Background: As no Chinese data has evaluated the oncologists’ strategy for treatment and management of the head and neck cancer (HNC), this survey investigated Chinese oncologists’ treatment strategy in HNC.

Methods: This survey was conducted during October 2017 to January 2018 in 100 randomly selected tertiary Chinese hospitals from 21 cities. The plan was to include 300 non-randomly selected Chinese oncologists to know their responses on HNC. The investigating stages included: development of a questionnaire after consulting 9 experts in HNC; execution of a pre-test by 40 oncologists from 5 cities; reliability and validity evaluation followed by finalisation of the questionnaire; and conduct of formal investigation with oncologists. Results for all evaluations were presented as percentages.

Results: Of the 296 questionnaires received, 272 were considered valid. Among valid respondents, 65.1% oncologists reported nasopharyngeal carcinoma as the most common HNC, followed by laryngeal/hypopharyngeal (22.1%) carcinoma. 71.3% oncologists acknowledged having a multidisciplinary team for HNC treatment in their hospitals. Prescribed regimens for recurrent/metastatic HNC included taxane + platinum (TP), taxane-cisplatin-5-fluorouracil (TPF), PF, TF and others (45.2%, 27.9%, 21%, 2.2% and 3.7%). Oncologists (77.6%) add target therapy to chemotherapy as the first line therapy in recurrent/metastatic cancer. For locally advanced HNC, anti-EGFR would be preferred by 84.2% oncologists. 39.0% oncologists reported considering inclusion of targeted therapy at combined radical radiotherapy and chemotherapy stage. HPV was believed to be associated with HNC prognosis by 72.0% oncologists; 1.9% oncologists disagreed and 26.1% were unsure. HPV testing rate was 67.3%. The reasons for not testing HPV were immature technical conditions (41.2%), no impact on treatment (40.8%), no consent by patients (25.0%) and low HPV incidence in Chinese HNC patients (18.0%).

Conclusions: In conclusion, oncologists in China have not fully followed international guidelines of HNC which might be due to practical considerations. These findings will provide future education for HNC management.

Legal entity responsible for the study: China Medical University

Funding: Merck Serono Co. Ltd, Beijing, China.

Disclosure: All authors have declared no conflicts of interest.