

Cancer and speech and language therapy

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Why this matters

- Head and neck cancer can severely impact speech, swallowing, and communication – all of which are essential for people's quality of life.
- These problems can negatively affect recovery, return to work, mental health, and quality of life for years after treatment.
- Speech and language therapists are essential pillars of the head and neck cancer service. They are critical throughout the person's journey from diagnosis through treatment and longer-term rehabilitation.
- However, there are insufficient numbers of speech and language therapists across the country leaving services, and patients, significantly compromised.

Current issues

- Community speech and language therapy teams face rising demand due to increasing numbers of people with head and neck cancer.
- The speech and language therapy community workforce lacks the capacity to meet the needs of increasing volume and complexity of the cohort.
- There are insufficient numbers of speech and language therapists. Workforce shortages are compounded by the limited and inconsistent funding of speech and language therapy services.
- Staffing levels and service provision are frequently a function of limited funding. Funding inconsistencies create disparities in service provision across different trusts.
- The scarcity of advanced practice roles limits career progression opportunities for speech and language therapists and can also impact the quality of service provided.
- Some NHS trusts do not have enough staff or equipment to run speech and language therapy services, such as clinics that help people restore their voice after surgery or manage swallowing safely.
- Late effects of treatment are increasingly common as more people survive cancer. Investment in the multidisciplinary late-effects clinics, including speech and language therapy, is urgently needed.

Where speech and language therapy makes the difference

Early diagnosis

- In some areas, speech and language therapists run joint clinics with ear, nose, and throat specialists for people referred under the two-week urgent cancer pathway, to spot head and neck cancer earlier.ⁱ
- This speeds up diagnosis of head and neck cancers, reduces waiting lists, and improves survival rates.

Prehabilitation and treatment

- Before treatment starts, speech and language therapists prepare people for the impact of surgery, radiotherapy or chemotherapy.
- They support swallowing, nutrition, voice, and communication so people are stronger and better prepared.

Living well beyond treatment

- Many people live with late effects of cancer treatment — including swallowing problems, changes to voice and communication difficulties, impacting quality of life.ⁱⁱ
- Speech and language therapists provide assessment and treatment, including swallowing and speaking exercises, to help people manage these challenges and improve daily function. They support return to work, education, and family life.

Prevention - accessible information

- Cancer information is often not communication accessible.
- Without clear, tailored information, people cannot make informed choices or follow advice on healthy living, exercise, alcohol or smoking.

For more information

- Visit: <https://www.rcslt.org/speech-and-language-therapy/clinical-information/head-and-neck-cancer/>
- Contact: elissa.cregan@rcslt.org

ⁱ Butler, J. et al. (2023) 'Outcomes of an Advanced Speech and Language Therapist-led (SLT-led) 2-week wait (2WW) assessment clinic for head and neck cancer (HNC)', *Journal/Conference [abstract]*.

ⁱⁱ Diane Sellstrom, C., Haughton, T., Finch, J., O'Hara, J. & Patterson, J. (2025) 'Assessment and management of late radiation-associated dysphagia after treatment for head and neck cancer: A scoping review and survey of UK speech and language therapists', *International Journal of Language & Communication Disorders*, 60(1), e13154.