

Association of impaired glucose tolerance with oral cancer: A hospital based case control study

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Malignant neoplasm is a major cause of death in developed countries, and its incidence continues to grow, placing a heavy burden on the community. Diabetes mellitus is a serious and leading health problem worldwide and is associated with severe acute and chronic complications that negatively influence both the quality of life and survival of affected persons. Growing epidemiologic evidence suggests that people with diabetes are at significantly greater risk for cancer in general as well as for specific types of cancer, such as cancers of the breast, liver, pancreas, colon, rectum, and endometrium. Recent studies demonstrated that glucose intolerance was associated with a higher risk of oral cancer death, beginning in the prediabetic range of glucose intolerance. However, few population-based studies, especially in Asian populations, have addressed these issues or have estimated glucose intolerance status. The purpose of this study was to investigate whether prediabetes and diabetes defined by means of a 75-g oral glucose tolerance test were as we undertook this study with the aim of finding out an association between impaired glucosetolerance and oral cancer along with finding out prevalence of other risk factors for oral cancer. 45 cases and 45 controls were selected for the study. Oral glucose tolerance was performed on subjects who satisfied inclusion criteria and were willing to sign informed consent form. Fifty three percent of the cases had abnormal glucose tolerance as compared to thirty one percent of the controls. It was statistically significant with a p value of 0. 032. To conclude, hyperglycemia (which includes IFG, IGT and diabetes) increase the risk of oral cancer two folds, however impaired glucose tolerance alone as defined by ADA does not appear to play a role. There was a predisposition of oral cancer in males. Alcohol consumption did not show a significant difference in the case and the control patients. The associated p value was 0. 067. Tobacco consumption by means of smoking or chewing was inadvertently present in fifty eight percent of the cases compared to thirty six percent of the controls. It was statistically with a p value of 0. 034. Hence tobacco consumption significantly increases the risk of oral cancer. Simultaneous consumption of tobacco and alcohol also predisposes to oral cancer associated with overall and site-specific cancer mortality in oral cancer.

Biography

Nandita Shenoy did her MDS in Oral Medicine and Radiology from Manipal University. Presently serving as Reader in Manipal College of Dental sciences, Mangalore. She has more than 25 publications in National and International Journals and is also serving as an editorial board member of repute. Her field of interest is Oral Cancer and Cone Beam Computed Tomography. She is certified in ISO 9001, EMS 14001 and in Bioethics.

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