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If You Have Laryngeal or Hypopharyngeal Cancer

If you or someone you know has just been diagnosed with **laryngeal or hypopharyngeal cancer**, this short, simple guide can help.

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What are laryngeal and hypopharyngeal cancers?

Laryngeal and hypopharyngeal cancers start in the head and neck area. Cancer that starts in the larynx (voice box) is called **laryngeal cancer**. Cancer that starts in the hypopharynx (the lower part of the throat right behind the voice box) is called **hypopharyngeal cancer**. These cancers start when cells in the larynx or hypopharynx grow out of control and crowd out normal cells.

Cancers that start in the [head and neck area](#)¹ can have many different names depending on where it is. Ask your doctor to write down the exact kind of cancer you have because it can be confusing.

The information after the pictures below is about laryngeal and hypopharyngeal cancers.

Explore the 3D, interactive color model of the larynx and hypopharynx to learn

more. Ask your doctor to use these pictures to show you where the cancer is.



The mouth and throat

Cancer cells can spread to other parts of the body. Cancer cells from the larynx or hypopharynx can sometimes travel to the lungs and grow there. When cancer cells do this, it's called metastasis. The cancer cells in the new place look just like the ones from the larynx or hypopharynx where it started.

Cancer is always named for the place where it starts. So when laryngeal or hypopharyngeal cancer spreads to the lung (or any other place), it's still called laryngeal or hypopharyngeal cancer. It's not called lung cancer unless it starts from cells in the lung.

Different types of laryngeal and hypopharyngeal cancer

The most common type of cancer in the larynx and hypopharynx is called **squamous cell carcinoma (cancer)**. These cancers start in the squamous cells that line the voice box and vocal cords (larynx) and the lower part of the throat behind the voice box (hypopharynx).

Questions to ask the doctor

- Why do you think I have cancer of the voice box or lower throat?
- Is there a chance I don't have cancer?
- Would you please write down the kind of cancer you think I might have?
- What will happen next?

How does the doctor know I have laryngeal or hypopharyngeal cancer?

These cancers may not be found until they [cause problems](#)² that make the person go to the doctor. Sometimes changes are seen during a routine visit to the doctor or dentist. You may be sent to see a doctor who focuses on diseases of the ear, nose, and throat (called an ENT doctor, an otolaryngologist, or a head and neck surgeon).

The doctor will ask you questions about your health, your smoking and alcohol drinking history, and will do exams and tests to find out what is causing your symptoms. If signs point to laryngeal or hypopharyngeal cancer, you might have more tests. Here are some of the [tests you might need](#)³:

Complete head and neck exam: The doctor will check your head and neck area, looking and feeling for any abnormal areas. The lymph nodes in the neck will be felt.

Because some parts of your mouth and throat are not easily seen, the doctor may use mirrors, lights, and/or special fiber-optic scopes (thin lighted tubes) to look at these areas.

Panendoscopy: This exam is done in an operating room after you are given drugs to make you sleep. The surgeon looks inside your nose, mouth, throat, esophagus (swallowing tube), and trachea (windpipe) through thin tubes called scopes and may take out pieces of tissue (biopsies) to be checked closely in the lab.

and talk normally after finishing treatment.

Biopsy: For this test, the doctor takes out a small piece of tissue with surgery or a needle, where the cancer seems to be. The tissue is checked for cancer cells. This is the best way to know for sure if you have cancer.

Gene and protein tests: The cancer cells in the biopsy tissue might be tested for genes or proteins such as PD-L1. Knowing which genes or proteins your cancer has can help the doctor decide if treatments like immunotherapy might help.

Blood tests: Blood tests are not used to find cancer of the larynx or hypopharynx, but they can tell the doctor more about your overall health, like your kidney or liver function.

Questions to ask the doctor

- What tests will I need to have?
- Who will do these tests?
- Where will they be done?
- Who can explain them to me?
- How and when will I get the results?
- Who will explain the results to me?
- What do I need to do next?

How serious is my cancer?

If you have laryngeal or hypopharyngeal cancer, the doctor will want to find out if and [how far it has spread](#)⁶. This is called staging. Knowing the stage will help your doctor decide what type of treatment is best for you.

The stage describes the growth or spread of the cancer in the place it started. It also tells if the cancer has spread to other nearby organs or to organs farther away.

Your cancer can be stage 0, 1, 2, 3, or 4. The lower the number, the less the cancer has spread. A higher number, like stage 4, means a more serious cancer that has spread from where it started. Be sure to ask the doctor about the cancer's stage and what it means for you.

Questions to ask the doctor

- Do you know the stage of the cancer?
- If not, how and when will you find out the stage of the cancer?
- Would you explain what the stage means to me?
- Based on the stage of the cancer, how long do you think I'll live?
- What will happen next?

What kind of treatment will I need?

Smoking during cancer treatment is linked to more side effects, worse outcomes, and reduced benefit of treatment. It is best to stop smoking completely before starting treatment. Smoking also increases the risk of the cancer coming back after treatment as well as the risk of getting a new cancer. [Quitting smoking](#)⁷ for good is the best way to improve your chance of survival.

There are many ways to treat cancer of the larynx and hypopharynx:

- Surgery and radiation treat only the cancer and a small area around it. They do not affect the rest of the body.
- Chemo, immunotherapy, and targeted therapy drugs go through the whole body. They can reach cancer cells almost anywhere in the body.

You might get more than one type of treatment. Each treatment has some [side effects that can usually be managed](#)⁸ or even prevented. The plan that's best for you will depend on:

- Where the cancer started growing – the larynx (voice box) or the hypopharynx (the lower part of the throat behind the voice box)
- The stage of the cancer
- The chance that a type of treatment will cure the cancer or help in some way
- How treatment will affect the way you talk, breathe, and eat
- Your age
- Other health problems you might have
- Your feelings about the treatment and the side effects that come with it

Surgery

Some of these cancers are in places that are hard to operate on. Still, surgery may be

used to take out the cancer and an edge of healthy tissue around it. In some cases, all or part of the throat or voice box may need to be removed. Surgery may also be used to take out lymph nodes in the neck that might have cancer.

Surgery can also be used to help you do things that the cancer may have changed. For instance, if you can't swallow because of the tumor, surgery may be done to put in a feeding tube. Some surgeries can even help rebuild part of the throat.

Side effects of surgery

- Taste changes
- Mouth and throat sores
- Dry mouth
- Trouble swallowing or eating

Most side effects get better after treatment ends and many can be managed or even prevented. Some might last longer. Ask your cancer care team what you can expect.

Chemo

Chemo, the short word for chemotherapy, is the use of drugs to fight cancer. The drugs

There are ways to treat most of the side effects caused by targeted therapy. If you have side effects, talk to your cancer care team so they can help.

Immunotherapy

Immunotherapy is treatment that either boosts your own immune system or uses man-

treatments may be vitamins, herbs, special diets, and other things. You may be curious about these treatments.

Some of these are known to help, but many have not been tested. Some have been shown not to help. A few have even been found to be harmful. Talk to your doctor first if you're thinking about using anything, whether it's a vitamin, a diet, or anything else.

Questions to ask the doctor

- What treatment do you think is best for me?
- What's the goal of this treatment? Do you think it could cure the cancer?
- Will treatment include surgery? If so, who will do the surgery?
- What will the surgery be like?
- Will I be able to talk normally after surgery?
- Will I need other types of treatment, too?
- What's the goal of these treatments?
- What side effects could I have from these treatments?
- What can I do about side effects that I might have?

will tell you which tests should be done and how often, based on the stage of your cancer and the type of treatment you had.

Having cancer and dealing with treatment can be hard, but it can also be a time to look at your life in new ways. You might think about ways to improve your health. Call us at 1-800- 227-2345 or talk to your doctor to find out what you can do to feel better or to get help to [quit smoking](#)¹³.

You can't do anything about the type of treatment you had.

11. www.cancer.org/cancer/types/oral-cavity-and-oropharyngeal-cancer/after-treatment/follow-up.html
12. www.cancer.org/cancer/risk-prevention/tobacco.html
13. www.cancer.org/cancer/risk-prevention/tobacco.html
14. www.caringbridge.org/
15. www.cancer.org

Words to know

Biopsy (BY-op-see): taking out a small piece of tissue to see if there are cancer cells in it

Epiglottis (EP-uh-**GLOT**-is): A thin, valve-like, flap at the base of the tongue that covers the vocal cord area when you swallow. This keeps food and drink from getting into the windpipe.

Esophagus (eh-SOF-uh-gus): the tube that carries food from the mouth to the stomach

Glottis (GLOT-is): the part of the larynx that contains the vocal cords

Hypopharynx (hi-po-**FAIR**-ingks): the lower part of the throat, from the voice box down to the esophagus

Larynx (lair-ingks): the voice box, which sits below the base of the tongue and at the top of the windpipe. It contains the vocal cords, which make sound.

Metastasis (muh-TAS-tuh-sis): cancer cells that have spread from where they started to other places in the body

Nasal cavity: the inside of the nose above the roof of the mouth

Nasopharynx (NAY-zoh-**FAIR**-ingks): the part of the throat that's behind the nose

Oropharynx (OR-oh-**FAIR**-ingks): the part of the throat that's behind the mouth

Subglottis (sub-GLOT-is): the lower part of the larynx, from just under the voice box to the top of the windpipe

Supraglottis (sub-GLOT-is): the upper part of the larynx, above the voice box

Trachea (TRAY-key-uh): the windpipe, the big tube that carries air in and out of the

lungs

Voice box: the larynx, which sits below the base of the tongue and at the top of the windpipe. It contains the vocal cords which make sound.

How can I learn more?

We have a lot more information for you. You can find it online at www.cancer.org¹⁵. Or, you can call our toll-free number at 1-800-227-2345 to talk to one of our cancer information specialists.

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