

Mortality rates for pharynx and mouth cancers have decreased

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Death rates have declined among U.S. patients with cancer of the mouth and pharynx from 1993 to 2007, with the greatest decreases seen among men and women with at least 12 years of education, according to a report in the November issue of the *Archives of Otolaryngology - Head & Neck Surgery*.

Decreases in risk factors and improved detection and treatment have contributed to decreasing death rates from major types of cancer - including lung, breast, prostate, and colorectal cancers - in the U.S. since the early 1990s. The decreases in mortality rates among patients age 25 to 64 years were largely limited to those with higher educational attainment, according to background information in the article. Death rates among patients with cancers of the oral cavity (mouth) and the pharynx (the area that starts behind the nose and ends at the top of the windpipe) have also decreased over the past few decades, although the extent this varies by educational attainment has not been previously examined for head and neck cancer.

Amy Y. Chen, M.D., M.P.H., of Emory University School of Medicine and the American Cancer Society, Atlanta, and colleagues studied mortality rates for patients with oral cavity and pharynx cancer by level of education, race/ethnicity, sex, and association with the human papillomavirus (HPV, a family of viruses that can be transmitted through sexual contact). The researchers analyzed data from the National Center for Health Statistics on white and black men and women, age 25 to 64 years, in 26 states.

"From 1993 to 2007, overall mortality rates for patients with oral cavity and pharynx cancer decreased among black and white men and women; however, rates among white men have stabilized since 1999," the authors report.

The largest decreases in death rates were among

black men and women with 12 years of education.

"<u>Mortality rates</u> for patients with oral cavity and pharynx cancers decreased significantly among men and women with more than 12 years of education, regardless of race/ethnicity (except for black women), whereas rates increased among <u>white men</u> with less than 12 years of <u>education</u>," the authors write.

The study found that <u>death rates</u> varied substantially for HPV-related and HPV-unrelated sites.

"The difference in mortality trends may reflect the changing prevalence of smoking and sexual behaviors among populations of different educational attainment," the authors conclude.

More information: *Arch Otolaryngol Head Neck Surg.* 2011;137[11]:1094-1099.

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