

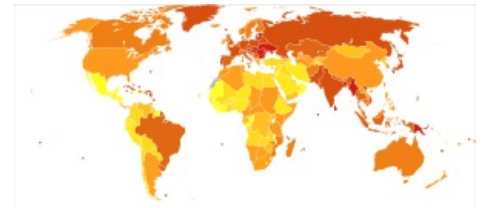
Tumors of the oropharynx

Tumors of the oropharynx are currently appearing more and more frequently. In men, these tumors occur up to 7 times more often than in women. Risk factors include, in particular, high risk HPV infection, smoking and alcohol. The average age is between 50-60 years. ^[1] Currently, mainly HPV+ lesions also appear in younger patients.

Types of tumors

Primary

- Benign tumors are rare (in children – hemangioma, lymphangioma, which can narrow the airways due to their volume, hemangioma can bleed).
- Malignant tumors
 - The vast majority are variously *differentiated squamous cell carcinomas*.
 - Adenocarcinoma occurs more rarely.
 - From mesenchymal tumors, lymphomas (Waldeyer's ring, ...) appear, more rarely malignant melanoma, sarcoma.



Scheme of deaths from cancer of the mouth and oropharynx in 2012 according to WHO per million people

Secondary

- Promotion of tumors from the surrounding area (mainly from parotid gland).

Symptoms

In the beginning, tumors do not have specific symptomatology. The **first symptom** is usually signs of inflammation in the given area (unlike inflammation, the problems are often unilateral):

- throat scratching, pain, foreign body sensation, dysphagia, blood in saliva, rhinolalia.

The first symptoms are often overlooked (due to the most frequently affected social group).

- Over time, the symptoms become more prominent and intensify, the pain can shoot into the ear.
- Exulceration → foetor ex ore.
- Regional metastases can sometimes be the first symptom.

Diagnostics

- Palpation examination is of great importance.
- We take a *biopsy*, a *panendoscopy* is indicated to verify the extent of the process.

Clinical picture

- **Macroscopy** of tumors:
 - just like '*thickening*' of the mucous membrane;
 - as **exophyte** of different shape;
 - have the form of **ulcer** - it can grow to the tonsils, the root of the tongue, the arch of the palate.
- Patients usually come at a late stage - when the tumor has exceeded 4 cm.
- 40% already have metastases in the trigonum caroticum.
- The 3 '*most common locations*' are the tonsils, the root of the tongue and the back wall of the pharynx (further on, for example, palatal arches).
- Forms:
 - The most common passes from the tonsil to the root of the tongue, to the retromolar trigone.
 - The second most common form originates from the root of the tongue and spreads forward along the edge of the tongue.
- Caudally spread is rare.

Cryptogenic tumor

- A small tumor of the tonsil or the root of the tongue that cannot be detected by examination methods.

Treatment

 For more information see *Treatment of tumors of the oropharynx*.

Links

References

KLOZAR, Jan. *Speciální otorinolaryngologie*. 1. edition. Praha : Karolinum, 2005. 224 pp. ISBN 80-246-1125-2.

Source

- BENEŠ, Jiří. *Studijní materiály* [online]. ©2007. [cit. 14. 12. 2011]. <http://jirben2.chytrak.cz/materialy/orl_jb.doc>.

Reference

Kategorie:Otorhinolaryngologie Kategorie:Onkologie Kategorie:Patologie

1. KLOZAR, Jan. *Speciální otorinolaryngologie*. 1. edition. Praha : Karolinum, 2005. 224 pp. pp. 67–72. ISBN 80-246-1125-2.