

# Portland surgeon begins new Providence oral cancer program

*Degrees in dental school, then medical school, qualified Bryan Bell as an oral and maxillofacial head and neck surgeon*

By Cliff Collins

For The Scribe

Physicians spend many years in school and residency training to become doctors, but **R. Bryan Bell, MD, DDS**, took that a step further.

The Texas native and son of an oral surgeon deliberately went to dental school first, in pursuit of his goal to become an **oral and maxillofacial and head and neck surgeon**. Despite the time all that training involved, Dr. Bell never regretted his decision.

He obtained a dental degree from **Creighton University** and a medical degree from the **University of North Carolina**. After completing his surgical residency at North Carolina, he undertook specialized fellowships in head and neck surgical oncology, as well as craniomaxillofacial trauma, at **Legacy Emanuel Medical Center**.

Having dual degrees has been “hugely helpful” in his work, he said, making him more comfortable with doing surgical procedures directly through the mouth, and giving him greater appreciation of the importance of functional rehabilitation and restoration of the teeth and jaws.

Dr. Bell has accepted a position with **Providence Cancer Center** as **medical director of its new oral, head and neck cancer program**.

A physician with **Head and Neck Surgical Associates** in Portland and serves on the board of trustees of the **Medical Society of Metropolitan Portland**, he is a board-certified surgeon

and brings extensive experience in evaluation and treatment of a variety of head and neck tumors involving the oral cavity, larynx, pharynx, nose, paranasal sinuses, thyroid and salivary glands.

“We’re building a head and neck program from the ground up,” said Dr. Bell, one that will involve an interdisciplinary, one-stop approach to care, similar to that already in place at Providence for lung cancer, where the patient is seen by several specialists during a single visit.

This will represent the first formal program Providence has had in place for oral cancer and head and neck cancer, he said. He added that the Cancer Center has an excellent radiation oncology group, but a complete approach to head and neck cancer must include surgery, radiation and medical oncology.

Treatment for oral cancer remains primarily surgical and other services such as social work, maxillofacial prosthodontics and speech and swallowing therapy need to be incorporated into a program, as does a dentist who specializes in oral oncology, he said.

Dr. Bell will oversee a multidisciplinary treatment team of surgeons, radiation oncologists, medical oncologists, fellows, residents, dentists, speech therapists, audiologists and social workers who are dedicated to the care of patients with oral, head and neck

cancer.

The clinic is scheduled to open approximately early July, a Providence spokeswoman said.

Although five-year survival rates have improved modestly, from about 50 percent 50 years ago to 58 percent to 60 percent today, morbidity has lessened. “Most of these patients are able to retain their larynx and voice,” he said. “Patients are living longer and with a high level of functioning.” Advances in reconstructive surgery have given patients improved quality of life, functional restoration and a better appearance, he said.

As in other types of surgeries, the new frontier for those in Dr. Bell’s field is transoral robotic surgery, employing the **da Vinci Surgical System**. Last year, the U.S. Food and Drug Administration approved the da Vinci for head and neck procedures.

“Now we are able to remove cancer through the mouth in a minimally invasive way that previously required a major operation, a week or two in the hospital, and swallowing problems,” he said. Because robotic surgery offers “major technological advances,” patients usually go home in two to three days, with less pain and faster healing, he said.

Robotic surgery is still in its infancy for the field, but promises to replace a lot of large open surgeries for larynx and pharynx cancers, he said. “It has the potential to reduce the number of patients that get radiation therapy even for small tonsil cancer.”

Dr. Bell’s practice consists of two major emphases: trauma and

cancer. He and his group, Head and Neck Surgical Associates, will continue their relationship with **Legacy Emanuel Medical Center’s Level I trauma center**, where they provide all head and neck and craniomaxillofacial surgery services. His group, which includes **MSMP members Bryce E.**

**Potter, MD, DMD; Eric J. Dierks, MD, DMD; and neurotologist R. Sterling Hodgson, MD;** along with pediatric otolaryngologist and head and neck surgeon **James P. Cuyle, MD**, also will participate in the new Providence center, Dr. Bell said.



R. BRYAN BELL,  
MD, DDS