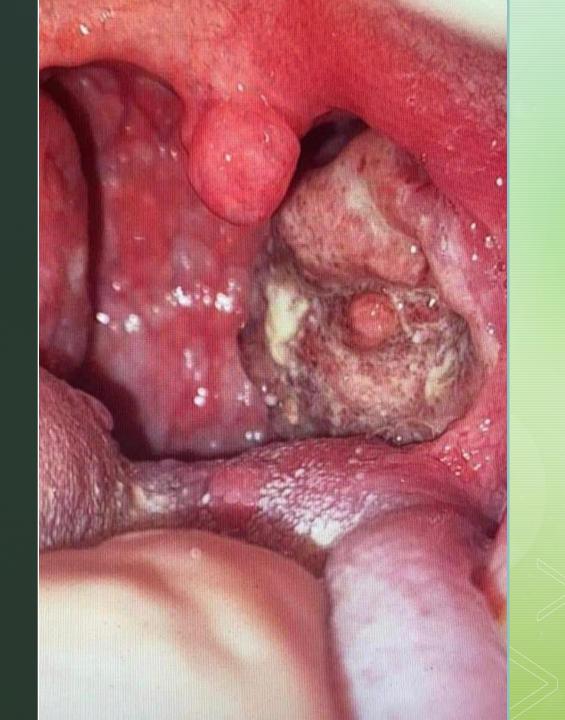
Disease burden, screening and treatment of head and neck cancers in Poland

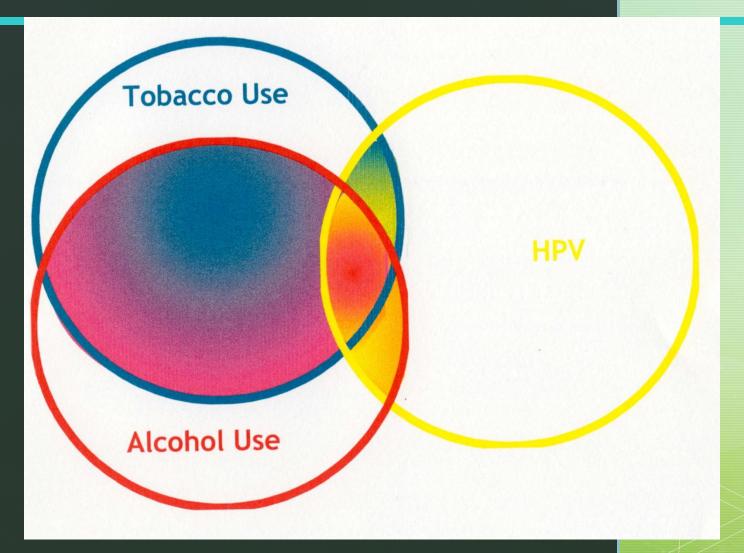
MD PhD Tomasz Szafarowski,

Asisstant Professor

Otolaryngology Clinic, Faculty of Medicine and Dentistry, Medical Universisty of Warsaw



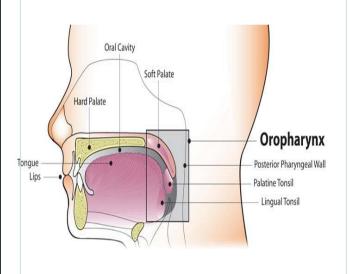
# Head and Neck Cancer Risk Factors

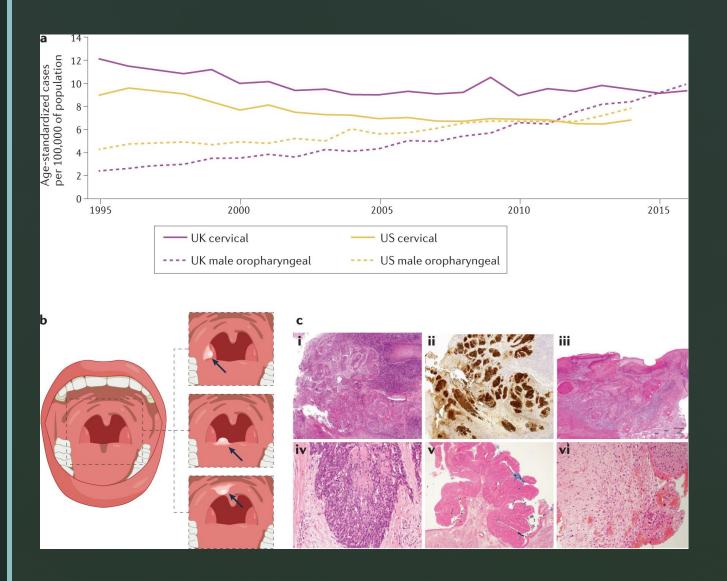


OPSCC has historically been linked to alcohol and tobacco

### HPV-associated oropharyngeal cancer

- Oropharyngeal squamous cell carcinoma (OPSCC) comprises cancers of the tonsils, base of tongue, soft palate and uvula
- The incidence of human papillomavirus-positive (HPV+) oropharyngeal squamous cell carcinoma (OPSCC) is rising rapidly
- Tonsillar complex and the base of the tongue comprise 96% of oropharyngeal tumours





HPV-associated oropharyngeal cancer: epidemiology, molecular biology and clinical management, Matt Lechner<u>Nature Reviews Clinical Oncology</u> volume 19, pages 306–327 (2022)

# HNSC statistics in Poland

Polish National Cancer Registry

# Laryngeal Cancer Stat Facts

#### Zachorowania/Zgony

Trendy czasowe



Grupuj według Kod nowotworu, Rok

Metryki Zgony (Umieralność), Zachorowania (Zachorowalność)

Statystyka Współczynnik surowy

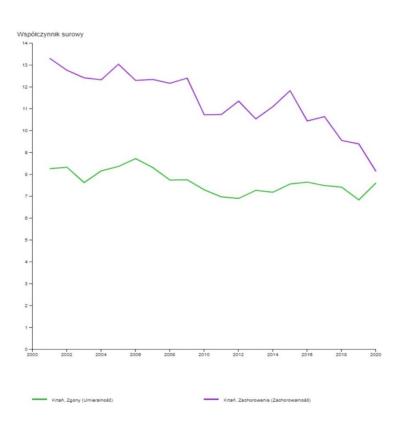
 Płeć
 Mężczyźni

 Nowotwory
 Krtań

 Region
 Polska

 Grupy wiekowe
 0 do 89

 Przedział czasowy
 2000 do 2020



# Tonsils Cancer Incidence - Women

#### Zachorowania/Zgony

Trendy czasowe

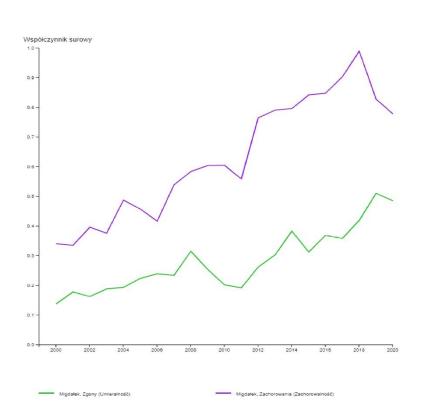


Grupuj według Kod nowotworu, Rok Metryki

Zgony (Umieralność), Zachorowania (Zachorowalność) Statystyka

Współczynnik surowy

Kobiety Nowotwory Migdałek 0 do 89 Grupy wiekowe Przedział czasowy 1963 do 2020



## Tonsils Cancer Incidence - Men

### Zachorowania/Zgony Trendy czasowe

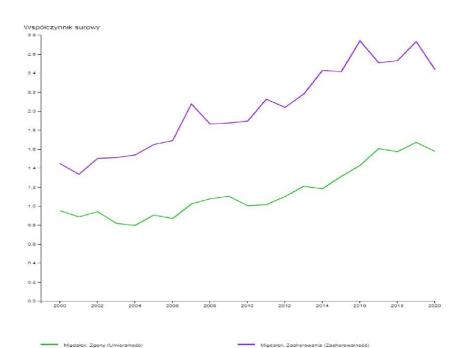


Grupuj według Kod nowotworu, Rok

Zgony (Umieralność), Zachorowania (Zachorowalność) Współczynnik surowy

Statystyka Płeć

Mężczyźni Nowotwory Migdałek Grupy wiekowe Przedział czasowy 1963 do 2020



# Oropharyngeal Cancer Incidence

#### Zachorowania/Zgony

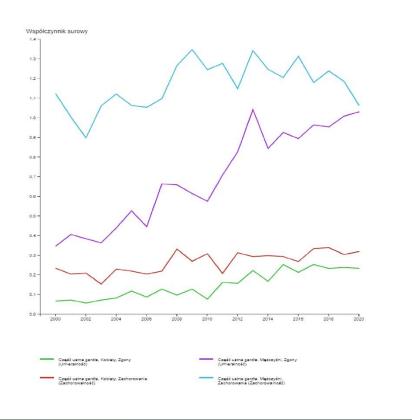
Trendy czasowe



Grupuj według Kod nowotworu, Rok Metryki Zgony (Umieralność).

Metryki Zgony (Umieralność), Zachorowania (Zachorowalność)

Statystyka Współczynnik surowy Pleć Mężczyźni, Kobiety Nowotwory Część ustna gardła Grupy wiekowe 0 do 89 Przedział czasowy 1963 do 2020



# HPV - related oropharyngeal cancers

- 60% in Republic of Korea,
- 51% in North America,
- 50% in Eastern Europe,
- 46% in Japan,
- 42% in North-Western Europe,
- 41% in Australia/New Zealand, 24% in South Europe,
   23% in China, 22% in India, and 13%

Table 37: Studies on HPV prevalence among cases of oropharyngeal cancer in Poland

			HPV	Prevalence			
Study	HPV detection method and targeted HPV types	No. Tested	%	(95% CI) <sup>a</sup>	Prevalence of 5 most frequent HPVs, HPV type (%)		
MEN							
No data available		-	-	-	-		
WOMEN							
No data available		-	-	-	-		
BOTH OR UNSPECIFI	ED						
Ribeiro 2011	PGMY09/11 (L1) Amplification with TS primers (16)	136	0.7	(0.1-4.0)	HPV 16 (0.7)		
Snietura 2010	Real-time High Risk HPV test (Abbott Molecular) using L1 consensus primers Amplification with TS primers (16. 18. 31. 33. 35. 39. 45. 51. 52. 56. 58. 59. 66 and 68 - the technique only differentiates 16-18-other)	14	50.0	(26.8-73.2)	HPV 16 (50.0)		
Szkaradkiewicz 2002	MY09/MY11 (L1) Amplification with TS primers (16. 18)	28	10.7	(3.7-27.2)	-		

#### Data updated on 9 May 2016 (data as of 31 Dec 2015)

DBH: Dot Blot Hybridization; EIA: Enzyme ImmunoAssay; HC2: Hybrid Capture 2; ISH: In Situ Hybridization; LBA: Line-Blot Assay; LiPA: Line Probe Assay; PCR: Polymerase Chain Reaction; RFLP: Restriction Fragment Length Polymorphism; RLBH: Reverse Line Blot Hybridization; RT-PCR: Real Time Polymerase Chain Reaction; SBH: Southern Blot Hybridization; SPF: Short Primer Fragment; TS: Type Specific

Only for European countries

Data Sources

Ribeiro KB, Int J Epidemiol 2011; 40: 489 | Snietura M, Pol J Pathol 2010; 61: 133 | Szkaradkiewicz A, Clin Exp Med 2002; 2: 137

Based on systematic reviews and meta-analysis performed by ICO. Reference publications: 1) Ndiaye C, Lancet Oncol 2014; 15: 1319 2) Kreimer AR, Cancer Epidemiol Biomarkers Prev 2005; 14: 467

a 95% Confidence Interval



# Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology



Volume 133, Issue 6, June 2022, Pages 698-705

Original Article

Prognostic value of human papillomavirus detection and the eighth edition of the TNM classification staging system in oropharyngeal squamous cell carcinoma: A single-center Polish study

#### • 110 OPSCC cases

70.9% of cases, with HPV16 being the most prevalent genotype (96.2%)

Palatine tonsils were the most prevalent tumor site, constituting over 80% of cases



International Epidemiologic Study of Worlwide

Distribution of Type-specific Human Papillomaviruses

HPV (DNA) in invasive Head and neck Cancers

Catalan Institute of Oncology,

Barcelona, Spain

"HPV Involvement in Head and Neck Cancers: Comprehensive Assessment of Biomarkers in 3680 Patients" Xavier Castellsague, Laia Alemany, Miquel Quer et al. J. Natl Cancer Inst 2016

#### **EUROPE** (2,291)



Belarus (72) Spain (731) France (60) Poland (244) ASIA **(462)** 

Bosnia-Hz (82) UK (321) Germany (264) Portugal (48)

**C**zech R (163) Slovenia (156) Italy (150)

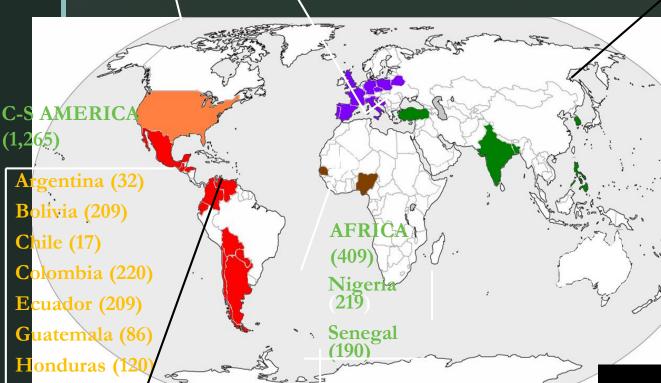
Bangladesh (94)

India (108)

Korea S (14

Philippines (61)

Turkey (51)



Mexico (197)

Paraguay (156)

Venezuela (19)

CASES FROM 29 COUNTRIES

() Total CASES

RECEIVED: 4,53

## Methods

- histopathological evaluation
- DNA quality control, and detection.DNA/HPV SPF-10 PCR/DEIA/LiPA<sub>25</sub>
- Additional markers indicating transforming activity E6\*I mRNA, p16<sup>INK4a</sup>

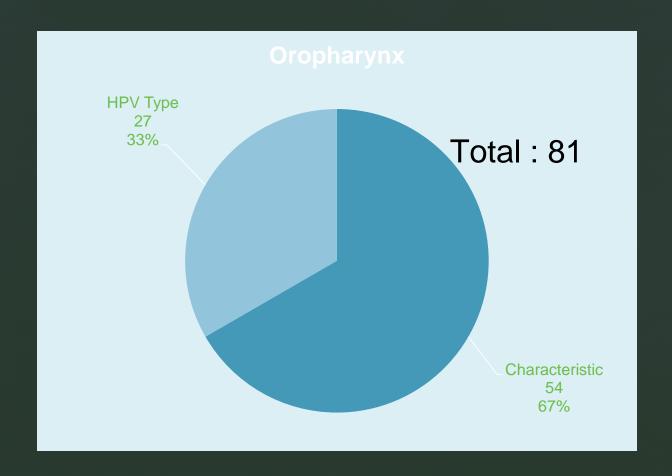
### **RESULTS**

Characteristic	Oral cavity		Oropharynx N=81		Nasopharynx N=7		Hypopharynx N=7		Larynx		
N=210		N=31							N	=84	
Age at diagnosis (y	/ears)										
Mea	n (SD)	59.1	(10.8)	61.8	(11.0)	57.6	(8.0)	54.1	(5.2)	59.6	(11.5)
Mi	in-Max	33-78		26-90		45-67		45-60		7-80	
Gender											
	Male	21	(67.7%)	58	(71.6%)	5	(71.4%)	6	(85.7%)	75	(89.3%)
F	emale	10	(32.3%)	23	(28.4%)	2	(28.6%)	1	(14.3%)	9	(10.7%)
Time at diagnosis											
20	000-09	15	(48.4%)	41	(50.6%)	5	(71.4%)	2	(28.6%)	37	(44.0%)
20	010-12	16	(51.6%)	40	(49.4%)	2	(28.6%)	5	(71.4%)	47	(56.0%)
Histological diagno	sis										
	SCC	31	(100.0%)	79	(97.5%)	7	(100.0%)	6	(85.7%)	84	(100.0%)
	Other*	0	(0.0%)	2	(2.5%)	0	(0.0%)	1	(14.3%)	0	(0.0%)

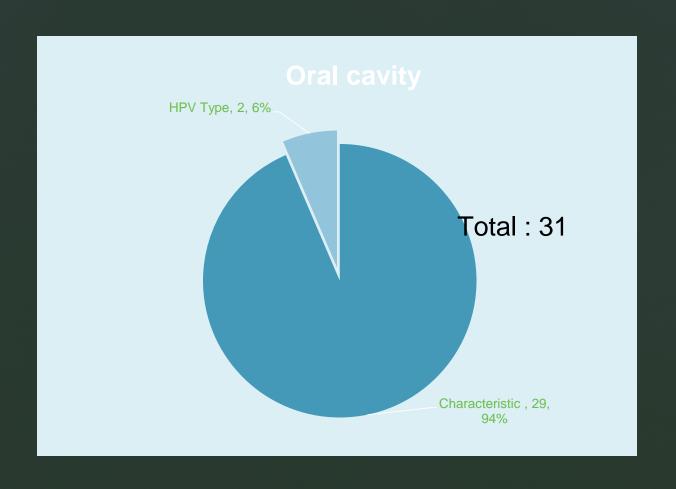
\*Two neuroendocrine tumours (1 oropharyngeal and 1 hypopharyngeal) and one adenosquamous cell carcinoma (1 oropharyngeal cancer)

HPV + Type N=38			Oral cavity		Oropharynx		Nasopharynx		Hypopharynx		Larynx		
		N=2		N=27		N=1		N=1		N=7			
			N DNA pos	N p16 or mRNA pos	N DNA	N p16 or mRNA pos	N DNA	N p16 or mRNA pos	N DNA	N p16 or mRNA pos	N DNA		o16 or NA pos
HPV16 <b>35</b>			1	1	27	27	1	0	1	1	5		3
HPV18 <b>1</b>			-	-	-	-	_	-	-	_	1		1
HPV45 <b>1</b>			-	_	-	-	_	_	_	_	1		1
HPVX 1			1	0	-	-	-	-	-	-	-		-

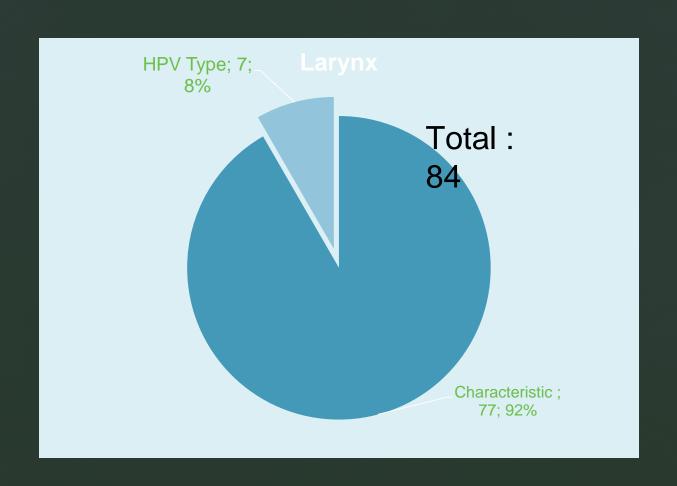
## RESULTS - OROPHARYNX

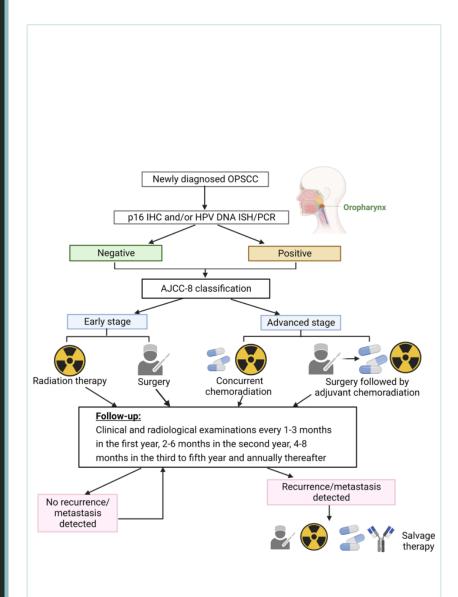


## RESULTS – ORAL CAVITY



## RESULTS - LARYNX





### Early stage disease -

 has largely been replaced by less-invasive techniques

- transoral laser microsurgery (TLMS)
  - transoral robotic surgery (TORS)

### Treatment

 Improved prognosis and greater prevalence in younger individuals, numerous ongoing trials are examining the potential for treatment de-intensification

■ The substantially better prognosis of patients with HPV+ OPSCC compared to those with HPV- OPSCC has been recognized in the American Joint Committee on Cancer TNM8 staging guidelines, which recommend stratification by HPV status to improve staging.

## Treatment Future

- standard treatment is associated with high toxicities and compromised quality-of-life
- de-escalating treatment for these patients
- recently completed clinical trials to de-intensify chemoradiation in unselected populations failed to demonstrate non-inferiority
- Emergence of immunotherapies (only anti-PD-1/PD-L1 antibodies have been approved for clinical use)

The incidence of human papillomavirus-associated oropharyngeal cancer (HPV+ OPSCC) is expected to continue to rise over the coming decades until the benefits of gender-neutral prophylactic HPV vaccination begin to become manifest.

Thank you for your attention.