



For some people with salivary gland cancer, treatment will remove or destroy the cancer. The end of treatment can be both stressful and exciting. You may be relieved to finish treatment, but find it hard not to worry about cancer coming back. These feelings are very common if you've had cancer.

For other people, the cancer might never go away completely. Some people may get regular treatment with chemotherapy or targeted therapy or other treatments to try and help keep the cancer under control. Learning to live with cancer that does not go away can be difficult and very stressful.

**Ask your doctor for a survivorship care plan and very st**

Almost any cancer treatment can have side effects. Some may last for a few weeks to several months, but others can last the rest of your life. Some treatment side effects might last a long time or might not even show up until years after you have finished treatment. Your doctor visits are a good time to ask questions and talk about any changes or problems you notice or concerns you have.

**Report any new symptoms to the doctor right away.** This might help your doctor find recurrent cancer as early as possible, when the cancer is small and easier to treat.

## Doctor visits and tests

If there are no signs of cancer remaining, many doctors will recommend you have a physical exam and some of the tests listed below every few months for the first couple of years after treatment, then every 4 to 6 months or so for the next few years. People who were treated for early-stage cancers may do this less often.

**Endoscopy:** In some people, endoscopy might be done as a follow-up test. A common schedule is about:

- Every 1 to 3 months during the first year after treatment
- Every 2 to 6 months during the second year after treatment
- Every 4 to 8 months during the 3<sup>rd</sup> to 5<sup>th</sup> years after treatment
- Every year after the 5<sup>th</sup> year of treatment

**Quitting smoking:** If you had trouble quitting smoking before treatment, your doctor may recommend counseling as well as medication to help you. It is very important to quit smoking because even people with early-stage salivary gland cancer are at risk of developing a new smoking-related cancer if they continue to smoke. See [Stay Away from Tobacco](#)<sup>4</sup> and call 1-800-227-2345 for more information about quitting smoking.

**Blood tests:** If you were treated with radiation to the neck, it might have affected your thyroid gland. You will most likely need regular blood tests to check your thyroid function.

**Imaging:** Chest x-rays and [other imaging tests](#)<sup>5</sup> might be used to watch for a recurrence or a new tumor, especially if you have new symptoms.

**Dental exams:** People treated with surgery and/or radiation might also have problems with [dry mouth](#)<sup>6</sup> and tooth decay, so regular dental exams are often recommended. Artificial (fake) saliva might be recommended for dry mouth.

**Help for problems with eating and nutrition:** Cancers of the salivary glands and their treatments can sometimes cause problems such as loss or change in taste, dry mouth, or even loss of teeth. This can make it hard to eat, which can lead to weight loss and weakness due to poor nutrition.

Some people might need to adjust what they eat during and after treatment or might need nutritional supplements to help make sure they get the nutrition they need. Some may even need a feeding tube placed into the stomach, at least for a short time during and after treatment.

A team of doctors and nutritionists can work with you to help manage your individual nutritional needs. This can help you maintain your weight and get the nutrients you need. They can also show you swallowing exercises that can help keep these muscles working and give you a better chance of eating normally after treatment. If a dry mouth is making it hard to eat, your doctor may recommend a saliva substitute or give you some medications to help relieve the symptoms.

**Speech, hearing, and swallowing rehabilitation:** Radiation, surgery, and certain chemo drugs can lead to problems with speech, swallowing, and hearing. These are often checked and treated by a **speech therapist** (a professional who is trained in helping people with speech problems) after treatment. These experts are knowledgeable about speech and swallowing problems. They can help you learn to manage these problems. Some people might need to learn new ways of speaking. The speech therapist can play a major role in helping with this.

You might also need to see an **audiologist** (a specialist in hearing) for devices to improve your hearing if the treatment affected it.

**Side effects of treatment on the mouth and throat (a speech therapist can help with this):** Radiation to the head and neck (Sore throat, dry mouth, and difficulty swallowing)

could happen.

At some point after your cancer treatment, you might find yourself seeing a new doctor who doesn't know about your medical history. It's important to [keep copies of your medical records](#)<sup>7</sup> to give your new doctor the details of your diagnosis and treatment.

## Can I lower my risk of the salivary gland cancer progressing or coming back?

If you have (or have had) salivary gland cancer, you probably want to know if there are things you can do that might lower your risk of the cancer growing or coming back, such as exercising, eating a certain type of diet, or taking nutritional supplements. Unfortunately, it's not yet clear if there are things you can do that will help.

**Quit smoking:** Smoking during cancer treatment is known to reduce the benefit of treatment which can raise your risk of the cancer coming back (recurrence). Smoking also increases the risk of getting a new smoking-related cancer (see Second Cancers below). Survivors of salivary gland cancer who continue to smoke are also more likely to die from their cancer. **Quitting smoking for good is the best way to improve your survival. It is never too late to quit.**

Adopting healthy behaviors such as [eating well](#)<sup>8</sup>, [getting regular physical activity](#)<sup>9</sup>, and [staying at a healthy weight](#)<sup>10</sup> might help, but no one knows for sure. However, we do know that these types of changes can have positive effects on your health that can extend beyond your risk of salivary gland cancer or other cancers.

### About dietary supplements

So far, no [dietary supplements](#)<sup>11</sup> (including vitamins, minerals, and herbal products) have been shown to clearly help lower the risk of cancer progressing or coming back. This doesn't mean that no supplements will help, but it's important to know that none have been proven to do so.

Dietary supplements are not regulated like medicines in the United States – they do not have to be proven effective (or even safe) before being sold, although there are limits on what they're allowed to claim they can do. If you're thinking about taking any type of nutritional supplement, talk to your health care team. They can help you decide which

If the cancer does recur (come back) , your treatment options will depend on where the cancer is located, what treatments you've had before, and your health. For more information on how recurrent cancer is treated, see [Treatment Options by Stage of<sup>12</sup>Salivary Gland Cancer<sup>13</sup>](#).

For more you may also want to see [Understanding Recurrence<sup>14</sup>](#).

## Getting emotional support

Some amount of feeling depressed, anxious, or worried is normal when cancer is a part of your life. Some people are affected more than others. But everyone can benefit from help and support from other people, whether friends and family, religious groups, support groups, professional counselors, or others. Learn more in [Life After Cancer<sup>15</sup>](#).

## Second cancers after salivary gland cancer treatment

Cancer survivors can be affected by a number of health problems, but often their greatest concern is facing cancer ei:3isurvivors can be affected T1RG 0w 0 b6hen cancQatment

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***Quit smoking***

Lung and oral cavity cancers are linked to tobacco use. While it's not easy to do, quitting tobacco can decrease your risk of many health problems, including another cancer. People who quit smoking have a lower risk of lung, esophagus, larynx, hypopharynx, and oral cavity and oropharynx cancers than those who continue to smoke. See [Stay Away from Tobacco](#)<sup>21</sup> to learn more about quitting tobacco.

***Follow-up after treatment***

After completing treatment for salivary gland cancer, you should still see your doctor regularly. Your doctor may order tests to look for signs that the cancer has come back or spread. These tests are also useful in finding some second cancers, particularly a new salivary gland cancer or lung cancer. Experts don't recommend any other tests to look for second cancers in patients who don't have symptoms. Let your doctor know

## Hyperlinks

1. [www.cancer.org/cancer/survivorship/long-term-health-concerns/survivorship-care-plans.html](http://www.cancer.org/cancer/survivorship/long-term-health-concerns/survivorship-care-plans.html)
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23. [www.cancer.org/cancer/risk-prevention/tobacco.html](http://www.cancer.org/cancer/risk-prevention/tobacco.html)
24. [www.cancer.org/cancer/risk-prevention/diet-physical-activity/take-control-your-weight.html](http://www.cancer.org/cancer/risk-prevention/diet-physical-activity/take-control-your-weight.html)
25. [www.cancer.org/cancer/risk-prevention/diet-physical-activity/get-active.html](http://www.cancer.org/cancer/risk-prevention/diet-physical-activity/get-active.html)
26. [www.cancer.org/cancer/risk-prevention/diet-physical-activity/eat-healthy.html](http://www.cancer.org/cancer/risk-prevention/diet-physical-activity/eat-healthy.html)
27. [www.cancer.org/cancer/risk-prevention/diet-physical-activity/alcohol-use-and-cancer.html](http://www.cancer.org/cancer/risk-prevention/diet-physical-activity/alcohol-use-and-cancer.html)
28. [www.cancer.org/cancer/survivorship/long-term-health-concerns/second-cancers-in-adults.html](http://www.cancer.org/cancer/survivorship/long-term-health-concerns/second-cancers-in-adults.html)

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<https://www.cancer.org/cancer/acs-medical-content-and-news-staff.html>)

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