

Special Issue

HNSCC Chemotherapy: What We Know and New Perspectives

Message from the Guest Editor

Head and neck squamous cell carcinomas (HNSCCs) develop from the mucosal epithelium in the oral cavity, pharynx and larynx, and are the most common malignancies that arise in the head and neck. The burden of HNSCC varies across countries/regions and has generally been correlated with exposure to tobacco-derived carcinogens, excessive alcohol consumption or both. No screening strategy has proved to be effective, and careful physical examination remains the primary approach for early detection. Although a proportion of oral premalignant lesions, which present as leukoplakia (white patches) or erythroplakia (red patches), progress to invasive cancer, the majority of patients present with advanced-stage HNSCC without a clinical history of a premalignancy. HNSCC of the oral cavity is generally treated with surgical resection, followed by adjuvant radiation or chemotherapy plus radiation (known as chemoradiation or CRT) depending on the disease stage.

Guest Editor

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Editor-in-Chief

Prof. Dr. Amélia Pilar Rauter

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