

P-56 - ALCOHOL AND NEOPLASIA OROPHARYNGEAL: A BAD COMBINATION

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Introduction: It is well known that alcohol consumption increases the risk for oropharyngeal malignancy. However, we have no systematic practice of detection and prevention of drug consumption by ORL professionals.

Objectives:

- identify alcohol use in patients with oropharyngeal neoplasia and first-line approach of problematic drinking by ORL professionals.
- identify the level of anxiety and depression

Material and method: Cross-sectional study. 191 cancer patients treated sequentially in the Clinic Hospital (Barcelona, Spain) during two months by clinical interview, AUDIT, CAGE and Hamilton Depression Scale.

Results:

- 89% of the sample are long time smokers (more than 25 yrs) but 85% of them stop smoking once they are diagnosed with cancer.
- 85% consume alcohol out of whom 39% drink at risk. 12% of them persist with risky drinking after diagnosis.
- Only in 42% the doctor recommends to reduce or stop alcohol consumption. There is a statistically significant correlation between the existence of such a recommendation and the variation in consumption.
- Better prediction of risky drinking by Audit C than by Audit.
- Positive correlation between anxiety and newly diagnosed cancer,

Discussion and conclusions:

- It is important to perform an alcohol screening and to give medical advice to reduce alcohol consumption.
- To be conscious of the anxiety levels of newly diagnosed patients.