After Oral Cavity and Oropharyngeal Cancer Treatment

Living as a Cancer Survivor

For many people, cancer treatment often raises questions about next steps as a survivor.

- [Living as an Oral Cavity and Oropharyngeal Cancer Survivor](#)

Cancer Concerns After Treatment

Treatment may remove or destroy the cancer, but it's very common to worry or have questions about cancer coming back or treatment no longer working.

- [Second Cancers After Oral Cavity or Oropharyngeal Cancer](#)

Living as an Oral Cavity and Oropharyngeal Cancer Survivor

For many people with oral cavity or oropharyngeal cancer cancer, treatment can remove or destroy the cancer. The end of treatment can be both stressful and exciting. You may be relieved to finish treatment, but yet it’s hard not to worry about cancer coming back. This is very common if you’ve had cancer.

For other people, the [cancer might never go away](#) completely. Some people may get regular treatment with chemotherapy or targeted therapy or other treatments to try and help keep the cancer in check. Learning to live with cancer that does not go away can be difficult and very stressful.
Life after cancer means returning to some familiar things and also making some new choices.

**Follow-up care**

After you have completed treatment, your doctors will still want to watch you closely. It's very important to go to all of your follow-up appointments. During these visits, your doctors will ask questions about any problems you are having and will examine you. Your doctor may also order lab tests or imaging tests (such as MRI or CT scans) to look for signs of cancer return (called cancer recurrence). Your health care team will discuss which tests should be done and how often based on the type and stage of your cancer, the type of treatment you had, and the response to that treatment.

People with cancer of the oral cavity or oropharynx may develop recurrences or new cancers in the head and neck area or the lungs. With improvements in surgery and radiation therapy, the ability to control the main (primary) cancer has greatly improved. But development of second cancers in the head and neck or lungs remains an important risk. Because of this, you will be followed closely after treatment. Recurrences happen most often in the first 2 years after treatment, so you will be examined every few months during the first 2 years and then less often after that.

If you were treated with radiation to the neck, blood tests to look at thyroid function may be needed about every 6 months.

Many studies have found that some people's quality of life tends to get worse in the first few months after treatment. But after that, for people who have given up smoking and drinking alcohol, things tend to get better. Within a year, many people are feeling reasonably well and happy.

Almost any cancer treatment can have side effects. Some may last for a few weeks to several months, but others can last the rest of your life. Don't hesitate to tell your cancer care team about any symptoms or side effects that bother you so they can help you manage them. Keep in mind that it's very important to report any new symptoms to your doctor right away, because they may prompt your doctor to do tests that could help find recurrent cancer as early as possible, when the likelihood of successful treatment is greatest.

**Problems with eating and nutrition**

Cancers of the mouth and throat and their treatments can sometimes cause problems
such as loss or change in taste, dry mouth, or even loss of teeth. This can make it hard to eat, which can lead to weight loss and weakness due to poor nutrition.

Some people may need to adjust what they eat during and after treatment. Some may even need a feeding tube placed into the stomach, at least for a short time during and after treatment. You may want to consult with a nutritionist to help find ways to meet your nutritional needs. If a dry mouth is making it hard to eat, your doctor may recommend a saliva substitute. This can help you maintain your weight and nutritional intake. Again, talk to your doctor about any problems you’re having. There are often ways to help.

Speech and swallowing therapy

Oral cavity or oropharyngeal cancers and their treatments may affect a person’s speech and ability to swallow. A speech therapist can often help with these. These experts are knowledgeable about speech and swallowing problems. They can help you learn to manage these problems and do the things you want and need to do.

Ask your doctor for a survivorship care plan

Talk with your doctor about developing a survivorship care plan for you. This plan might include:

- A suggested schedule for follow-up exams and tests
- A schedule for other tests you might need in the future, such as early detection (screening) tests for other types of cancer, or tests to look for long-term health effects from your cancer or its treatment
- A list of possible late- or long-term side effects from your treatment, including what to watch for and when you should contact your doctor
- Diet and physical activity suggestions
- Reminders to keep your appointments with your primary care provider (PCP), who will monitor your general health care

Keeping health insurance and copies of your medical records

Even after treatment, it’s very important to keep health insurance. Tests and doctor visits cost a lot, and even though no one wants to think of their cancer coming back, this could happen.
At some point after your cancer treatment, you might find yourself seeing a new doctor who doesn’t know about your medical history. It’s important to keep copies of your medical records to give your new doctor the details of your diagnosis and treatment. Learn more in Keeping Copies of Important Medical Records.

Can I lower my risk of oral cavity or oropharyngeal cancer progressing or coming back?

If you have (or have had) oral cavity or oropharyngeal cancer, you probably want to know if there are things you can do that might lower your risk of the cancer growing or coming back, such as exercising, eating a certain type of diet, or taking nutritional supplements. Unfortunately, it’s not yet clear if there are things you can do that will help.

Adopting healthy behaviors such as not smoking, eating well, getting regular physical activity, and staying at a healthy weight might help, but no one knows for sure. However, we do know that these types of changes can have positive effects on your health that can extend beyond your risk of oral cavity or oropharyngeal cancer or other cancers.

About dietary supplements

So far, no dietary supplements (including vitamins, minerals, and herbal products) have been shown to clearly help lower the risk of oral cavity or oropharyngeal cancer progressing or coming back. This doesn’t mean that no supplements will help, but it’s important to know that none have been proven to do so.

Dietary supplements are not regulated like medicines in the United States – they do not have to be proven effective (or even safe) before being sold, although there are limits on what they’re allowed to claim they can do. If you’re thinking about taking any type of nutritional supplement, talk to your health care team. They can help you decide which ones you can use safely while avoiding those that might be harmful.

If the cancer comes back

If the cancer does come back (recur) at some point, your treatment options will depend on where the cancer is located, what treatments you’ve had before, and your health. For more information on how recurrent cancer is treated, see Treatment Options for Oral Cavity and Oropharyngeal Cancer by Stage.
For more general information, you may also want to see Understanding Recurrence.

**Could I get a second cancer after treatment?**

People who’ve had oral cavity or oropharyngeal cancer can still get other cancers. In fact, oral cavity or oropharyngeal cancer survivors are at higher risk for getting some other types of cancer. Learn more in Second Cancers After Oral Cavity or Oropharyngeal Cancer.

**Getting emotional support**

Some amount of feeling depressed, anxious, or worried is normal when cancer is a part of your life. Some people are affected more than others. But everyone can benefit from help and support from other people, whether friends and family, religious groups, support groups, professional counselors, or others. Learn more in Life After Cancer.

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**Second Cancers After Oral Cavity or Oropharyngeal Cancer**

Cancer survivors can be affected by a number of health problems, but often their greatest concern is facing cancer again. If oral cavity or oropharyngeal cancer comes back after treatment it is called a *recurrence*. But some cancer survivors may develop a new, unrelated cancer later. This is called a *second cancer*. No matter what type of cancer you have had, it's still possible to get another (new) cancer, even after surviving the first.

Being treated for cancer doesn’t mean you can’t get another cancer. People who have had cancer can still get the same types of cancers that other people get. In fact, some types of cancer and cancer treatments can be linked to a higher risk of certain second cancers.
Second cancers linked to oropharyngeal cancer

Patients who have had cancers of the oropharynx can get any type of second cancer, but they have an increased risk of:

- Lung cancer
- Esophagus cancer
- Cancers of the larynx and hypopharynx
- Cancer of the oral cavity (including tongue and mouth)
- Another cancer of the oropharynx (this is different than the first cancer coming back)
- Pancreas cancer
- Cancer of the bile ducts
- Anal cancer
- Cancer of the cervix
- Colon cancer
- Rectal cancer
- Stomach cancer
- Chronic myeloid leukemia (CML)
- Hodgkin lymphoma
- Thyroid cancer

Second cancers linked to oral cancer

Survivors of cancer of the oral cavity can get any second cancer, but they have an increased risk of:

- Lung cancer
- Esophagus cancer
- Cancers of the larynx and hypopharynx
- Another cancer of the oral cavity (this is different than the first cancer coming back)
- Cancer of the oropharynx
- Stomach cancer
- Liver cancer
- Colon cancer
- Rectal cancer
- Cancer of the cervix
What you can do

Quit smoking

Many of these cancers are linked to tobacco use. In fact, lung cancer, a cancer strongly linked to smoking tobacco, is the most common second cancer in those with a history of mouth or throat cancer.

While it’s not easy to do, quitting tobacco can decrease your risk of many health problems, including another cancer. Smokers who quit have a lower risk of lung, esophagus, larynx, hypopharynx, and oral cavity and oropharynx than those who continue to smoke.

See Stay Away from Tobacco to learn more about quitting tobacco.

Follow-up after treatment

After completing treatment for cancer of the oral cavity or oropharynx, you should still see your doctor regularly. Your doctor may order tests to look for signs that the cancer has come back or spread. These tests are also useful in finding some second cancers, particularly a new lung cancer or cancer in the mouth or throat. Experts don’t recommend any other tests to look for second cancers in people who don’t have symptoms. Let your doctor know about any changes or problems you notice, because they could be caused by the cancer coming back or by a new disease or second cancer.

Survivors of oral cavity and oropharyngeal cancers should follow the American Cancer Society guidelines for the early detection of cancer.

To be in good health, survivors should also:

- Get to and stay at a healthy weight
- Adopt a physically active lifestyle
- Eat a healthy diet, with an focus on plant foods
- Limit alcohol to no more than 1 drink per day for women or 2 per day for men

These steps can also lower the risk of some cancers.

See Second Cancers in Adults to learn more about the causes of second cancers.

- References