



PerioConnect

Champlain Periodontal's patient newsletter

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Welcome to our newsletter! Please enjoy some oral health information and updates about our office.

ORAL CANCER: KNOW YOUR RISK

Mouth cancer, or oral cancer, can occur anywhere in the mouth: on the surface of the tongue, the lips, inside the cheek, on the gums, in the roof and floor of the mouth, in the tonsils, and in the salivary glands. According to the Oral Cancer Foundation 49,750 Americans were expected to receive a diagnosis of oral or pharyngeal (the area of the throat at the back of the mouth) cancer in 2017, and about 9,750 deaths were predicted. Oral cancer kills one person per hour, 24 per day. Oral cancer mostly happens after the age of 40, and the risk is more than twice as high in men as it is in women.

In the early stages, there are often no signs or symptoms, but everyone should be watchful for the potential signs and be screened at each dental appointment. Having any of these symptoms does not mean that a person has oral cancer, but it is important to tell your doctor or dentist if the symptoms are present.

Signs and symptoms include:

- Red or white patches on the lining of the mouth or tongue
- Mouth ulcers or sores that do not heal
- Swelling that persists for over 3 weeks
- A lump or thickening of the skin or lining of the mouth
- Pain when swallowing or difficulty swallowing
- Jaw pain or stiffness
- Sore throat or pain in the neck
- A sensation that something is stuck in the throat
- Painful tongue
- Hoarse voice

There are several risk factors for oral cancer. Tobacco and alcohol use are very prominent risk factors. Smokers are three times more likely than nonsmokers to develop oral cancer. Combining alcohol use and smoking increases the risk. People who smoke and drink alcohol have up to 30 times higher risk than those who do not smoke and drink. Other risk factors include; ultraviolet exposure on the lips, from the sun or sunbeds, gastro-esophageal reflux disease and human papilloma virus infection or HPV.

HPV is one of the most common virus groups in the world, with over 100 different variations of the virus. Oral HPV is a manifestation of the HPV virus in the mouth, and is primarily found in the oropharyngeal complex, the back of the mouth and throat. .

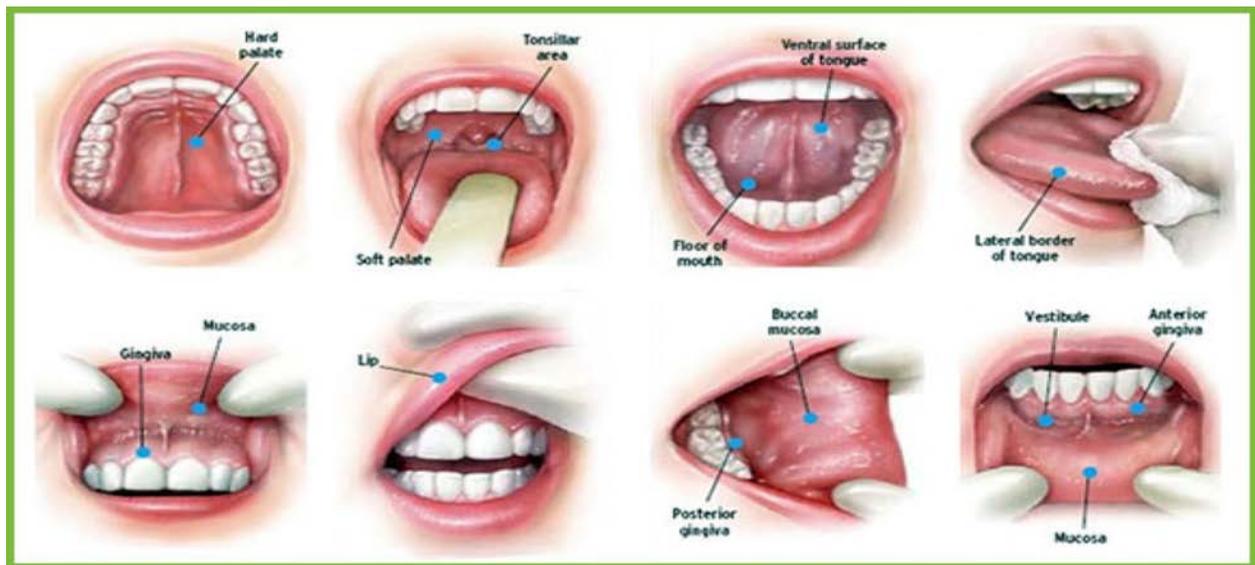
The variations are identified first by their DNA and second, by their tendency to develop malignant tumors. HPV 16 and HPV 18 are strongly associated with malignant oral cancer lesions. According to the Centers for Disease Control, 70% of

the oropharyngeal cancers are caused by HPV. Early detection and identification of the presence or absence of oral HPV is important, as early oral HPV infections do not typically cause any clinical signs or symptoms. If detected early, oral cancers caused by HPV are predictably and easily treated.

It is difficult to detect HPV-related oral cancers as the area commonly affected is far back in the throat. Even with magnified glasses and directed light, it is very difficult for a dental clinician to see any suspicious lesions in this area. Many times, these lesions are only visible with an endoscopic procedure performed by an ENT. However, there is a test that can be performed in the dental office that will determine which, if any, variations of HPV are present.

In our office we offer the OraRisk[®]HPV test. This test uses the patient's saliva to determine if HPV is present. The patient gargles with a sterile saline solution for 30 seconds. The saliva is collected and sent overnight to a laboratory. The patient will have a full report in less than a week. OraRisk[®]HPV enables the clinician to establish increased risk for oral cancer and determine appropriate referral and monitoring. If you would like more information about the OraRisk[®]HPV test, please tell us at your next visit or research them online at <https://www.oraldna.com/oral-hpv-testing.html>. For more information about oral cancer visit the Oral Cancer Foundation online at <http://oralcancerfoundation.org/facts/>.

Do your own cancer screening at home. In front of a mirror, in a well-lit room, inspect the tongue, cheeks and gum tissue. Take note of any new lumps or sores. Pay attention to the color of any areas of irritation. Then watch these areas over the next week or two to see if the sores have healed. We are always here to check any areas you are concerned about.



We appreciate the many compliments we're given about the quality of our cleanings. We welcome your family and friends and would be delighted to care for them as well. Patients can be self referred or referred by an existing patient, even if they don't have periodontal disease. If you think a friend or family member would benefit from the care in our office, they can call to set up an appointment.

All about Sarah!

Sarah joined the team at Champlain Periodontal in November 2015. She is a graduate of the Essex Center for Technology's Dental Assisting program and Vermont Technical College's Dental Hygiene program. Sarah has extensive experience in specialty offices, including orthodontics and prosthodontics. A native Vermonter, you can find Sarah showing off her skiing skills all winter. Sarah's high energy, strong work ethic and charming personality has made her a valuable addition to our office. We are so happy she found us!



Sarah's Roasted Fall Veggie Salad

For the Salad:

- 2 cups Butternut Squash, peeled and chopped in 1/2" cubes (approx. 1 small Butternut Squash)
- 2 small Red Beets, chopped into 1/2" cubes
- 1 medium Bosc Pear, sliced
- 1/2 cup chopped Pecans
- 1/3 cup Golden Raisins
- 6 1/2 cups of Spring Green Mix (approx. 10 ounces)
- 1 teaspoon Chia Seeds

For the Maple Orange Cinnamon Dressing:

- 1 teaspoon orange zest
- 1/3 cup fresh orange juice
- 1 tablespoon balsamic vinegar
- 1 tablespoon pure maple syrup
- 3 tablespoons olive oil
- 1/4 teaspoon ground cinnamon
- 1/8 teaspoon salt

Directions

Preheat the oven to 400 degrees F.

Peel the butternut squash and either slice it into 1/2" slices or dice it into 1/2" cubes (or both). Lay the butternut squash on a baking sheet and drizzle enough olive oil over the pieces to coat them well. Sprinkle the butternut squash with salt.

Peel and chop the beets and lay the pieces on a large piece of foil. Fold the foil, completely covering the beets, creating a foil packet. Place this packet on the baking sheet next to the butternut squash.

Place the baking sheet in the oven and roast the vegetables for 50 minutes, or until the butternut squash is browned and crispy. Remove from the oven and allow the vegetables to cool.

In a small bowl, whisk together all the ingredients for the dressing.

In a large serving bowl, add the remaining salad ingredients and the roasted vegetables.