



MOUTH CANCER CHARTER

The Mouth Cancer Charter, created by the Oral Health Foundation as part of November's Mouth Cancer Action Month, outlines critical steps to combat the growing incidence and mortality rates associated with mouth cancer in the UK.

It suggests seven measures aimed at raising awareness, improving early detection, and enhancing patient care. These include government-funded public awareness campaigns to highlight the signs, symptoms, and risk factors of the disease; better access to routine dental care; enhanced training for healthcare professionals; improved referral processes; and the development of new technologies for quicker diagnosis.

These efforts aim to promote early detection and provide better support for mouth cancer patients, ultimately improving survival rates and outcomes.

1. A government-funded campaign to raise the public's awareness of mouth cancer

Mouth cancer is a significant and growing health concern in the UK, with recent statistics revealing alarming trends. Latest data shows 10,825 new cases of mouth cancer diagnosed in the UK a year, marking a staggering 133% increase compared to 20 years ago.

This rise is compounded by the fact that mouth cancer has one of the lowest survival rates among cancers, with only 50% of patients surviving five years postdiagnosis. A lack of public awareness significantly contributes to these grim figures; more than half (58-74%) the population cannot identify the common early warning signs of mouth cancer.

Despite the escalating threat, previous government initiatives to combat mouth cancer have been insufficient. Current awareness campaigns are sporadic and poorly funded, leaving a vast gap in knowledge that puts countless lives at risk. A comprehensive, government-funded campaign is urgently needed to educate the public about the risk factors – such as tobacco and alcohol use, HPV, and poor oral hygiene – and the critical importance of early detection.

We propose a nationwide awareness campaign, harnessing multiple platforms, including social media, community outreach, and partnerships with healthcare professionals. The campaign should aim to increase public knowledge of mouth cancer by 40% within three years and improve early diagnosis rates, potentially saving thousands of lives annually.

By investing in this campaign, the government can foster a proactive approach to mouth cancer, ultimately reducing incidence rates and improving outcomes for those affected.

2. Improve access to routine dentistry for early detection of mouth cancer

Improving access to routine dentistry is vital for the early detection of mouth cancer, significantly enhancing survival rates. Currently, many individuals in the UK face substantial barriers to dental care, particularly those from disadvantaged backgrounds.

Nearly 40% of adults have not visited a dentist in the past two years due to cost, lack of availability, or geographical challenges. This gap in care hampers early diagnosis of mouth cancer, as regular check-ups are essential for identifying precancerous lesions and other oral abnormalities.

Statistics show that areas with the lowest access to NHS dental services also have higher rates of mouth cancer diagnoses and poorer outcomes. For example, in some regions, up to 50% of adults struggle to find an NHS dentist, leading to significant delays in diagnosis and treatment. Furthermore, research indicates that individuals from lower socioeconomic backgrounds are less likely to attend regular dental check-ups, increasing their risk of late-stage cancer detection.

The NHS must urgently address this issue by investing in initiatives to expand access to dental services. This includes increasing funding for community dental services, offering incentives for dentists to work in underserved areas, and promoting awareness of the importance of regular dental visits.

The current NHS Dental Recovery Plan has fallen woefully short, highlighting the need for a new dental contract that incorporates flexible working structures and ensures fair remuneration for dentists based on the complexity and quality of care provided. Implementing the recommendations from the Advancing Dental Care (ADC) Review by Health Education England is also essential for bolstering a dwindling NHS dental workforce.

By prioritising routine dentistry, we can protect public health and save lives through early intervention. Immediate action is needed to ensure equitable access to dental care for all.

3. Enable enhanced training of GPs to identify suspected mouth cancers and update NICE guidelines

Early detection of mouth cancer is crucial for improving survival rates and patient outcomes. General Practitioners (GPs) are often the first point of contact for patients, making their role in identifying suspected mouth cancers vital.

Approximately 50% of hospital referrals for mouth cancer come from GPs, highlighting the importance of their involvement. However, recent data suggests as few as 30% of GPs feel confident in identifying mouth cancer symptoms, highlighting a significant gap in knowledge.

To address this, we propose enhanced training programmes for GPs focused on the identification of mouth cancers. This training should include comprehensive modules on recognising early symptoms, understanding risk factors, and utilising diagnostic tools effectively. By equipping GPs with this knowledge, we can ensure more timely and accurate referrals to specialists.

We recommend that the government enable more specialist training for GPs to spot cases of mouth cancer, allowing for more direct referrals to secondary care. This ensures patients can quickly access the vital treatment they need. Additionally, we call for an urgent revision of the National Institute for Health and Care Excellence (NICE) guidelines. If GPs suspect any kind of mouth cancer, they should be able to urgently refer patients to secondary care without needing an initial assessment by a dentist. This change would enable more cases of mouth cancer to be diagnosed at an earlier stage and help fast-track these referrals.

The evidence is clear: early detection is everything, increasing someone's chances of survival from 50% to 90%. Immediate action is needed to make these critical changes a reality.

4. Improve training programmes for healthcare staff to look for signs of mouth cancer

Many healthcare professionals, including nurses, carers, and pharmacists, may encounter patients with early signs of mouth cancer but lack the specialised training to identify these symptoms.

Mouth cancer is a recommended Continuing Professional Development (CPD) subject for dental professionals, but very little is taught about the disease among other healthcare professionals.

To address this, we propose comprehensive training programmes that include detailed modules on identifying pre-cancerous lesions, understanding risk factors, and knowing when to refer patients for further evaluation.

Regular updates and refresher courses should also be provided to keep healthcare

staff informed about the latest advancements in mouth cancer detection. By investing in such training, we can create a more vigilant and proactive healthcare workforce, leading to earlier diagnoses and better patient outcomes.

In support of the public health awareness campaign, information and education about mouth cancer should be routinely given to non-dental health professionals, including GPs and pharmacists.

Care home and nursing staff should also be trained to look for signs of mouth cancer, in addition to providing effective oral hygiene and oral health care and support. Moreover, interdisciplinary training sessions can foster collaboration among different healthcare providers, ensuring a cohesive approach to patient care.

This holistic training strategy will empower healthcare staff to act swiftly and confidently when they encounter potential cases of mouth cancer, ultimately saving lives through early intervention. By enhancing these training programmes, we can significantly improve the early detection and treatment of mouth cancer, protecting public health and saving lives.

5. Introduce free dental check-ups and treatment for mouth cancer patients

Introducing free dental check-ups and treatment for mouth cancer patients is a crucial step in ensuring equitable access to care. Financial barriers often prevent individuals from seeking regular dental care, leading to delayed diagnoses and treatment of mouth cancer.

Current NHS dental contract arrangements do not allow all patients recovering from mouth cancer to receive free restorative treatment on the NHS, despite many patients having complex and expensive restorative needs for life. This is not fair and singles out mouth cancer sufferers from other cancer patients.

By offering free dental check-ups, we can encourage more people to attend regular screenings, facilitating early detection of mouth cancers. Additionally, providing free treatment for mouth cancer patients will alleviate the financial burden on those affected, allowing them to focus on their recovery without the stress of medical expenses. Mouth cancer patients usually have greater needs for ongoing and complex oral treatment. We therefore urge the government to ensure that, as with all other cancers, mouth cancer sufferers do not have to carry the financial burden for returning their lives to normal and recovering from their condition.

This initiative would not only improve survival rates but also enhance the quality of life for patients. Ensuring that everyone has access to necessary dental care, regardless of their financial situation, is vital for a fair and effective healthcare system. Immediate implementation of these measures is essential to protect public health and save lives. By removing financial barriers, we can ensure that all individuals, especially those from disadvantaged backgrounds, receive the care they need. This proactive approach will lead to earlier detection, timely treatment, and better outcomes for mouth cancer patients across the UK.

6. Supporting the development of better technology to diagnose mouth cancers is crucial for improving early detection and patient outcomes.

Currently, diagnostic methods such as visual examinations and biopsies can be invasive, time-consuming, and sometimes inaccurate, leading to delayed diagnoses and treatment. This significantly impacts patient prognosis.

To address this, we need to invest in advanced diagnostic tools like biosensors, artificial intelligence (AI), and non-invasive diagnostic devices. For example, new biosensors can detect mouth cancer in seconds, offering a quick, easy, and relatively inexpensive diagnostic tool.

Al can assist pathologists in predicting the risk of developing mouth cancer, improving early detection. Increasing funding for research into cutting-edge diagnostic technologies is essential.

Projects like the development of flavoured 'lollipops' that can diagnose mouth cancer at earlier stages without invasive methods should be prioritized. Additionally, integrating these advanced diagnostic tools into routine healthcare practices is vital. This will require training healthcare professionals to use new technologies effectively and updating clinical guidelines to incorporate these innovations. The outcomes of supporting these technological advancements are profound.

Advanced diagnostic tools will enable earlier and more accurate detection of mouth cancers, significantly improving survival rates. Non-invasive technologies will reduce patient discomfort and the need for painful procedures. Quick and accurate diagnostics can reduce the overall cost of treatment by catching cancers early, leading to less extensive and expensive treatments.

Ultimately, by supporting the development and integration of better diagnostic technologies, we can ensure timely treatment, enhance patient quality of life, and save lives. Immediate action is needed to make these advancements a standard part of mouth cancer diagnosis and care.

7. Improve referral pathways for faster diagnosis and treatment of mouth cancer

Mouth cancer patients are facing some of the longest delays in accessing treatment, with current NHS figures revealing a troubling reality. Data shows

that patients with mouth cancer experience longer waiting times for treatment compared to many other cancers, and head and neck cancer, which includes mouth cancer, has the lowest survival rates due to these delays.

In some areas, only 55% of mouth cancer patients begin treatment within the crucial 62-day target from an urgent GP referral. These delays are exacerbated by bottlenecks in the referral system, where patients often face multiple appointments with different specialists before a diagnosis is confirmed. This fragmented pathway not only adds stress for patients but also reduces the chances of successful treatment, as early intervention is critical in improving survival rates.

To tackle this issue, we propose several solutions aimed at streamlining referral pathways and ensuring quicker access to treatment:

- Direct referral from pharmacists to cancer specialists: We recommend enabling pharmacists to directly refer suspected mouth cancer cases to oncology specialists, bypassing the need for intermediate consultations with GPs, dental or ENT specialists. This would significantly reduce delays and ensure that patients can begin their treatment sooner.
- Adopting a 'one-stop clinic' model: Implementing one-stop clinics where
 patients can receive a diagnosis, imaging, and treatment plan in a single visit
 would drastically cut down on waiting times. This model, already used for some
 cancers, could be adapted for mouth cancer, reducing the current fragmented
 process.
- Improving diagnostic tools and training: By investing in enhanced diagnostic tools and upskilling GPs pharmacists and dentists in identifying early signs of mouth cancer, we can reduce the number of unnecessary referrals and ensure that those referred are fast-tracked to the correct specialist. This would also reduce the pressure on secondary care services and speed up the overall treatment process.

These changes are vital in addressing the current inefficiencies in the referral system, ensuring that mouth cancer patients receive timely and potentially life-saving treatment.

A charter created by the Oral Health Foundation

