



BACK IN THE SADDLE

It takes an expert medical team to care for patients with challenging head and neck cancers.

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When John Tremblay underwent surgery at UC Irvine Medical Center to remove a rapidly growing cancer from his tongue, the five-hour wait felt more like 48 hours to his wife, Connie, and son, John Jr. That was only part of the ordeal. A second surgeon took over to reconstruct the tongue, using tissue taken from Tremblay's left arm. That operation took six more hours.

Connie had complete confidence in the UC Irvine Health doctors, yet still she worried. "There was a constant fear of 'What if?'" she recalls.

She need not have worried. The surgery, which took place in September 2016, was a success. Dr. William Armstrong, chair of the Department of Otolaryngology — Head and Neck Surgery, and his colleague, Dr. Tjason Tjoa, a specialist in head and neck cancer surgery and microvascular reconstruction, set the 51-year-old father of three from Cypress on a path to recovery.

Although his doctors are pleased that Tremblay is cancer-free and recovering faster than many, that doesn't mean the ordeal has been easy. He was hospitalized for two weeks and was initially dependent on a feeding tube and a tracheostomy tube in his neck for breathing.

"Tumors in the head and neck are very personal and can be very debilitating," Armstrong says. "They affect a lot of what makes us human — speech, swallowing, breathing and sometimes taste, smell and appearance."

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The difficulty of these cancers — together with the effects of surgery, radiation and chemotherapy — require the expertise of a multidisciplinary team that offers many services beyond just surgery, chemotherapy and radiation. At the UC Irvine Health Chao Family Comprehensive Cancer Center, leading-edge care is delivered under one roof by a team that includes anesthesiologists, medical oncologists, otolaryngologists, pathologists, plastic and reconstructive surgeons, radiation oncologists, radiologists, dental surgeons, speech pathologists, experts in voice and swallowing, as well as dietitians, case managers and social workers.

While head and neck cancers represent only 4 percent of all cancers in the United States — some 65,000 — the incidence is increasing. Most head and neck cancers begin in the squamous cells that line the moist, mucosal surfaces of the mouth, nose and throat. Removal of such tumors often causes changes in oral tissue that leads to dental problems and difficulties eating and swallowing. The pain resulting from treatment can be severe.

UC Irvine Health gives patients whatever help they need to alleviate discomfort and preserve health. Prior to treatment, patients may be referred to a dentist for preventive care and to be fitted for mouth guards that protect the teeth from radiation.

During cancer treatment and recovery, specialists can help with speech and nutritional concerns. Physical therapy is sometimes recommended and social workers help coordinate care.

"With a lot of state-of-the-art-cancer care, we're giving very advanced and sometimes physically intensive treatments," Armstrong says. "Having the ancillary services in one place allows people to get through the treatment, to get more effective treatment and ultimately have better outcomes."

Keeping patients and families informed and supported is part of the package of care. "Cancer diagnoses open up a huge box of questions for patients and their families, such as how it happens, what the prognosis is, what surgery entails and what to expect from radiation and chemotherapy," Tjoa says. "We want to provide as much information as possible."



John Tremblay, left, and Dr. Tjason Tjoa finished strong at the UCI Anti-Cancer Challenge: Cycle & Run for the Cures.

That's why Tjoa is using iBook technology to develop educational videos and interactive diagrams about head and neck cancers and surgeries. He aims to make the materials widely available on the internet within a year. Early diagnosis and prevention of head and neck tumors is also a priority, Tjoa says. At least 75 percent of head and neck cancers are caused by long-term tobacco and alcohol use. Human papillomavirus (HPV) infection, which is known to cause cervical and anal cancer, is also a significant cause of head and neck cancer. To prevent these cancers, the U.S. Centers for Disease Control and Prevention recommends that boys and girls receive HPV vaccinations before they become sexually active — at age 11 or 12 (or as young as 9).

A brick mason with his own business, Tremblay has undergone physical therapy in order to return to work. Just four months after his surgery, the avid bicycle rider was back in the saddle. In June, he rode in the inaugural UC Irvine Health Anti-Cancer Challenge: Cycle & Run for the Cures. And his doctor, Tjoa, joined him.

"We just did 32 miles," says Tremblay, who rode 75 miles the month before to support pediatric cancer research in his seventh Tour of Long Beach. "Dr. Tjoa became a bike rider in this challenge. I'm proud of him." ■