

Date: November 30, 2012

To: Edmonton Zone
Pathologists, Head and Neck Surgeons, Cross Cancer Institute Oncologists,
Laboratory Directors and Managers

From: AHS Laboratory Services

Re: Reflex P16 Ordering on Head and Neck Squamous Cell Carcinoma

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Key Messages:

- There is increasing evidence in that Human Papilloma Virus (HPV) plays a pathogenic role in certain subset of head and neck cancers. Those are termed HPV-associated head and neck squamous cell carcinomas (HPV-HNSCC).
- The International agency for research of cancer recently concluded that there is sufficient evidence that HPV-16 is causal for subset of oropharyngeal cancers. Those include squamous cell carcinoma arising from oropharynx, base of tongue and waldeyer's ring. Association for oral cavity and laryngeal carcinoma has not been confirmed yet.

Recommendation:

- At this time, P16 Immunohistochemistry ***should be ordered*** on all squamous cell carcinomas arising in the oropharynx and on all metastatic squamous cell carcinomas to the neck nodes with no known primary.
- P16 Immunohistochemistry ***should NOT be ordered*** on squamous cell carcinomas arising at other sites in the head and neck area or benign lesions such as squamous papillomas.

Reference:

- Lewis JS et al. (2012). Partial p16 staining in oropharyngeal squamous cell carcinoma: extent and pattern correlate with human papillomavirus RNA status"; *Modern Pathology* , 25, 1212-1220
- Those wishing a hard copy of the article can contact Dr. Slatnik at:
Jack.Slatnik@albertahealthservices.ca

For assistance with interpretation of the P16 stain, please contact any of the members of the Edmonton Zone Head & Neck SIG:

- Dr. Brian Chiu at: Brian.chiu@albertahealthservices.ca
- Dr. Lakshmi Puttagunta at: lputtagu@ualberta.ca
- Dr. Jack Slatnik at: Jack.Slatnik@albertahealthservices.ca

This bulletin has been reviewed and approved by:

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