

# WATCH OUT FOR THAT BUMP

**Dr Sathesh Balasundram,** Consultant Oral and Maxillofacial Surgeon in Subang Jaya Medical Centre explains the tumours and trauma affecting the oral and facial regions, and the available treatments.

**N**ot long ago a news broke that Malaysia had its youngest mouth cancer patient, a 24-year-old university student. By the time doctors discovered what the young man had, the painless ulcer had already entered Stage 3, forcing three-quarters of his tongue to be surgically removed.

Despite the patient's young age, this is a typical scenario of oral cancer patients being diagnosed at a later stage, making treatment and recovery

more complicated. It is mainly due to the early symptoms of oral cancer like ulcers, sore throat, difficulty chewing, and tenderness in the mouth being disregarded as arbitrary issues, although they could be symptoms of more fatal diseases.

## COMMON TUMOURS

Dr Sathesh also cautions patients to look out for bone-related tumours in the oral cavity, which often present in the form of a bump in the gum.

"The bone-derived tumours are classified into two, benign and malignant. The more common form is benign, which often originate from the same cell layers that form the tooth and are called odontogenic tumour. They occur mainly due to the size of the jaw that is too small, causing insufficient space for the tooth to erupt. In that scenario the tooth will stay stationary and the layer of tissue that covers the tooth before it erupts starts to form a cyst. As the cyst grows, the bone that is holding the tooth gets eaten away, causing fracture when the bone becomes too thin," explains Dr Sathesh.

Another common benign tumour is the radicular cyst that presents on a patient's tooth due to a trauma or infection that may have occurred many years ago.

Usually the tooth's colour will change, and it will be shaky, which an X-ray will reveal a large bony cavity indicative of a cyst.

Meanwhile, benign tumours or cysts that have been left untreated for very long or not removed completely may turn malignant, requiring more aggressive subsequent treatments.

"As for soft tissue tumours in the oral cavity, the most common cases nowadays are cancers of tongue, cheek, lip, and even gum. Unfortunately, there is a lack of awareness, as some people are not aware that cancer can occur in the mouth as well. If a general practitioner realises what the patient is presenting earlier, we can catch the cancer in an earlier stage. We also have patients above 40 years old who have had family or friends with cancer and are a lot more perceptive to changes, as they get even the slightest bump checked as soon as possible," says Dr Sathesh.

## CATCHING IT EARLY

The general rule of thumb for catching cancer in the oral region early is if an ulcer is painless, bleeds, grows slowly and does not go away within two weeks. Generally, ulcers will be painful and slowly placate within 10-14 days. In addition, if there is a random numbness that spreads

in your mouth, it could be indicative of something more insidious as well.

"Avoid relying on antibiotics for a prolonged period of time and get the problem area checked immediately," advises Dr Sathesh.

Most common risk factors for malignant tumours in the oral region are smoking and alcohol consumption over a long period of time. Chewing of areca nuts was a prominent aetiology in the past but has since dissipated. Nonetheless, a quickly rising cause of oral cancer among younger patients is the sexually transmitted Human Papilloma Virus (HPV), which a vaccination could help to protect against.

## TYPES OF TRAUMAS

Besides tumours, the oral and maxillofacial regions are also susceptible to various traumas that equally need the attention of an oral and maxillofacial surgeon.

"The most common cause for such trauma in Malaysia is road traffic accidents or also known as motor vehicle accident (MVA). It's often due to the impact of the accidents that causes lacerations on the lip or tongue or bone fractures. It's

followed by interpersonal violent assault injuries and falls, which is more common among the elderly population. And of course, there's sports injuries," Dr Sathesh elaborates.

As for the treatment for tumours and trauma, much care is given on the rehabilitation of the oral and maxillofacial regions to ensure patients can attain the best quality of life, both functionally and aesthetically.

"For serious cases, at Ramsay Sime Darby hospitals we have multidisciplinary team (MDT) meeting with various specialists before relaying the best options to the patients. Some patients will choose not to have surgery because they do not want invasive surgeries on their face, while others will ask us to remove a tumour no matter the method. It is important to take note that surgery is the one procedure that could possibly cure the patient of cancer on a single

day, as other treatments like radiotherapy would need multiple sessions for full recovery. Besides we have reached new heights in reconstructive surgery as well as 3D modelling that allows us to assure the best outcome for the patient," says Dr Sathesh. ©



Dr Sathesh Balasundram



## Subang Jaya Medical Centre

Jalan SS 12/1A, 47500 Subang Jaya, Selangor Darul Ehsan, Malaysia



+603 5639 1212



E: [healthcare@ramsaysimedarbyhealth.com](mailto:healthcare@ramsaysimedarbyhealth.com)



[www.subangjayamedicalcentre.com](http://www.subangjayamedicalcentre.com)

Leading healthcare  
at your doorstep.  
Trusted since 1985