IN BRIEF

- General medical practitioners' awareness of oral cancer risk factors and clinical appearance is less than that of their dental counterparts.
- Patients can present to their general medical practitioners with oral lesions.
- Alcohol use must be emphasised as a risk factor for oral cancer in future training of health professionals.
- The significance of erythroplakia and erythroleukoplakia needs to be emphasised in future training of health professionals.
- This paper highlights the need for improved education of general medical and general dental practitioners on oral cancer.

Professional education on oral cancer

Oral cancer awareness of general medical and general dental practitioners **L. M. Carter¹ and G. R. Ogden²**

ABSTRACT

Objective

To assess general medical practitioners' (GMPs') and general dental practitioners' (GDPs') awareness of prevention and early detection of oral cancer.

Design

Cross-sectional questionnaire-based study.

Setting

Primary care

Method

Questionnaires were delivered to all GMPs and GDPs in Tayside, assessing oral examination habits, delivery of advice on oral cancer risk factors, knowledge of oral cancer risk factors and clinical appearance, preferred point of referral and requests for further information.

Results

Response rates of 71% and 84% were obtained from GMPs and GDPs respectively. GMPs were less likely to examine patients' oral mucosa routinely, less likely to advise patients about risk factors for oral cancer, identified fewer risk factors for, and felt less confident about diagnosing oral cancer from clinical appearance than their dental counterparts. Seventy-one percent and 80% of GMPs and GDPs respectively requested further information about oral cancer.

Conclusion

Patients with oral lesions often present to their general medical practitioner. The incidence of oral cancer is rising in the United Kingdom, therefore the role of general medical practitioners in prevention and detection of oral cancer is becoming ever more important. This study highlights the need for improved education of general medical practitioners on oral cancer.

EDITOR'S SUMMARY

Oral cancer, or mouth cancer as we are now encouraged to term it for the understanding of the lay public, is a condition that has come into our consciousness increasingly in recent years. Although we now have a dedicated week (Mouth Cancer Awareness Week 11–17 November 2007), not so very many years ago the notion that specifically examining for oral carcinoma as part of a regular dental check-up was, if not exactly alien then certainly not routine. We have now embraced this as an element of both our preventive and diagnostic role partly on the basis that we, amongst many health care professionals, see patients regularly.

However, there are two populations at particular risk; increasing numbers of younger people, for reasons that we don't quite know and older people for whom tobacco and alcohol use and misuse are the main contributory causes. As dentists we are more likely to see the former than the latter on a regular basis whereas the converse is true of general medical practitioners (GMP).

Consequently, important as it is that we maintain our vigilance, it is also necessary to alert our GMP colleagues to the oral signs and symptoms of this condition. The problem seems to be, as this research highlights, that our medical colleagues are not used to examining the mouth with the same confidence as we have and in addition are not as aware of the contributory factors as we are, especially in relation to alcohol.

The answer may well lie in greater joint education between the two cohorts in relation to oral cancer, individually taking the time to discuss the issue with our medical colleagues and taking steps to influence undergraduate and postgraduate medical education.

The full paper can be accessed from the *BDJ* website (www.bdj.co.uk), under 'Research' in the table of contents for Volume 203 issue 5.

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FULL PAPER DETAILS

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AUTHOR QUESTIONS AND ANSWERS

1. Why did you undertake this research?

The incidence of oral cancer is increasing in the United Kingdom and there is evidence that patients often present to general medical practitioners with oral lesions. Despite an increase within younger patients, oral cancer is more prevalent in the elderly. Elderly patients are more likely to see their general medical practitioner regularly, rather than their dental practitioner. In addition, approximately 75% of oral cancer arises in association with alcohol and tobacco and general medical practitioners are more likely to see patients with alcohol and tobacco-related diseases. Thus, general medical practitioners may be better placed to identify patients at risk of oral cancer. To this end, our objective was to assess the oral cancer awareness of general medical practitioners compared to general dental practitioners.

2. What would you like to do next in this area to follow on from this work?

We have suggested strategies to improve the oral cancer awareness of general medical practitioners, namely a proactive approach from oral and maxillofacial surgeons and oral physicians toward teaching medical undergraduates, foundation year jobs in oral and maxillofacial surgery for medical graduates pursuing a career in general practice in addition to those pursuing a career in surgery, and integration of primary care dental and medical services. The medical undergraduate curriculum at the University of Dundee now benefits from the inclusion of teaching on oral diseases by oral surgeons and oral physicians as part of the gastrointestinal system teaching. We also wish to explore the legitimacy or appropriateness of general dental practitioners being involved in monitoring alcohol use by their patients and their possible role in providing brief interventional therapy.

COMMENT

Oral and oropharyngeal cancer is a significant disorder developed by over 250,000 people every year world-wide. Survival from this cancer is poor with just over half of cases surviving, the exemption being improved survival data from leading cancer treatment centres that specialise in the management of this disease. On the basis of epidemiological data, it appears that the most important approach to decreasing morbidity and mortality with oral cancer is improving early detection of localised lesions and recognition of potentially malignant disorders, to provide opportunities for counselling high-risk patients against tobacco and alcohol dependence.

Several research groups have examined the knowledge and awareness of professional groups of oral cancer in different settings. Lack of professional awareness of early symptoms and knowledge of risk factors have been highlighted as significant contributors to delay in diagnosis. Moreover, when young people present with symptoms they may be overlooked, as the probability of oral (tongue) cancer in a young person is not taken into consideration in repeated consultations.

In this study conducted in Tayside, the authors explore the knowledge and awareness of oral cancer among doctors and dentists in primary care. It is alarming that only 5% of doctors in Tayside knew that a red patch of the oral mucosa could be an early symptom of oral cancer. Association of alcohol drinking with oral cancer was also not well recognised by professional groups.

As most patients experiencing early symptoms with oral cancer tend to present in GP surgeries, continuing professional education is best targeted to family practitioners. Where doctors and dentists work in partnership, joint educational programmes may encourage working together to facilitate discussion and early referral to a hospital. Cancer Research UK, in order to assist with urgent referrals, produced an information sheet on mouth cancer referral guidelines for dentists and doctors based on existing NICE guidelines. The Department of Health has commissioned an e-learning educational package on early detection and this will be available through the World Wide Web later this year. These actions will provide opportunities for education and learning and will enhance earlier detection and public education of risk factors for oral cancer.

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