

Cancer of head and neck: a multidisciplinary approach



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The head and neck region encompasses structures from the base of the skull to the clavicles which include nasopharynx, oropharynx, hypopharynx, larynx and oral cavity. Tobacco, alcohol, and human papilloma virus (HPV) infection are the three major risk factors for head and neck squamous cell carcinoma (HNSCC) in different countries.

The multidisciplinary management of head and neck tumors is now the accepted standard of therapy. This approach with effective integration of multiple specialties aims to achieve the desired goals of cure and functional organ preservation. Recent technological advances in surgical and radiotherapy techniques, as well as the development of novel biological agents, such as Erbitux and PD-1, coupled with tremendous clinical research activity, have provided a number of therapeutic options for patients with head and neck cancer (HNC).

In this Special Issue on Head and Neck Cancer, we organized six articles involving HNC clinical practice and research. Thyroid cancers are quite different from upper aerodigestive tract which is mostly squamous cell carcinoma. Because of their location, the thyroid glands fall within head and neck anatomic area, we also assigned two thyroid cancer studies in this issue. We hope this substantial content issue will give you a comprehensive survey of disease in this small anatomic region.

Footnote

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