

SUSPECTED ORAL CANCER: A CLINICAL DIAGNOSTIC DECISIONAL TREE

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Aim: biopsy is the gold standard method for the diagnosis of oral cancer and it is the only definitive way to confirm its presence. It also helps with typing and staging cancer, crucial steps to define an appropriate treatment plan. This research aims to evaluate if frozen section biopsy, which provides an immediate diagnosis, can be more effective in the early diagnosis of oral cancer compared to formalin biopsy, which requires longer waiting times to obtain a definitive diagnosis. Besides, this study defines a decisional tree to choose the correct type of biopsy. Timing for oral cancer diagnosis has fundamental importance: diagnostic delay can influence the effectiveness of treatment and the patient's survival.

Methods: 10 patients with suspected oral carcinoma underwent two types of biopsies: one frozen section biopsy and

one in formalin. 20 patients underwent a single biopsy in formalin. Patients who underwent a rapid histological examination biopsy received their diagnosis on the same day and were sent to the oncology departments to continue their diagnostic and therapeutic pathway; while patients who underwent a single formalin-fixed biopsy received their diagnosis on average after 20 days.

Results: the results show that performing a rapid histological examination biopsy could expedite the diagnosis and decrease diagnostic delay for patients with oral carcinoma.

Conclusions: although frozen section biopsy is not considered the definitive method to diagnose oral cancer, it can be utilized to provide a faster diagnosis and reduce diagnostic delay, improving the patient's prognosis.