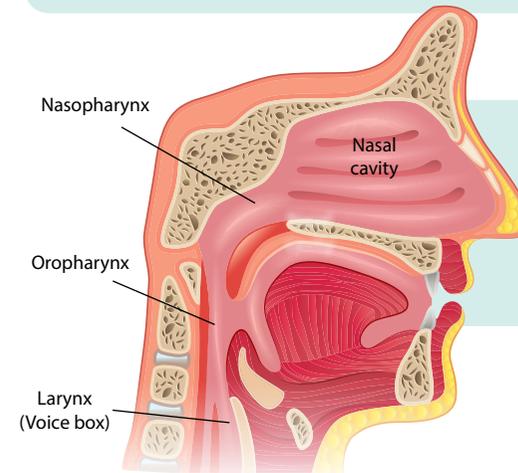
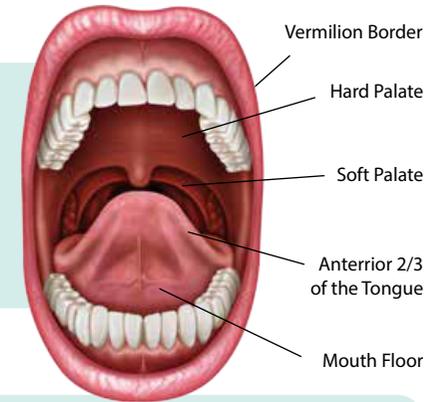
This booklet is not intended or designed to diagnose, prevent, treat or provide a cure for any condition or disease, to ascertain the state of your health, or to be substituted for professional medical care, and you understand and agree that the contents of this book are intended purely for informational and educational purposes only. You are encouraged to seek the advice of your physician or healthcare professional if you have any questions or concerns about your health.

When someone mentions cancer, head and neck cancers rarely come to mind. Despite that, head and neck cancers are very common in Malaysia. This type of cancer generally forms in the squamous cells (cells that line the moist mucosal areas in the head and neck). There are a few types of head and neck cancer and here are a few of them:

Mouth/oral cancer

The cancer can form at any of these places:

- Lips
- The tongue
- Roof of your mouth (palate)
- The floor of your mouth (under your tongue)
- Your gums and the lining of your mouth



Pharyngeal (throat) cancers

There are different areas in the throat that can develop cancers:

- Nasopharynx
- Oropharynx
- Larynx (voice box)

Other head and neck cancers can still occur. These include:

- Sinuses
- Salivary glands
- Eye cancer (very rare)



1. Health Technology Assessment Section (MaHTAS), Medical Development Division, Ministry of Health (MOH) Malaysia. Health Technology Assessment Report: Nasopharyngeal Carcinoma Screening. 2011. 2. National Cancer Institute (NCI). Head and Neck Cancers. NCI website. Date accessed: 26 August 2015. Available at: <http://www.cancer.gov/types/head-and-neck/head-neck-fact-sheet> 3. Macmillan Cancer Support. Head and neck cancers. Macmillan website. Date accessed: 28 September 2015 Available at: <http://www.macmillan.org.uk/Cancerinformation/Cancertypes/Headneck/Aboutheadneckcancers/Headneckcancers.aspx> 4. Macmillan Cancer Support. Symptoms – head and neck cancer. Macmillan website. Date accessed: 29 September 2015. Available at: <http://www.macmillan.org.uk/Cancerinformation/Cancertypes/Headneck/Symptomsdiagnosis/Symptomsheadneck.aspx> 5. Macmillan Cancer Support. How head and neck cancers are diagnosed. Macmillan website. Date accessed: 29 September 2015. Available at: <http://www.macmillan.org.uk/Cancerinformation/Cancertypes/Headneck/Symptomsdiagnosis/Diagnosis.aspx> 6. Cancer.net. Head and Neck Cancer. Cancer.net website. Date accessed: 29 September 2015. Available at: <http://www.cancer.net/cancer-types/head-and-neck/view-all> 7. American Cancer Society (ACS). Oral Cavity and Oropharyngeal Cancer. ACS website. Date accessed: 29 September 2015. Available at: <http://www.cancer.org/acs/groups/cid/documents/webcontent/003128-pdf.pdf> 8. Stevenson MM, et al. Head and Neck Cancer Treatment Protocols: Treatment Protocols. Medscape website. Date accessed: 2 October 2015. Available at: <http://emedicine.medscape.com/article/2006216-overview> 9. Macmillan Cancer Support. Targeted therapies for head and neck cancer. Macmillan website. Date accessed: 8 October 2015. Available at: <http://www.macmillan.org.uk/Cancerinformation/Cancertypes/-Headneck/Treatingheadneckcancers/Biologicaltherapies.aspx> 10. Macmillan Cancer Support. Living with head and neck cancer: Coping with physical changes after treatment for head and neck cancers. Macmillan website. Date accessed: 8 October 2015. Available at: <http://www.macmillan.org.uk/Cancerinformation/Cancertypes/-Headneck/Livingwithheadneckcancer/Howyouwilllook.aspx> 11. Macmillan Cancer Support. Living with head and neck cancer: Changes to eating after treatment for head and neck cancer. Macmillan website. Date accessed: 8 October 2015. Available at: <http://www.macmillan.org.uk/Cancerinformation/Cancertypes/-Headneck/Livingwithheadneckcancer/Changestoeating.aspx> 12. Cancer Treatment Centres of America (CTCA). It takes a team: Addressing head and neck cancer symptoms. CTCA website. Date accessed: 13 October 2015. Available at: <http://www.cancercenter.com/community/newsletter/article/it-takes-a-team-addressing-head-and-neck-cancer-symptoms/> 13. Vanderbilt-Ingram Cancer Centre. Hearing Loss. Vanderbilt-Ingram Medical Centre website. Date accessed: 14 October 2015. Available at: <http://www.mc.vanderbilt.edu/documents/cancersurvivor/files/Hearing.pdf> 14. National Cancer Institute (NCI). Facing Forward: Life After Cancer Treatment. NCI website. Date accessed: 15 October 2015. Available at: <http://www.cancer.gov/publications/patient-education/life-after-treatment.pdf> 15. Cancer.Net. Nervous System Side Effects. Cancer.Net website. Date accessed: 15 October 2015. Available at: <http://www.cancer.net/navigating-cancer-care/side-effects/nervous-system-side-effects> 16. Pagán CN. Before You Begin Cancer Treatment. WebMD® website. Date accessed: 16 October 2015. Available at: <http://www.webmd.com/cancer/facing-chemotherapy-15/getting-ready/before-you-begin-cancer-treatment> 17. FamilyDoctor.org. Cancer: Preparing for Cancer Treatment. FamilyDoctor.org website. Date accessed: 16 October 2015. Available at: <http://familydoctor.org/familydoctor/en/diseases-conditions/-cancer/treatment/preparing-for-cancertreatment.html> 18. National Cancer Institute (NCI). Feelings and Cancer. NCI website. Date accessed: 16 October 2015. Available at: <http://www.cancer.gov/about-cancer/coping/feelings> 19. National Cancer Institute (NCI). Coping with cancer: Self Image and Sexuality. NCI website. Date accessed: 16 October 2015. Available at: <http://www.cancer.gov/about-cancer/coping/self-image> 20. National Cancer Institute (NCI). PDQ® Family Caregivers in Cancer. Bethesda, MD: NCI. Date accessed: 20 October 2015. Available at: <http://www.cancer.gov/about-cancer/coping/family-friends/family-caregivers-pdq#section/all> 21. National Cancer Institute (NCI). Support for Caregivers: When Someone You Love Is Being Treated for Cancer. NIH Publication. No. 14-5726. Revised May 2014.

There are several support organisations and groups that you can contact to get more information and resources.

Malaysian Oncological Society (MOS)

The MOS is composed of healthcare specialists who treat cancer patients. Their website contains practical information and advice.

Unit 13-01, Amcorp Service Suites
Menara Melawangi,
Pusat Perdagangan Amcorp
18, Jalan Persiaran Barat,
46050 Petaling Jaya
Tel: 03 7960 0177
Email : info@malaysiaoncology.org
www.malaysiaoncology.org

National Cancer Society of Malaysia (NCSM)

The NCSM aims to help Malaysians understand cancer better. They also help with providing care and support to those affected by cancer. The NCSM also runs wellness classes for cancer patients and survivors.

Bangunan Persatuan Kebangsaan Kanser Malaysia,
66, Jalan Raja Muda Abdul Aziz,
50300 Kuala Lumpur.
Tel | Fax: 03 2698 7300 | 03 2698 4300
Email: contact@cancer.org.my
www.cancer.org.my

Hospis Malaysia

Hospis Malaysia offers professional palliative care to patients who suffer from life-limiting illnesses in the Klang Valley.

This facility has a Day Care Centre, Resource Centre, provide counselling and training workshops regularly.

2, Jalan 4/96, off Jalan Sekuci,
Taman Sri Bahtera, Jalan Cheras,
56100 Kuala Lumpur.
Tel | Fax: 03 9133 3936 | 03 9133 3941
Email: info@hospismalaysia.org
www.hospismalaysia.org

Cancerlink Foundation

The Cancerlink Foundation provides support through programs and services nationwide. The services are available to patients with cancer, their families and friends.

No. 13, Jalan Utara,
46200 Petaling Jaya
Tel: 03 7956 9499/ 03 7957 9310
www.cancerlinkfoundation.org

Sometimes, the signs that there are troubles brewing ahead are not very obvious. It could be something small like a lump or ulcer in the mouth that does not heal or go away. Most of the signs can also be caused by other things and can be misleading. Here are some other signs that may occur:

In the mouth:

- White/ red patched on the gums, tongue, or mouth lining
- Swelling in the jaw area
- Strange bleeding in the mouth
- Loose tooth/ teeth



Salivary glands:

- Swelling under the chin/ around the jawbone
- Numbness/ paralysis of the face muscles
- Persistent pain in the face, the chin or the neck

Mr Ng's Story (Lawyer, 40s)

Everything started with a visit to the dentist. I was having my regular check-up when my dentist mentioned an ulcer on my tongue. I had not given it much thought until she brought it up. Upon her mentioning it, I told her that it had been there for a few weeks but had not healed. When I mentioned it, she advised me to have it checked out. A biopsy on the ulcer found that it was cancerous.

Throat area:

- Trouble breathing/ speaking
- Pain when swallowing
- Persistent pain in the neck/ throat
- Frequent headaches
- Pain/ ringing in the ears or hearing loss

Mr Yan's Story (Consultant Business Executive, 60s)

While on my regular check-up with my doctor, I mentioned that I had been having some ear irritation. Upon closer examination, my doctor found that there was a lump in my middle ear. When the lump was examined, the results indicated that it was a benign tumour. Putting it out of mind, I went on with my daily routine. However, after a few months, I visited an Ear, Nose and Throat (ENT) specialist for a follow-up. The ENT specialist discovered that the tumour had grown malignant and had spread to my jaw and ear area.

In the nasal cavity:

- Blocked sinuses that don't clear
- Chronic sinus infections that do not respond to antibiotics
- Nose bleeds
- Frequent headaches
- Swelling in the eyes or other eye-related issues
- Pain in the upper jaw

Mr Yong's Story (Photographer, 40s)

Being a busy and active person, I did not think that my neck aches were anything to worry about. However, it was a persistent neck ache and I was also experiencing some nose bleeds. It was when I discovered that my hearing has been reduced to about 50% that I decided to check with my doctor on the issues. I visited an ENT specialist who discovered that I had cancer in my nasal cavity.



A caregiver will play different roles at the different stages of cancer that the patient goes through.

At diagnosis

Your role will begin at this stage. At diagnosis, you will be learning about the disease along with your loved one. You may also be involved in the decision-making process when your loved one is trying to determine which treatment to take.

When treatment is going on

The patient may ask you to come along when discussing with the healthcare professions on important decisions. In addition to this, your roles will begin to expand to caring for household duties, providing transportation, sorting out other healthcare issues and home care. This stage of caring may be the most exhausting, physically and emotionally.

Caring at home

When caring for the patient while at home, you will find that your responsibilities may include:

- Providing companionship to the patient
- Handling household duties
- Managing medication and meals
- Scheduling medical appointments
- Deal with medical emergencies

When treatment ends

While we would assume that life would go back to the way it was before the cancer, this may not be the case. You may need time to adjust to the changes and the stress that may come with worrying cancer recurrence.

At the end of life

Sometimes, despite our best efforts, the cancer won't go away or recur. When a patient is nearing their end of life, you may find that you will need to provide even more physical and emotional support. There are hospitals or hospice programs that can provide end-of-life support services. This will help improve the quality of life for both your loved one and you.

Being a caregiver means that you are helping a family or friend go through their cancer treatment.

Some of the tasks that you may need to help with include:

- Providing mental and emotional support and encouragement
- Give medications
- Help manage symptoms and side effects
- Coordinate medical appointments
- Providing transportation to and from medical appointments
- Assisting in meals
- Helping with household chores

Challenges you may face

While you are providing the care and support to your patient, you may experience some challenges. These may include:

- Physical and emotional stress
- Less personal or maybe family time
- The need to balance your care giving tasks and job/daily life
- Financial stress
- Lack of privacy
- Feelings of isolation or loneliness

Due to this, it is important that you learn to take time to recharge your mind, body and spirit. Try to remember to take some time out of your busy schedule each day to indulge in yourself.

- Do things that you like to do – even a little while will help you
- Remember to indulge in personal activities and not to cut them out completely
- Get help from someone every once in a while to give you a short break

If you feel like you might have cancer, you need to see a doctor as soon as possible. Your doctor will most likely refer you to a specialist to determine what the cause of your symptoms is.

Your specialist will check for your symptoms, any health conditions and/or recent illnesses. Some of the tests that will be done include:

- **Physical examination, blood/urine tests.**
- **Nasoendoscopy** – Inserting a scope (small tube) up the nose to examine the back of the throat and mouth. The doctor will give you a local anaesthetic to numb the back of your throat.
- **Ultrasound** – Imaging technology that will be able to show the doctor if all your lymph nodes are in good condition.
- **Biopsy** – Taking a sample of tissue from the tumour/lump to test properly. In some cases, when the doctor takes a biopsy, you may need to be placed under general anaesthesia.
- **Computed tomography (CT) scan** – This type of scan takes a 3D picture of the inside of your body using a special X-ray machine. This machine will combine the many images that it takes to create a detailed, cross-sectional picture which can highlight any odd growths or tumours. A special dye will be either injected or given as a liquid for you to swallow. This dye will help give a clearer image.
- **Magnetic resonance imaging (MRI)** – Like the CT scan, this machine takes detailed images of the insides of your body. However, instead of X-rays, this machine uses magnetic fields to get the image. A special dye will be either injected or given as a liquid for you to swallow. This dye will help give a clearer image.
- **Positron emission tomography (PET) scan** – This type of scan takes pictures of the organs and tissues in your body. A special radioactive sugar substance is injected into your body and the cells in your body take up this substance. As cancer cells tend to use more energy, it will take up more of the radioactive substance. A scanner then picks up the signals this substance emits to create an image of the inside of your body.

Your fight with cancer will begin with the determination of its stage. Staging is how a doctor determines where the cancer is located and whether it has spread or is affecting other parts of the body. Staging will help the doctor know which treatment is the best course of action.

Generally, your doctor will grade your tumour based on the **TNM** staging system.

- **T** describes the size of the main (primary) tumour and, if has spread, which tissues it has gone to.
- **N** indicates the degree which the tumour has spread to the surrounding lymph nodes.
- **M** indicates whether the cancer has *metastasised* (spread) to other organs in the body.

Numbers or letters are assigned to the T, N, and M. This provides the following information:

- Severity of the situation is described from 0 to 4.
- If the condition cannot be assessed due to limited information, it is assigned the letter 'X'.

While battling cancer, you may experience changes in your daily life. Your position in your household may change and you may experience some changes to your self-esteem.

Communication

One of the most important things is communicating to your partner about how you feel. Let your partner know when you would like to be intimate or affectionate. Your partner may be afraid to approach you for fear that you may get hurt or feel unwell.

Mr Yan's Story

While we may feel that we are going through a tough time with our cancer, we mustn't forget that the ones who love us are also going through it with us. We need to support each other.

Rekindling a fire

Your cancer treatment may have caused changes to your body and you may feel self-conscious about these changes. Here are some things that may help you:

- Be proud of the changes your body has undergone. It is proof that you have gotten through treatment
- Do things that make you feel more attractive and confident
- Be open to change.

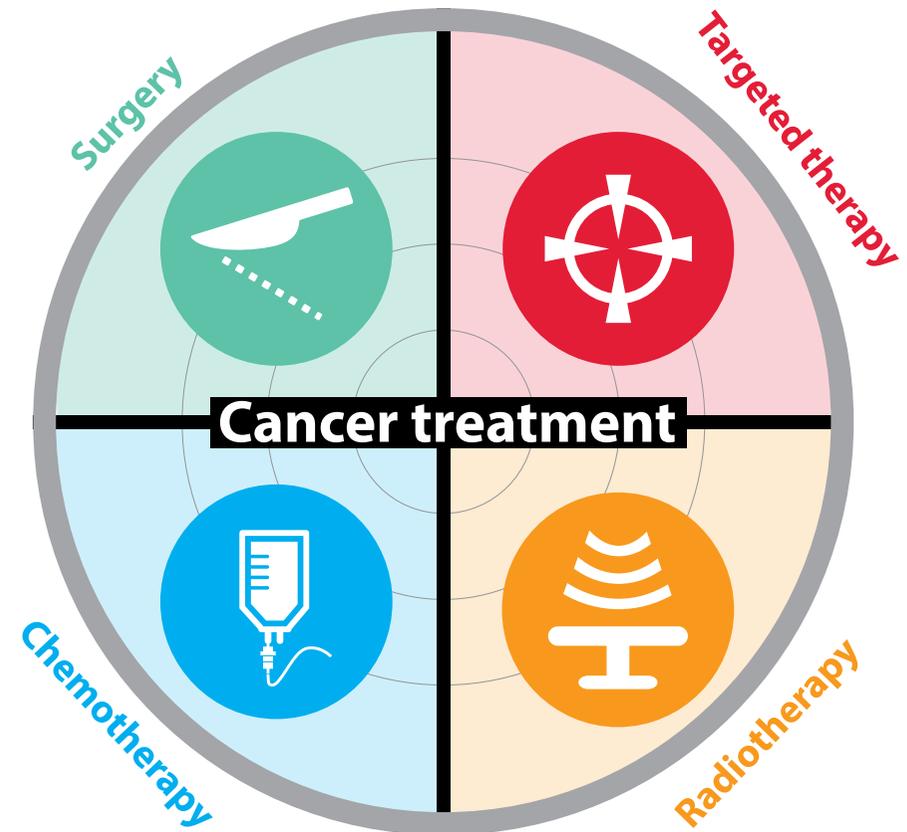
You can still be close and intimate despite cancer. Remember that intimacy is not just physical and it is also about the feelings you have for each other. Here are some ways you can stay intimate:

- Spend time together without any distractions
- Focus on each other by talking and rediscovering each other
- Take things slowly by doing things together (e.g. taking a walk, listening to music together)

- **Find ways to unwind and relax** – Do things that help you feel at ease. It could be something simple like reading, painting, craftwork or something else. Meditation and relaxation exercises can help you relax when you feel anxious.
- **Remember to keep active** – Gentle exercises like yoga and stretching will help you focus on something other than your cancer. If you feel up to it, you can even go out of the house for a walk.
- **Indulge in hobbies.**

Remember to talk to your doctor if you find your emotions too much for you to deal with. Your doctor can recommend a counsellor or other tips on how to deal with how you feel.

With the advancement of technology, treatment of cancer has improved leaps and bounds over the years. Your doctor will help you find a treatment that is best suited to your condition.



The main purpose of surgery is usually to remove the tumour and some of the surrounding healthy tissue. This is to ensure that there are no cancer cells left behind after the surgery. There are a variety of different surgeries available for treating head and neck cancers:

- **Tumour resection (excision)** – This procedure is used to remove the cancer tumour(s) and the surrounding healthy tissues.
- **Laser technology** – In early stages of cancer, this type of surgery may be used, particularly if the tumour is found in the pharynx.
- **Robotic surgery** – With the advancement of technology, robotics assist the surgeons in removing cancer tumours in the throat. This procedure is able to remove the cancer tumour completely with fewer side effects compared to conventional surgery.
- **Lymph node dissection/ neck dissection** – When there are signs that the cancer cells have spread to the lymph nodes, your doctor may remove the lymph nodes. This is usually done together with the excision.
- **Reconstructive (plastic) surgery** – If your surgery requires large amounts of tissue removal, reconstructive surgery may be done to replace the missing tissue. This helps restore appearances and function of the affected area.

Your doctor will help determine which procedure to do depending on the location, stage, and type of cancer. In some cases, more than one surgery may be needed. In other cases, it may not be possible to completely remove the cancer through surgery. When this happens, radiation therapy and/or chemotherapy may be needed to eliminate the cancer cells that could not be removed.

Cancer doesn't just affect you physically. You will find yourself dealing with a lot of emotions, some which you are not sure how to manage well. These emotion may come and go, changing by the minute, hour or day.

- **Keep a positive outlook on life** – Try your best to focus on the good things in life. Do things that make you happy and healthy.
- **Don't force yourself to be happy** – There will be days where you will be really down. When these days are around, let your family/friends know and let them support you.
- **It's not your fault** – Cancer is not a punishment for something you did, or did not do. This disease can happen to anyone.
- **Talk about how you feel about your cancer when you are ready to** – Talking to others about what you're going through will help you a lot. Sometimes, the people around you are concerned but are not sure how to talk to you about it. You can reassure them by discussing your cancer with them.

Mr Yan's Story

It is important to try to maintain a positive outlook. I believe that you should listen to the people that you trust and also believe in yourself. I am blessed that I have a supportive family and that we have cared for each other through this whole ordeal. I believe that as a family, we should work together, enjoy life together and also go through hard times together.

Mr Yong's Story

When dealing with cancer, I felt that it was important that I accepted that this was the reality of the situation. I maintained a positive attitude during my treatment and tried not to let it bring me down. I was working regularly and did things that I liked to keep my spirits up. I also listened to the advice of my doctors.

4. Preparing your home for recuperation – Treatment can be very tiring. You might want to arrange your home so that it will be safe for you to move about when you rest.

5. Get informed – Be sure to learn as much as you can about your treatment, potential side effects and ways to manage them. If you have questions, write them down so that you remember to ask your doctor during your next appointment.

6. Maintain a healthy lifestyle – Once treatment is underway, you may find that your appetite is diminished and your energy levels may drop. Try to keep healthy through simple exercises like yoga or Tai Chi. Meditating or speaking with therapists will help with your mental health.

You will also need to eat well. Speak to your doctor or nutritionist on the diet that you will need to be on. Depending on your treatment, your diet will differ from person to person.

7. Sorting out your work/school schedule – Treatment will take time and may affect your energy levels. Your ability to continue going to work/ classes depends on how you respond to your treatment. How treatment affects you won't be clear until it actually begins, but it would be useful to prepare for adjustments to your work/classes.

Mr Ng's Story

When the doctor diagnosed me with cancer, I made sure to get more information on it. I also decided get a second opinion before making my decision on the type of treatment that I felt was the right one for me. Other than that, I had to take 1 year out of work. The diagnosis affected me emotionally but with support from my wife, we took the necessary steps and went through the motions. However, through the whole ordeal, I found a lot of strength by relying on religion.

This form of therapy uses chemical to destroy the cancer cells. These are special drugs that kill the cancer cells by stopping its ability to grow and divide. Chemotherapy can be delivered in two ways; intravenously (IV) through a needle inserted into a vein, or orally via a pill/capsule that is swallowed.

Typically, chemotherapy is used in the following situations:

- In combination with radiotherapy, as the main treatment in some cases.
- Given after surgery to kill any residual cancer cells left behind by surgery (this is known as **adjuvant chemotherapy**). This is usually given in combination with radiotherapy.
- Sometimes in combination with radiation, chemotherapy is given before surgery to shrink the tumours (**neoadjuvant/induction chemotherapy**). This makes it possible to save some of the healthier tissue surrounding the tumour, and thus, reduce the side effects of surgery.
- In later stages of cancer, (with or without radiation) where the cancer may be too large or have spread too far to be removed by surgery. This helps slow/stop the growth of the cancer for as long as possible while relieving any symptoms caused by the cancer.

Generally, chemotherapy is given in cycles (periods of treatment followed by a rest period). Each cycle typically lasts for a few weeks. Chemotherapy can be used alone or in combination with different types of drugs.



Radiotherapy uses powerful x-rays or other particles to destroy the cancer cells. This form of treatment is given over a period of time and contains a certain number of sessions. It can be used after surgery to destroy small areas of cancer cells that surgery was unable to remove. It can also be used as the main treatment for head and neck cancer.

- **External-beam radiation** – This form of radiotherapy is the most commonly used. Radiation is delivered by a machine outside the body.
- **Intensity-modulated radiation therapy (IMRT)** – IMRT is an advanced form of external beam radiation therapy. The radiation beams are more accurately aimed at the cancer tumour. This in turn helps to reduce the damage to surrounding healthy tissue and thus, reduce side effects.
- **Internal radiation therapy (brachytherapy)** – This form of radiotherapy inserts radioactive materials directly into, or near, the cancer itself. The radiation travels only a short distance, limiting its effect on the surrounding tissues.

Radiotherapy can be used in combination with chemotherapy (chemoradiation therapy) and targeted therapy to further increase the efficiency of cancer elimination.



The diagnosis with cancer can be overwhelming and you'll need to deal with a lot of things through this journey to recovery.

Getting ready for treatment

1. Know where you stand in your road to recovery – Make sure that you and your cancer care team are on the same page when it comes to what your treatment will entail. When going for appointments, have a friend or family member come along with you so that they can take notes. Don't be afraid to get another opinion if you feel you need one.

2. Plan for what you're able to – While on treatment, you will go through hurdles and you won't feel 100%. Try to plan ahead to organise what needs to be done while you're recovering from surgery/ chemotherapy/ radiotherapy or treatment.

3. Get support – You might want to get support from friends and family. Friends and family can show their support by:

- Driving you to and from treatments
- Taking care of household chores (e.g., cleaning, cooking and caring for the children/pets)
- Provide you with mental and emotional support.

You can also look into joining a support group. They can provide you with support and insight into what to expect and how to manage your journey.

Mr Yan's Story

When I was diagnosed with my cancer, I made sure that I learnt as much as I could about it. This way, I could make informed decisions when the time came. During this period, my son would drive me to and from my medical appointments. We also had to work out my working schedule as I manage our family business.

Some side effects of treatment include hearing loss and imbalance. When this happens, you need to make sure that your doctor is aware of these changes. An audiologist or otologist (doctors that specialise in hearing problems) can help you.

Overcoming hearing issues

After evaluating your hearing issues, your doctor may recommend any of the following:

- Hearing aids
- Auditory trainers (especially useful for those still schooling). These work when the speaker wears a microphone that transmits the sounds directly to a receiver hearing aid via FM frequency. This allows the user to hear the lecture/lesson even if the surroundings are noisy
- Cochlear implants are for those that have profound hearing loss and do not benefit from hearing aids
- Speech reading, sign language and cued speech.

Keeping balance

If you have balance problems, a physical therapist will guide you in adapting to the changes in your body. However, here are some things that you can do as well:

- Prevent falling by walking slowly or holding onto handrails. In the bathroom, place no-slip mats or handrails.
- Wear footwear that have rubber soles to have a better grip on the ground when walking.

Mr Yan's Story

One of the side effects of my surgery is that I lost my sense of balance when part of my middle ear was removed. To learn how to adapt to these changes, I had to go for physiotherapy. I am now able to walk around, albeit carefully. It is important that while you learn to move around again, you have your partner with you as it can be dangerous without guidance or supervision.

Targeted therapy is a special type of treatment that will target the factors that encourage the tumour to grow. This includes specific genes, proteins or the tissue environment.

This form of treatment is usually used:

- Together with radiotherapy, in patients that are unable to tolerate the side effects of chemoradiation.
- In combination with chemoradiation and palliative (treatment that provides relief from the symptoms and stresses of the cancer) chemotherapy.

How it works

The tumours in head and neck cancers have a special protein called the epidermal growth factor receptor (EGFR) on the surface. When special chemical compounds in the body (growth factors) attach to the EGFR, it stimulates the cancer tumour to grow.

When targeted therapy is used, the medication stops the growth factors from attaching to the EGFR. This will stop the cancer from growing and make it more sensitive to the effects of radiotherapy.

This form of treatment is usually given through an IV infusion (the medicine is dripped into your vein through a needle).

Both cancer and its treatments can cause a variety of side effects. Common side effects that you may encounter:

Surgery side effects:

- Stiffness in the shoulders in lymph node removals
- Temporary or permanent loss of normal voice
- Speech may be affected
- Difficulty in chewing and swallowing
- Swelling that goes away as the surgical wounds heal

Mr Yan's Story

While the surgery went well, some of the side effects I experienced includes difficulty in chewing, swallowing and speaking. Other than that, my balance was affected as part of my left middle ear had been removed. Due to my chewing and swallowing difficulties, I was on a liquid diet. The liquid diet led to the development of haemorrhoids as passing motion was difficult.

Radiotherapy side effects:

- Tooth decay
- Short- or long-term difficulties in swallowing
- Changes to the normal voice
- Change in sense of taste that may cause loss of appetite
- Hearing loss
- Fatigue
- Skin rash at the treatment area
- Dry mouth or thickened saliva
- Nausea
- Mouth sores and/or sore throat

Mr Ng's Story

As the cancer was found on my tongue, half my tongue was removed during surgery. For a while after surgery, I lost a sense of taste and was on a liquid diet for about half a year. While I was on radiation therapy, I had severe dryness of my mouth, as my left salivary gland was affected. Additionally, the therapy caused me to experience sore throat. I also experienced radiation burns to the skin on my neck.

Like chewing and swallowing, cancer treatment can take a toll on your speech. You may find that you have some difficulties saying certain words or talking to others. Your voice may also be affected. However, if these things do happen, getting speech therapy will help you.

Speech therapy

Speech therapists are healthcare professionals that will work with you on helping you speak clearer. They will also help you with any swallowing difficulties that you may encounter. Your therapist will help by:

- Rehabilitating the muscles needed to swallow
- Teach you ways to modify the textures of food and liquids to prevent food/liquids from sliding into your lungs
- Helping you open your jaw wider to allow for clearer speech and to improve your ability to chew food
- Teaching you techniques to help improve your communication with people around you.

Mr Yan's Story

After my surgery, I was finding it hard to swallow, chew and speak normally. Due to that, I went for speech therapy. Initially, I found it very frustrating but with time, and dedication, I was able to adapt to the changes and am slowly learning to speak clearly.

Mr Ng's Story

After removing the tumour on my tongue, I was unable to speak like before. This became very frustrating, not just for me, but also for my young children as they could not understand why I could not speak to them. For a while, I relied heavily on hand gestures to communicate with others. Speech therapy has helped me re-learn how to speak and chew foods. While initially I was on a liquid diet, I can now consume soft foods like soup, noodles and fish.

Going through radiotherapy and surgery to the head and neck area may cause changes to your mouth, tongue or throat. These can cause difficulties when you eat and drink.

Some of these changes are temporary and goes away when treatment is over. However, for some people things may not be the same as before. When this is the case, your health-care provider can refer you to a speech therapist and a nutritionist. Here are some tips on how to deal with eating problems:

- Eat foods that are high in calories and contain a lot of protein (e.g. meats, fish or cheese)
- Cook with butter or oil
- If your mouth hurts or swallowing is very tough, try soft foods such as milkshakes, puddings, or jelly. Avoid food that may irritate your mouth such as spicy/salty foods, citrus-based food or drink (orange, lemon and lime) and tomato sauce
- Choose foods that you find most appetising
- Mix food with sauces so that it will be easier to swallow
- Having several small meals or snack throughout the day may be a better option for you as compared to 3 large meals.

Mr Yong's Story

While I was on treatment, I was losing weight drastically as everyone advised me to abstain from certain foods. However, my doctor advised me that I did not need to abstain from any type of food at all. When I found this out, I began eating like normal. This is important as you need to have sufficient nutrients to keep your strength up.

Chemotherapy side effects:

- Fatigue
- Increased risk of getting sick
- Nausea, vomiting and loss of appetite
- Hair loss
- Diarrhoea

Mr Yong's Story

I was on radiation and chemotherapy at the same time. I was fortunate that my side effects were not too severe. However, I did experience a significant weight loss (from 75kg to 50 kg) as I experienced nausea and loss of appetite. Other than that, I was lethargic during my treatment period.

Targeted therapy side effects:

- Flu-like symptoms (fever, chills, or dizziness)
- Skin rash



Physical changes can occur due to the treatment or the cancer itself. Changes can occur in the way that you look or how you move around.

Reconstructive surgery

In some cases, surgery may be needed to correct certain changes brought about by the cancer or treatment. These procedures are done to help appearance, help maintain important actions such as chewing, swallowing, and breathing.

Mr Yan's Story

Because the tumour had grown into part of my jaw and ear, when I went for surgery to remove it, I had the surgeon perform reconstructive surgery as well. The surgeon removed some skin from my thigh and transferred it to cover the section where the tumour was removed.

Camouflage make-up and prosthesis

Sometimes, during reconstructive surgery, the skin on your face may be replaced by skin from another part of your body. This new skin may not be the same colour as the surrounding skin and scars may be visible. This difference can be fixed with the use of camouflage make-up.

After your surgery, check with your healthcare providers on advise on how to camouflage these differences.

Going out and about

While you may feel unsure about going back to work, school or attending social gatherings, it is good to gradually start gaining the confidence to do these activities again.

You can start by going to familiar places with someone else to give you the support you need. You may be pleasantly surprised that people may not even notice the changes you have. However, do be prepared for people that may make remarks, or children who are genuinely curious why you look a little different. When answering them, you can just tell them that you had a surgery and do not need to go into details.

As time goes by, you'll find that people will respond to you and not your physical appearance. With this, you can gradually build-up your self-confidence in managing social situations.

