



## What to do for Lowering the Prevalence of SCC

**Sara Pourshahidi\***

*Associated Professor of Oral and Maxillofacial Medicine, Tehran University of Medical Sciences, Tehran, Iran*

**\*Corresponding Author:** Sara Pourshahidi, Associated Professor of Oral and Maxillofacial Medicine, Tehran University of Medical Sciences, Tehran, Iran.

**Received:** July 24, 2018; **Published:** August 23, 2018

Oral cancer is a worldwide concern and its prevalence is increasing in spite of the efforts of health care providers. Squamous cell carcinoma (SCC) is the most prevalent of them and despite of several treatment methods, has a high mortality rate (as much as 50%) [1]. This reflects the importance of preventive methods among general population and specially among people who are at high risk for SCC. The first step can be increasing their information about predisposing factors and also scheduling regular screening for early diagnosis which is critical in survival rate of SCC [2]. On the other hand, development of predictive methods can help physicians to detect potential tendency to malignancy and thus can lead to more effective prevention. So studies on biomarkers of SCC in serum, saliva and also tissue markers are of high importance [3,4].

There are lesions and conditions which are not malignant but have more tendency to convert to SCC, called "pre-malignant" such as leukoplakia, erythroplakia and oral lichen planus. They can have no symptom thus may be detected in regular oral examination. Nowadays detecting these lesions in the oral cavity, clinicians should take biopsy and study them histopathologically. Detecting any cellular or tissue dysplasia, guide them to more aggressive treatment of the suspected lesions and also to close monitoring patients in order to prevent SCC. However there can be some molecular messengers prior to cellular or tissue alteration and ignoring them can lead to missing the suspicion for SCC. So confirming the predictivity of these markers and making them available as a part of management of pre-malignant lesions can lead to better prevention [5]. All these efforts are because the worldwide society need more protection against this fatal oral cancer, SCC.

### Bibliography

1. RL Siegel, *et al.* "Cancer statistics". *CA: A Cancer Journal for Clinicians* 66.1 (2016): 7-30.
2. Andisheh Tadbir A., *et al.* "Evaluation of Levels of Knowledge about Etiology and Symptoms of Oral Cancer in Southern Iran". *Asian Pacific Journal of Cancer Prevention* 14.4 (2013): 2217-2220.
3. Andisheh Tadbir A., *et al.* "Serum Level of Galectin-3 in Patients with Oral Squamous Cell Carcinoma". *Middle East Journal of Cancer* 1.2 (2010): 77-81.
4. Solomon B., *et al.* "Head and neck squamous cell carcinoma: Genomics and emerging biomarkers for immunomodulatory cancer treatments". *Seminars in Cancer Biology* (2018).
5. Davide Bartolomeo Gissi., *et al.* "Podoplanin expression as a predictive marker of dysplasia in oral leukoplakia". *Journal of Cranio-Maxillo-Facial Surgery* 46.5 (2018): 759-764.

**Volume 2 Issue 9 September 2018**

© All rights are reserved by Sara Pourshahidi.