Oral Health Newsletter July 2026
World Head and Neck Cancer Awareness Day – 27 July

Head and Neck Cancers: Spotting the Signs Early

Head and neck cancer is a term used for a group of cancers that can develop in the mouth, throat, voice box, nose, sinuses and salivary glands.

Mouth cancer (also called oral cancer) is the most common type of head and neck cancer. It can affect the tongue, gums, lips, inside of the cheeks, roof of the mouth, and floor of the mouth under the tongue.

Early detection is important because treatment is often more successful when cancer is found early. As care staff may support residents with daily mouth care, they are well placed to notice changes and encourage residents to seek advice.

Who is at higher risk?

Anyone can develop mouth cancer, but the risk increases with age. Other risk factors include:

- Smoking tobacco, including cigarettes, cigars and pipes.
- Drinking alcohol, particularly over long periods.
- Smoking and drinking alcohol together, which increases the risk further.
- Infection with Human Papillomavirus (HPV).

Importantly, some people develop mouth cancer without having any known risk factors.

What should care staff look for?

During routine mouth care or when supporting residents with eating, drinking or personal care, look out for:

Changes inside the mouth

An ulcer that does not heal.

- Red patches.
- White patches.
- A lump, swelling or thickened area in the mouth or on the lips.
- Unexplained bleeding.

Changes affecting eating and speaking

- Difficulty chewing or swallowing.
- Difficulty speaking.
- A hoarse voice that does not improve.
- A persistent sore tongue or sore throat.

Changes around the head and neck

- A lump in the neck.
- Swelling of the jaw or face.
- Unexplained weight loss.

The "3-Week Rule" - If it lasts more than 3 weeks, get it checked.

Residents should be encouraged to see a GP or dentist if they have:

- A mouth ulcer that has not healed after 3 weeks
- A red or white patch in the mouth lasting more than 3 weeks
- A lump in the mouth, lip, neck or throat that does not go away within 3 weeks
- Persistent mouth pain, swallowing difficulties, speech changes or hoarseness lasting longer than 3 weeks

Most of these symptoms are caused by conditions other than cancer, but they should never be ignored. Getting checked early can make a significant difference if cancer is present.

Supporting Residents

Care staff can help by:

- Encouraging regular toothbrushing and mouth care.
- Being alert to changes during daily mouth care.
- Reporting concerns promptly according to local procedures.
- Encouraging residents to attend routine dental appointments where possible.
- Supporting residents to access a GP or dentist if symptoms persist.

Key Message - Look. Check. Act.

A mouth ulcer, red or white patch, or lump that lasts longer than 3 weeks should always be checked by a dentist or GP.

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Useful links

Mouth Cancer Symptoms (NHS)

https://www.nhs.uk/conditions/mouth-cancer/symptoms/

Mouth Cancer Overview (NHS)

https://www.nhs.uk/conditions/mouth-cancer/

Mouth and Oropharyngeal Cancer

https://www.cancerresearchuk.org/about-cancer/mouth-cancer

Risks and Causes of Mouth and Oropharyngeal Cancer

https://www.cancerresearchuk.org/about-cancer/mouth-cancer/risks-causes

Signs and Symptoms of Head and Neck Cancer

https://www.macmillan.org.uk/cancer-information-and-support/head-and-neck-cancer/signs-and-symptoms-of-head-and-neck-cancer

Mouth and Throat Cancers

https://cancermatterswessex.nhs.uk/mouth-and-throat-cancers/

The State of Mouth Cancer UK Report

https://www.dentalhealth.org/the-state-of-mouth-cancer-uk-report-2024