J Oral Med Oral Surg 2021;27:48
https://doi.org/10.1051/mbcb/2021032

https://www.jomos.org

JOMOS
Journal of Oral Medicine and Oral Surgery

Letter to the Editor

Could Tele-Oral medicine help in early diagnosis of oral cancer?

Jitendra Chawla, Navaneeth Yerragudi*

Department of Dentistry, All India Institute of Medical Sciences, Mangalagiri, Guntur District 522503, Andhra Pradesh, India

(Received: 28 August 2021, accepted: 31 August 2021)

Dear Editor,

The importance of regular dental visits in the detection of oral and pharyngeal cancers cannot be over emphasized. Regular dental visits facilitate earlier detection of oral cancer as it involves assessment of risk factors, comprehensive examination of oral cavity and identifying any oral potentially malignant lesions and their follow up [1].

The recent corona virus pandemic and stay at home guidelines have hampered access to health care across the world. Awareness about transmission of the virus by oral route has resulted in patients avoiding their regular dental visits. Social distancing norms have been enforced to prevent the transmission of virus. A comprehensive examination of oral cavity is not possible to be performed while maintaining the required distance. This has prompted several centres to restrict their face to face out-patient services for symptomatic patients alone.

Failure to provide face to face consultations patients with non-emergent symptoms for a long period of time has led to the increasing use of telemedicine services for consultation for non-emergent complaints, routine check-ups and follow-up visits. Use of telemedicine consultations offers several benefits. It allows to provide a questionnaire to obtain history, educate about and evaluate high risk factors, provide educational material in the form of leaflets, videos for oral self examination [2], image sharing and video calls enable screening of oral mucosal lesions [3], and thus decide which patient requires an urgent in-person visit at the clinic. Also, information regarding risk factors for oral cancer may be provided in the form of audio clips or podcasts or a dialler tone that plays the audio clip [4].

Telemedicine services also help to provide increase the reach [5]. Patients who previously are unable to reach the hospital for a face-to-face consultation due to reasons like accessibility, hesitation *etc*., may also be willing to use telemedicine services. Further, mobile applications may be developed which enable patient to input their data and evaluate their risk. The mobile applications may also provide information in the form of pictures, posters, documents, videos *etc*, and provide to schedule follow up visits. Multidisciplinary care can also be offered in the form of group video calls for patients who require the same.

Therefore, it is reasonable to conclude that use of telemedicine services can be of great benefit in the continued early diagnosis and prevention of oral and pharyngeal cancer. We therefore recommend continued provision of tele-oral medicine services even after the resumption of regular services.

References

1. Langevin SM, Michaud DS, Eliot M, Peters ES, McClean MD, Kelsey KT. Regular dental visits are associated with earlier stage at diagnosis for oral and pharyngeal cancer. Cancer Causes Control 2012;23:1821–9.
2. Motta ACF, Rodrigues KRDH. Could we benefit from oral self-examination during the COVID-19 pandemic? Oral Oncol 2020;107:104840.
3. Carrard VC, Roxo Gonçalves M, Rodriguez Strey J, Pilz C, Martins M, Martins MD, Schmitz CA, Dal Moro RG, D'Ávila OP, Rados D, Harzheim E, Gonçalves MR. Telediagnosis of oral lesions in primary care: the EstomatoNet Program. Oral Dis 2018;24:1012–19.
4. https://www.cochrane.org/news/podcast-methods-help-people-quit-smoking
5. Lopez AM, Lam K, Thota R. Barriers and facilitators to telemedicine: can you hear me now? Am Soc Clin Oncol Educ Book 2021;41:25–36.

* Correspondence: navaneethsrikrishna@gmail.com