
Department of Oral and Maxillofacial Surgery

Frequently Asked Questions about staging for oral cancer

This leaflet has been written to help your understanding of staging for oral cancer and answers many commonly asked questions. If you have any other questions that the leaflet does not answer or would like further explanation please ask any member of the Head and Neck team. This leaflet has been taken from the British Association of Oral and Maxillofacial Surgeons.

What is the problem?

You have recently been diagnosed as suffering from **oral cancer**. When deciding which treatment is best for you, your doctors will “**stage**” your cancer. This leaflet tells you what is involved in that staging process and why it is important for your care.

What is staging?

Staging is the way your disease is measured. Three aspects are important:

- The size of the cancer inside your mouth (T stage).
- Whether there has been any spread of the cancer to the lymph glands in your neck (N stage).
- Whether there has been any spread of the cancer to other parts of your body (M stage). This form of spread is unusual in oral cancer.

This forms the basis of a classification known as a ‘TNM’ staging.

Why have staging?

Your treatment depends on the stage of your disease. Studies have shown that the more accurate your staging, the better we tailor your treatment to give you the best chance of cure.

Staging also forms a common language between health care professionals looking after you.

How is staging done?

There are two main ways in which your cancer is staged.

Clinical examination – we can tell quite a lot about your cancer simply by looking and feeling. Sometimes this can be done whilst you are awake, but often it may be necessary for you to have a short general anaesthetic (this is where you are put to sleep completely) to allow a full assessment. Whilst you are asleep, we will also take a good look at the back of your nose, throat, voice box and gullet to make sure that there are no other problems.

Radiological - some sort of scan is usually carried out (for example CT or MRI scan). These specialised scans look at your head, neck and other parts of your body in detail, and provide important extra information.

Other X-rays (for example chest, jawbone) may be arranged depending on the site of your oral cancer.

What will happen after staging?

Your staging represents a detailed description of your cancer. It helps us to decide whether you need surgery, radiotherapy, (or a combination of both) to give you the best chance of cure.

Once your staging investigations have taken place you will be reviewed by the Head and Neck team. The results of the investigation will be discussed with you and a decision will be made on which treatment is best.

Asking questions

At all times, everybody in the team will do all they can to answer your questions as clearly and accurately as possible. It will be a frightening time for you. Please bring relatives and friends to clinic appointments with you, perhaps writing down questions to ask. If you are not sure that you have understood the answer to any question, please ask again.

For more information:

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Adapted from:

British Association of Oral and Maxillofacial Surgeons. Staging for Oral Cancer

<http://www.baoms.org.uk/>

Other formats and languages:

This document is also available in other languages, large print and audio format upon request – 01223 216032 or patient.information@addenbrookes.nhs.uk

本文件也可應要求，製作成其他語文或特大字體版本，也可製作成錄音帶。

Cantonese

આ દસ્તાવેજ વિનંતી કરવાથી બીજી ભાષાઓ, મોટા છાપેલા અક્ષરો અથવા ઓડિઓ રચનામાં પણ મળી રહેશે.

Gujarati

A richiesta questo documento è anche disponibile in altre lingue, a caratteri grandi e in formato audio.

Italian

ئەم بەلگەییە ھەرۆھە بە زمانەکانی کە، بە چاچی درشت و بە شریتی تەسجیل دەس دەکەوێت

Kurdish

درخواست پر یہ دستاویز دیگر زبانوں میں، بڑے حروف کی چھپائی اور سننے والے ذرائع پر بھی میسر ہے۔

Urdu**Document history**

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