ORAL ONCOLOGY
A Journal Related to Head & Neck Oncology

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DESCRIPTION

Oral Oncology is an international interdisciplinary journal which publishes high quality original research, clinical trials and review articles, editorials, and commentaries relating to the etiopathogenesis, epidemiology, prevention, clinical features, diagnosis, treatment and management of patients with neoplasms in the head and neck.

Oral Oncology is of interest to head and neck surgeons, radiation and medical oncologists, maxillofacial surgeons, oto-rhino-laryngologists, plastic surgeons, pathologists, scientists, oral medical specialists, special care dentists, dental care professionals, general dental practitioners, public health physicians, palliative care physicians, nurses, radiologists, radiographers, dieticians, occupational therapists, speech and language therapists, nutritionists, clinical and health psychologists and counselors, professionals in end of life care, as well as others interested in these fields.

Basic, translational, or clinical Research or Review papers of high quality and that make a contribution to new knowledge are invited on the following aspects of neoplasms arising in the head and neck (including lip, tongue, oral cavity, oropharynx, salivary glands, sinuses, nose, nasopharynx, larynx, skull base, thyroid, and craniofacial region, and the related hard and soft tissues and lymph nodes):

- Etiopathogenesis: natural history of cancer and pre-cancer; basic pathology, metastatic mechanisms; genetic changes; cellular and molecular changes; microorganisms; growth factors, adhesion and other molecules
- Epidemiology: risk factors; biomarkers; protective factors; geographic factors; prevention; screening and intervention
- Clinical features; orofacial effects of neoplasms at both local and distant sites; tumor staging and grading
- Diagnosis; detection of cancer and pre-cancer; cellular and molecular markers for diagnosis; advances in imaging and other functional diagnostic modalities for cancer and pre-cancer
- Management and Prognosis; clinical, cellular and molecular markers for prognosis; treatment options including surgical, lasers, photodynamic therapy, cryosurgery, micro-vascular and other forms of surgery, medical, radiotherapy, chemotherapy, immunotherapy, biological and gene therapy advances; molecular targets and new therapeutics (new cytotonics and molecular-targeted therapies); multimodality treatment; advances in reconstruction and rehabilitation, including flaps and grafts, alloplasty, bone and connective tissue biology; multidisciplinary teamwork in cancer care and oral health care.
- Quality of life issues; issues of consent; psychosocial aspects; patient and health professional information; patient involvement; psychological interventions, improving outcomes; the prevention,
diagnosis and management of complications, including, pain, hemorrhage, dysfunction, deformity, osteoradionecrosis, xerostomia, and others; rehabilitation; palliative and end of life care; and support teamwork.

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Letters to the Editor relating to published work in Oral Oncology or other topics of interest including unpublished original research are welcome. If accepted Letters are published online only. Mechanics: Letters should not exceed 1,000 words in length and can contain up to 2 figures and/or tables.

Oral Oncology does not consider case reports; however, authors are welcome to submit these as a Letter to the Editor, and can contain up to one image, not exceeding 1,000 words in length

Types of paper
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Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). A binary sex categorization (male/female) is usually designated at birth ("sex assigned at birth"), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviors, and identities of women, men and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. Gender influences how people view themselves and each other, how they behave and interact and how power is distributed in society. Sex and gender are often incorrectly portrayed as binary (female/male or woman/man) and unchanging whereas these constructs actually exist along a spectrum and include additional sex categorizations and gender identities such as people who are intersex/have differences of sex development (DSD) or identify as non-binary. Moreover, the terms "sex" and "gender" can be ambiguous—thus it is important for authors to define the manner in which they are used. In addition to this definition guidance and the SAGER guidelines, the resources on this page offer further insight around sex and gender in research studies.

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PREPARATION

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State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

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**Results**

Results should be clear and concise.

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This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

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See: [https://www.elsevier.com/highlights](https://www.elsevier.com/highlights) for examples.

**Keywords**

Immediately after the abstract provide a maximum of ten keywords, to be chosen from the Medical Subject Headings from Index Medicus. These keywords will be used for indexing purposes. It is usually necessary to include keywords such as Oral Cancer, or Head and Neck cancer.

**Abbreviations**

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