Long-term functional outcomes following transoral robotic surgery (TORS)
for Oropharyngeal (OPC) head and neck cancer.

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Poster (although happy to do presentation if needed)

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Abstract

Background. When treating oropharyngeal cancer, transoral robotic surgery is reported to reduce functional morbidity with respect to swallowing, compared to traditional 'organ-preserving techniques'.

Aims: To determine if the favorable short-term advantages of TORS (reported in the literature) are maintained at 12 months post-treatment, whilst also exploring the impact of other relevant extraneous variables on long-term swallowing outcomes .

Methods. A retrospective cohort study comparing baseline functional swallowing outcomes (MD Anderson Dysphagia Inventory, Performance Status Scale and Water Swallow Test) with 12 months post-treatment scores.

Results. Data from 28 patients was analysed*.* Twelve month MDADI and WST scores did not differ significantly to baseline, whereas, diet normalcy (PSS) scores were significantly adversely altered. Multiple regression analysis identified adjunctive therapy to be strongly predictive of outcome.

Conclusions. Long-term functional swallowing outcomes of transoral robotic surgery compare favourably with previous findings with the exception of PSS. This may be explained by factors other than the treatment modality. Larger scale studies are required to confirm these findings.