NASOPHARYNGEAL CARCINOMA AND ITS DENTAL SIGNIFICANCE

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INTRODUCTION

NASOPHARYNGEAL CARCINOMA

Nasopharyngeal carcinoma (NPC) is one of the most common head and neck cancers in Malaysia, especially in the Chinese. The risk of developing NPC is 30 times greater in Chinese people than other ethnic groups. The risk is highest among people of Southeast Asian ancestry, particularly residents of Kwantung province in South China, with men at double the risk than women. Because of this, it has been reported mainly in Malaysia those of Chinese descent, many of whom have ancestors from South China. In a study in 1979, it was reported that the age-adjusted incidence rates among Chinese males and females were 16.5 and 7.2 per 100,000, among Malay males and females 2.3 and 0.7 and among Indian males, 1.0. There were no significant changes in incidence rates over the 10-year period for sex and ethnic groups, or for Chinese subethnic groups. In Chinese subethnic groups, rates were highest among Cantonese, moderate among Khek and lowest among Hokkien and Teochiu.

The ages of patients ranged from 10 to 80 years. The incidence in both sexes rose after the age of 20-29 years and reached a plateau between 40 and 49 years. No further rise was exhibited after age 60 years. More recent literatures suggested that there is an increasing incidence of NPC from the second decade of life and the peak incidence occurs in the fifth and sixth decade of life. The Chinese had the highest age-adjusted incidence rates, particularly for the age group 40-49 years, where the incidence rate was 40.1 per 100,000 for males and 14.9 for females. The average age-adjusted male/female ratio was 2.8:1.

Predisposing factors to NPC include genetic predisposition, increased size of nasopharynx in the south Chinese, smoking, working in poor ventilation, use of nasal balms or oils, herbal drugs, ingestion of salted fish, and high Epstein-Barr virus (EBV) antibody titre (especially anti-IgA). Tumours of the nasopharynx are strongly associated with EB. The predominant strain of EBV was type 1 in NPC in Asia and Mediterranean Africa and in Caucasian Americans and EBV type 2 was more prevalent in Eskimos.

Head and neck pain was an important identifying symptom of NPC.