INTRODUCTION

Oropharyngeal cancers are the most common cancers of head neck region, they are placed amongst the top ten malignancies globally and around 40% of all the cancers in South and South East Asia. Patient’s personal behaviour impacts causality more than the environmental factors in the pathology and prognosis of this particular cancer. In our country risk factors are based on poor infrastructure of the health care system, illiteracy, poor socioeconomic status, Betel nut and quid, smokeless and smoke tobacco. We recommend that an active precautionary approach is required to restrict the rising incidence in the oral cancers, particularly due to culturally related risk habits and reluctance to seek early healthcare amongst our people. Primary prevention is the need of time.

Keywords: Oro Pharyngeal Cancers; Pakistani Population; Personal Reluctance; Cultural Risk Factors; Primary Prevention

VIEW POINT

PERSPECTIVE ON HEALTH SEEKING BEHAVIOR OF PATIENTS WITH OROPHARYNGEAL CANCERS FROM A PAKISTANI BACKGROUND

Maria Shoaib, Syed Ahsanuddin Ahmed*, Syed Muhammad Waqar, Zainab Abbasi**, Farah Hafiz Yusuf

Oropharyngeal cancers are the most common cancers of head neck region, they are placed amongst the top ten malignancies globally and around 40% of all the cancers in South and South East Asia. Patient’s personal behaviour impacts causality more than the environmental factors in the pathology and prognosis of this particular cancer. In our country risk factors are based on poor infrastructure of the health care system, illiteracy, poor socioeconomic status, Betel nut and quid, smokeless and smoke tobacco. We recommend that an active precautionary approach is required to restrict the rising incidence in the oral cancers, particularly due to culturally related risk habits and reluctance to seek early healthcare amongst our people. Primary prevention is the need of time.

Keywords: Oro Pharyngeal Cancers; Pakistani Population; Personal Reluctance; Cultural Risk Factors; Primary Prevention

Patients usually tend to visit a primary general practitioner doctor, Hakeems (Homeopathic/Herbal practitioners) or spiritual healers with initial symptoms with the first time they notice any oral lesion. This can be an affirmative approach if premalignant lesions are vigilantly identified and this will reduce patients’ postponement. Hence, to nip in the bud competent training of the primary healthcare providers is crucial and similarly impactful as awareness of the general population towards the diseases’ initial presentation and risk factors. Furthermore, counselling services
and seminars should be arranged by the physicians and healthcare agencies on identified carcinogens, unhealthy habits, addictions for eradication of the risk factors.11

Although there has been much positive to account, since cigarettes/tobacco is recognized as a chief carcinogen, anti-smoking campaigns that have been conducted by the government agencies and nongovernmental organizations have played a far reaching preventive role in reducing the incidence of oral cancer. It is significant to state that the Government of Pakistan have made it imperative for the cigarettes selling companies to print pictures of oral cancer lesion on their product box along with a health warning. Likewise, we need awareness on association of betel quid/nut, smoke and smokeless Tobacco addiction with the increase of precancerous conditions and oral cancerous lesions. Agencies should work not only on Smoking/tobacco cessation but also on betel quid cessation and other forms of tobacco consumptions.11-13

If such modifiable determinants would be worked upon, we can bring out change and improve the quality of life by eliminating social inequity in terms of healthcare. When we will be able to target the populations at risk, early screening, psychosocial support, access to useful health information be provided. This will enable public to take timely healthcare decision shortening time lag between the diagnosis and cure, also aid in reducing high morbidity and mortality due to this cancer.14

Public health education and knowledge regarding oral malignancies, lack of awareness of the prevailing risk factors and causative agents, wrong perceptions and misinformation correlates with this cancer prevalence.15 To conclude we recommend that an active precautionary approach is required to restrict the rising incidence in the oral cancers, particularly due to culturally related risk habits and reluctance to seek early healthcare amongst our people. Primary prevention is the need of time.

Disclosure: The authors exhibit no conflicts of interest.

REFERENCES

Address for Correspondence:
Maria Shoaib, Dow Medical College, Dow University of Health Sciences, Karachi-Pakistan
Cell: +92 333 328 9909
Email: syedamariashoaib@gmail.com

Received: 28 October, 2016 Revised: - Accepted: 4 December, 2016