[Value of panendoscopy in assessment of mouth cavity, pharyngeal and laryngeal cancers]

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The concept of multiple squamous cell carcinoma in the region of the upper aerodigestive tract was first described over 100 years ago by Billroth. The aim of our study was to assess the incidence of synchronous and metachronous second primary tumours and refine the role of panendoscopy in diagnosing them. The charts of 358 patients presenting for initial treatment of primary squamous cell carcinoma of the upper aerodigestive tract between January 1990 and December 1995 were reviewed. The incidence of second primary tumours was 16.2%, 6.4% being synchronous and 9.8% metachronous. In only 3.1% of all patients was a synchronous tumour clinically silent and only revealed by panendoscopy. Synchronous tumours were most likely to be located in the oral cavity, pharynx or larynx (61%), whereas metachronous second primary tumours were most likely to be located in the lung (57%). Though the incidence of synchronous second primary tumours revealed by routine panendoscopy is low (3%), we still recommend this investigation because it is often necessary for exact assessment of the first primary tumour. Further, it is ideal for training in the use of rigid endoscopy. In our opinion panendoscopy involves minimal time, cost and morbidity.

type: journal paper/review (Translation2::getLang(): unknown language "". Use Translation2::setLang() to set a default language.)
date of publishing: 2000
journal title: Schweiz Med Wochenschr Suppl (116)
ISSN print: 0250-5525
pages: 15S-17S