

A Swollen Lymph Node Leads to a Diagnosis of Throat Cancer

Fred Hutch treats a patient's throat cancer with a multispecialty approach that includes state-of-the-art robotic surgery, proton therapy and kindness everywhere he turned.

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In 2023, Jack David was on his family's annual trip to Priest Lake, Idaho, when he woke up in the middle of that vacation and felt a swollen lymph node.

He made a few jokes about what it could be, then saw his doctor when he returned home to Seattle, which led to a referral to an otolaryngologist. David, 49, was given a prescription for antibiotics, but the node didn't subside.

Results from a biopsy appeared normal, but the node still didn't disappear.

In January 2024, David decided to have the node removed for peace of mind; as is typical, the tissue was sent to pathology, which returned a diagnosis of [throat cancer](#).

"The worst part about the whole thing was the first couple weeks, not knowing what was going to happen, right after the diagnosis and before I had answers and a treatment plan," said David.

He met with oncologists at a community hospital, but he knew from his job at Seattle Children's that he had other options. He works with a critical care team that transports patients who need to come to Seattle for a higher level of care, such as a Bellingham baby born at 26 weeks who needs specialized care at a children's hospital.

He decided he needed a higher level of care, too, and chose Fred Hutch Cancer Center, Washington state's only [NCI-designated comprehensive cancer center](#).

"I had 400 questions and wanted to see someone who knew more about this," said David. "Many people don't know about comprehensive cancer centers, but I am in health care, so I know what we have available."

Robotic surgery instead of chemo

David was seen at the Fred Hutch [Head and Neck Multispecialty Clinic](#), where he met with a medical oncologist, a radiation oncologist and a surgeon who worked together to develop a treatment plan for him.

Fred Hutch otolaryngologist and head and neck surgeon [Emily Marchiano, MD](#), performed a minimally invasive procedure often used in urology and gynecology called TORS — transoral robotic surgery.

“In other centers, he may have been told to get chemotherapy and radiation, if TORS is not available,” Marchiano said.

She used a [da Vinci robot](#) for the procedure, which passes skinny arms holding tiny surgical instruments, including a camera and microscope, through a single port into the mouth. She controls the arms with a console in the operating room.

“It’s kind of like a video game,” she said. “It lets us get to places that are hard to reach.”

Using the robotic arms, Marchiano took a tiny sample of David’s tonsil.

She sent it to pathology, which confirmed the location of the cancerous cells in real time, guiding her to what she needed to remove.

David had what Marchiano calls a “classic presentation of the cancer.”

“He came in with a lump in his neck, but he didn’t have any symptoms because his tumor is tiny,” she said.

However, Marchiano saw microscopic evidence that his cancer may be growing outside his lymph nodes.

The team had a plan for that, too.

The other side of things

The TORS procedure eliminated the need for radiation to his throat, but David still needed [radiation therapy](#) for his neck to improve swallowing and prevent dry mouth.

He received [proton therapy](#) at Fred Hutch —one of fewer than 100 centers worldwide that offer it — because it spares more tissue than standard radiation and decreases side effects to surrounding tissues.

On David’s first day of therapy, he got a boost of courage from an unexpected source.

The folks he works with at Seattle Children's had just brought a child to Fred Hutch for the same treatment he was receiving.

"I showed up and one of our teams was there taking a kid for proton therapy," he said. "We don't do that often. I haven't taken a kid to proton for a few months now. But there they were, the team I work with. They came over and gave me a hug. It was strange to be on the other side of things, but I figured if this was where we take our own patients, I knew I was in the right place."

'Crazy nice' people

Pain after surgery was excruciating for David, which Marchiano had warned him about, but proton therapy was more manageable.

"I still have nerve pain in my neck and jaw, but I'm learning to live with my new face and neck," he said. "My jawline, right earlobe and the whole right side of my neck feel numb and tingly. It's the new me. I look like everything is fine, but I feel it constantly. My neck feels a little goofy, but I'll take it - I'm alive."

David's cancer has more than a 90% five-year overall survival rate, said Marchiano, who sees David every six months for follow-up, including imaging.

"We were able to piece together really high-quality care because of our team of experts," she said. "His side effects and functionality are excellent, and we gave him equivalent survival outcomes with fantastic functional outcomes because we have all these team members to think outside the box and come up with a plan."

David said his job takes him to many hospitals and Fred Hutch stands out.

"Dr. Marchiano is such a badass and everyone else is too," he said. "It's crazy to be somewhere where every single person, whether it's the person who takes your name when you check in or your doctor, is so nice. Walking through the hallways, there is just a lot of sadness there. But everyone who works there is so happy. Even going to get coffee in between appointments, it's like, 'Oh, they're lovely as well.'"

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