

The incidence of malignant tumors of head and neck is rising worldwide and the incidence of subsequent neoplasms in this area is increasing as well. Diagnosis can be difficult. Most patients underestimate symptoms and a large proportion of disease is diagnosed at a late stage.

The common feature of head and neck tumors is their histological composition (90-95% are squamous cell carcinomas with varying degrees of differentiation) and a tendency to locally spread with the early emergence of locoregional metastases.

The group most at risk is men over 45 years old, especially cigarette smokers and drinkers - especially spirits. Other risk factors include infection of HPV and HSV viruses, occupational pollution, poor nutrition, poor oral hygiene and inadequate dental prosthesis and so on. The role of prevention seems to be essential in case of head and neck cancer. According to the American Cancer Society 85-90% of head and neck tumors is caused by tobacco products. This is one of the reasons why the fight against smoking has become a major global prevention effort.

The crucial role in the treatment of these tumors has a surgical treatment and radiotherapy, but chemotherapy has just a limited effect. The future way of therapy is likely to be a biological treatment.

The multiple tumors mean subsequent primary neoplasms. Subsequent development of the primary tumor has a negative impact on prognosis. In the Czech Republic, the incidence of secondary tumors is described as 8.4% of patients with cancer. If the primary tumor is head and neck cancer, the incidence of subsequent primary (duplicate) tumor is between 2-3% each year.

Multiple tumor development may be completely independent or it may be from a common clonal origin. To the emergence of subsequent neoplasms also contributes to the impact of common risk factors - mainly smoking or mutagenic effect of treatment of primary tumor.

This study is focused on patients from otorhinolaryngology clinic. For the period of 26 years, it was found out 1700 head and neck cancer patients and 106 (6.2%) patients experienced 119 (6.5%) subsequent neoplasms. The number of men with multiple tumors was approximately 3 times higher than the number of women.