

Common Myths:

Oral and oropharyngeal cancers only affect heavy drinkers and smokers.

FALSE: These cancers can affect anyone. Smoking and drinking alcohol are major risk factors. While light drinking can slightly increase your risk, research indicates that heavy drinkers are five times as likely to contract oral and oropharyngeal cancers⁵.

I should only get mouth sores checked when they are painful and obvious.

FALSE: Oral cancer lesions can be difficult to spot with the bare eye and can either be painful or painless. The most common symptoms are a mouth sore or ulcer that doesn't heal within two weeks, red or white patches on the tongue, gums, or lining of the mouth, and unusual lumps or thickening in and around the mouth (including the lips)^{3,4}. Your dentist or hygienist takes time to do a thorough oral cancer screening as part of your regular checkup. Let's see those tonsils!

HPV only affects women.

FALSE: HPV affects everyone. It is estimated that 80% of sexually active people will be infected with HPV in their lifetime. Men are 4.5 times more likely than women to develop an oropharyngeal cancer caused by HPV⁶.

I'm too old to get the HPV vaccine.

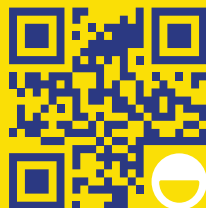
FALSE: It is never too late to immunize. The optimal age to get vaccinated is between 11 and 12. The HPV vaccine is publicly funded in Alberta for all grade 6 students through the immunization program; all people up to and including 26 years of age; and individuals with chronic health conditions up to and including 45 years of age⁸. When in doubt, ask your healthcare provider.

Only girls can get the HPV vaccine.

FALSE: The HPV vaccine is recommended for all people, regardless of gender or sexual orientation.

Let your mouth do the talking

Don't be afraid to talk to your oral health care team about oral cancers. For more information, visit amouthsaysalot.ca



A resource produced by the Alberta Dental Association, Dental Hygienist Association of Alberta, Association of Alberta Dental Assistants, Denturist Association of Alberta, and Merck Canada. Full references are available on amouthsaysalot.ca



Information about Oral Cancer and Oropharyngeal Cancer Risk

Every year, thousands of Canadians are diagnosed with oral cancer. It can appear differently from person to person, and sometimes there are no visible signs at all. That's why early detection matters so much. It can double your chance of survival. If you notice anything unusual in your mouth, see your dentist or dental hygienist right away.

What is Oral and Oropharyngeal Cancer?

Oral and oropharyngeal cancers can develop in the mouth (lips, tongue, gums, cheeks, hard palate) or the throat (tonsils, soft palate, back of tongue). Primarily associated with tobacco, alcohol, and HPV, these cancers often show up as mouth sores that don't heal, lumps, or swallowing difficulties¹.

What can cause oral cancers?

Tobacco use, betel nut (including paan and pituri), and drinking alcohol can increase the risk of oral cancers. HPV infection is the primary risk factor for oropharyngeal cancer.

Say something

Make sure to see your oral health professional regularly and be sure to ask any questions and report any concerns you may have related to your oral health.

What is HPV?

Human papillomavirus (HPV) is a viral infection. There are over 100 different types of viruses that make up HPV and some are spread through sexual contact. These types can infect the genital areas as well as parts of the mouth and throat. Most sexually active people will get at least one HPV infection in their lifetime and many of these will never know because HPV often doesn't cause any symptoms. Many HPV infections come and go over the years the same way as a common cold virus.

HPV that doesn't go away might lead to cancer.

How to reduce your risk

To reduce your risk of oral and oropharyngeal cancers:

- stop smoking
- drink less alcohol
- avoid betel nut, paan, and pituri
- get vaccinated against HPV
- practice safe sex with barriers

Recognize the signs

Signs and symptoms of oropharyngeal cancer can include one or more of the following^{3,4}:

- a sore throat that doesn't go away
- red and white lesions (sores) in the mouth that don't heal within two weeks
- difficulty chewing or swallowing
- constant bad breath
- a change in how dentures fit
- a lump in the neck
- ear pain with or without jaw pain
- difficulty speaking, loss of appetite, fatigue, weight loss
- bleeding inside the throat or mouth
- pain, inability to move the tongue
- difficulty opening the jaw
- voice changes
- irregular texture inside the mouth and gums
- loose teeth
- persistent cough
- shortness of breath



What can I do?

Talk to your dentist, dental hygienist, or denturist about your risk factors and what you can do to lower them.