2024 AHNS Cancer Prevention Service Community Service Awards Application

Background:

Health disparities (i.e., differences in health outcomes based on sociodemographic variables) have been associated with worse outcomes for differing populations. Otolaryngology, specifically head and neck cancer, is not immune to the effects of health disparities. Many studies have been published recently highlighting the disparities within head and neck cancer and the need for further outreach. For example, it has been well documented that African American patients have increased mortality from head and neck cancers despite being diagnosed at younger ages. Other notable disparities leading to worse outcomes in head and neck cancer patients include those who are socioeconomically disadvantaged and male. Poorer health outcomes are repeatedly related to unequal access to care as well as racism and the implicit bias of health care professionals. There has been a call to action since the recent emphasis on head and neck disparities research. Attempts have been made to meet the people in the community, including addressing head and neck concerns within certain cities' homeless populations. However, in our own city, Cleveland, Ohio, there is no well-established Otolaryngology (ENT) screening clinic for underserved populations. By acknowledging known health disparities and defining those within our own community, underserved patients can hopefully have improved overall survival and quality of life.

Target Population:

Homeless or underserved people of Cleveland, Ohio who attend the citywide Homeless Stand down event which is a large annual event hosted by the Business Volunteers Unlimited group in which last year they hosted over 750 guests.

Methods:

In partnership with the Ear, Nose and Throat Institute, the Seidman Community Outreach Office, and the Business Volunteers Unlimited group, a mobile unit with two examination rooms with be provided and used for this event. An otolaryngology resident and attending physician will perform screening questionnaires followed by a physical exam of the head and neck region. Red flag symptoms (e.g., significant weight loss, odynophagia greater than four weeks, etc) will be documented and follow up will be made with patients for formal evaluation by head and neck surgical oncologists at University Hospitals Cleveland Medical Center if red flag symptoms are identified. Historically, given the mobile format of the screening event, evaluation has been limited to a basic head and neck exam. If funding is obtained, we will have the enhanced ability to perform flexible laryngoscopy on site with a portable Ambu Video Tower and disposable scopes.

Expected Outcome:

We anticipate screening greater than 40 patients based on data from years past. We hope to identify any red flags and/or new masses/lesions. Additionally, with the funds granted through this award, we plan to perform flexible laryngoscopy when indicated on patients with concerning features. This will aid in expediated work up and decreased cost of evaluation to the patient. Patients with concerning findings will have scheduled follow up prior to clinic departure.

Expected Impact on Community:

By performing free screening examinations, not only are we meeting patients in the community, we are also educating patients about risk factors associated with head and neck cancer and concerning signs and symptoms. By having the capability of flexible laryngoscopy, we can expedite time to diagnosis if a mass or lesion is present in the upper aerodigestive tract.

Estimated Cost:

We anticipate using the entire grant, up to \$1,000 to obtain as many aScope 4 RhinoLaryngo Slim devices as possible for use during the annual Cleveland Homeless Stand Down head and neck screening event.

Other Funding: None.