Rising prevalence of head and neck cancer risk factors among Nigerian adolescents: A call for school-based intervention programmes

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Dear Editor,

Head and neck cancer (HNC) is the sixth most common cause of cancer-related deaths worldwide, claiming the lives of about 0.3 million people, both old and young, on a yearly basis¹,². Pertinently, the majority of HNC victims are residents of developing countries, including Nigeria³.

The three major HNC risk factors are tobacco use, alcohol drinking, and oral sex³. Over the years, research has shown that the prevalence rate of HNC risk factors among Nigerian adolescents is increasing in magnitude⁴-⁶. Based on recent scientific reports, the lifetime prevalence rates of tobacco use, alcohol drinking, and oral sex among adolescents living in some major Nigerian cities are as high as 32.5%, 66%, and 65.5%, respectively⁴-⁶. These alarming prevalence rates are issues of public health concern.

There are numerous on-going school-based adolescent health intervention programmes in Nigeria; however, most of them are targeted at reproductive health⁷. Meanwhile, only very little attention is paid to educating Nigerian adolescents on HNC disease⁷. In a recent study by Kanmodi et al.⁷, it was reported that a school-based HNC education programme is a very workable tool that can be used to create awareness on HNC and promote healthy behaviours. Hence, we recommend that massive school-based HNC education programmes should be used to stem the rising prevalence of HNC risk factors among school-going adolescents in Nigeria. In these school-based programmes, HNC education should not be confined to avoidance of HNC risk factors alone but also cover how to stem the practice of such risk factors among those that habitually engage in such risk factors. Very importantly, it is highly recommended that tobacco cessation counselling programmes and sex education (with equal attention on human papillomavirus vaccination) programmes should be included as part of these school-based HNC education programmes⁸.

REFERENCES