A Discussion on the Need of Early Detection for Oral Cancer

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Abstract*: Oral cancer (OC) is an uncommon illness in Western countries, but it is one of the most common in certain high-risk areas of the world. It is a cancer that is often preventable since the majority of the major risk factors drinking, smoking, and eating betel nut—are behaviors that increase the likelihood of the sickness. Early diagnosis is essential due to the high fatality rate linked to this illness. The initial stages in both preventive and diagnostic prediction are the discovery of locally stimulating chronic inflammation and potentially malignant lesions of the oral mucosa. It is essential to locate and treat each lesion as soon as possible because of this. Oral mucosal lesions may be clinically assessed to identify up to 99% of mouth cancers and premalignancies.[1] The World Health Organization recommends a biopsy for any problematic lesion that remains after it has been detected and the local causes of irritation have been eliminated. Surgical biopsy remains the gold standard for diagnosing oral cancer. To help physicians with diagnosis, other technologies have been developed and studied. Two examples of these are toluidine blue vital staining and autofluorescence imaging. The fatality rate from oral cancer may soon decline as a result of other strategies, such as the identification of salivary indications of advancement.*

Keywords: Oral Cancer, Precancer, Early Diagnosis, Relevance

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