



**Rajiv Gandhi Cancer Institute  
and Research Centre**

A Unit of Indraprastha Cancer Society  
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# News Letter

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## EDITORIAL

### "CHEMO BRAIN" OR "MENTAL FOG"

Many cancer patients experience impairment of neurocognitive functions including memory loss, distractibility, difficulty in performing multiple tasks (Multitasking) and myriad of other symptoms (mental fog). Patients may suffer from mood disturbances and symptoms that compromise their ability to function adequately including pain and fatigue. These dysfunctions could be due to direct effects of cancer within CNS or effects of cancer treatment. Patient may also have associated neurocognitive or psychiatric disorder that affects their cognition and mood. Cause of this cloudiness is not known, this mental fog is commonly called "chemo brain". These mental changes can sometimes be distressing lasting for days to years. These changes can make people unable to go back to their work or social activities.

Cognition disorders are among the more frequent psychiatric complications in patients with advanced cancer and are associated with higher morbidity, increased distress for families and care givers. This impacts decision making with regard to their illness and consent to research. According to literature cognition, failure range from 10% to 27% in different group of advanced cancers. Some have reported that as many as 80-90% of patients with terminal cancer develop severe cognitive failure before death.

How to identify a **chemo brain** patient:-

- Forgetting things that they usually have no trouble recalling (memory lapses).
- Trouble concentrating (cannot focus on what they are doing).
- Trouble remembering details like names, dates and sometimes large events.
- Trouble with multitasking- answering phones while cooking.
- Taking longer to finish things (slower thinking, disorganized).
- Trouble remembering common words (unable to find right words to finish a sentence).

Doctors call **chemo brain** as "Mild Cognitive Impairment". Usually the changes that patients notice are very subtle. Most people don't tell their cancer care team about this problem until it affects their everyday life. People who appreciate these problems feel more frustrated when their doctors blame it to aging or "nothing to worry attitude".

Cognitive disorders may start after surgery, chemotherapy or radiation to

brain. Brain problem could be caused or worsened by cancer itself, infection, drugs like Steroids, antiemetics, analgesics, hormonal changes, depression, patient's age and stress etc.

Imaging studies have shown that in some patients, parts of brain dealing with memory, planning, monitoring through process and behavior are smaller after CT. In some studies, problems are exaggerated after high dose chemotherapy or BMT. Lower resting brain activity in breast cancer survivors treated with CT has been reported as compared to breast cancer survivors without CT. Tests of memory show that patients are slow to learn new things and have trouble in recalling information.

How to cope with **chemo brain**?

There is no known way to prevent "**chemo brain**". For some people treating cancer means trouble with thinking, memory and planning. But mental abilities can be sharpened and managed as follows:-

- Use of detailed planner. Record of appointments, schedules, to do's, important dates, meeting notes etc.
- Exercise your brain. Do word puzzle, learn new language.
- Take enough rest & sleep.
- Regular exercise.
- Eat right (more vegetables).
- Set up and follow routines.
- Focus on one thing at a time.
- Track your memory problems – keep diary when you notice problems.
- Tell others and health care team about your problem. Their support and understanding can help you relax and make it easy to focus and process information.

Never ignore cognitive disorders or "**chemo brain**" in cancer patient. As clinician or family physician you can help your patients recover faster and better.

**Dr. Dewan AK**  
Medical Director

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## WORLD CANCER DAY (4<sup>th</sup> FEBRUARY)

More than 10 lakh new cancer cases are reported every year. India officially recorded 5.35lakh deaths due to cancer in 2011. It is estimated that the number of people living with cancer will rise by nearly 25% between 2001-2016. WHO has warned that India is the next hub for cancer. Cancer is a disease of aged in west. In comparison to the west, deaths due to cancer among Indian men is lower by 40% and 30% in women. Recent times have seen an increase in incidence of cancer mainly attributed to urbanization, industrialisation, life style changes, population growth and increase in life expectancy.

The impact of cancer is far greater than mere numbers. It causes immense emotional trauma and major economic burden. The initial diagnosis of cancer is perceived by many patients as a grave events and more than 1/3<sup>rd</sup> suffering from anxiety, depression, equally distressing for the family as well. The disease is associated with lots of fear and despair.

The risk of you or your family developing cancer can be significantly reduced through vaccination against Hepatitis B and Human Papilloma virus, regular physical activity, eating healthy food, limiting alcohol consumption, reducing sun exposure and avoiding smoking as recommended by UICC for global cancer control.

Every year, on 4<sup>th</sup> February, World cancer day is celebrated by arranging awareness talks, marathon walk, awareness through print and electronic media and by arranging various screening camps.

On 4<sup>th</sup> February 2014, World Cancer Day, the agenda was to highlight the myths and facts about cancer.

### MYTHS

There are no signs or symptoms of cancer

Cancer is a contagious disease

Cancer is a disease of the wealthy, elderly and developed countries

Cancer is death sentence

Cancer is my fate

### FACTS

For many cancers, there are warning signs and symptoms and the benefits of early detection are in disputable

Cancer is not a contagious disease. It is a lifestyle disease  
You can sit, play talk, hug and share food with a cancer patient

Cancer is a global epidemic. It affects all ages and socio economics groups with developing countries bearing a disproportionate burden

Many cancers that were once considered a death sentence can now be cured and for many more people their cancer can be treated effectively

With right strategies, a third of the most common cancers can be prevented. Cancer is a lifestyle disease

The Department of Preventive Oncology, RGCI & RC, Delhi, deals with awareness, training, screening programs in OPD at a very subsidized charges and free of cost screening in out reach in GRC's, Schools, Colleges, RWA's, PSU's and MNC's. This year, on World Cancer Day, free Oral Screening was done for Afgan Refugees at Vikas Puri, New Delhi. About 80 people were screened and many pre cancer cases were identified and were advised treatment and lifestyle changes. On the same day, Awareness Talk was given by Dr. Jai Gopal Sharma to dispel the myths about cancer in the Corporate House of Unicharm Pvt. Ltd., Gurgaon, Haryana.

**Dr. Jai Gopal Sharma / Dr. Indu Aggarwal**  
Preventive Oncology Department

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## HIGHLIGHTS OF RGCON - 2014



Rajiv Gandhi Cancer Institute and Research Centre, Delhi, hosted its 13<sup>th</sup> Annual International Conference, RGCON-2014, on 15<sup>th</sup> – 16<sup>th</sup> February, 2014 at India Habitat Centre, Lodhi Road, New Delhi. As a convention, the theme of the conference was "Lymphoma – Biology to Therapy". The deliberations were invited by the Organizing Secretary, Dr. Anurag Mehta, who gave an overview of Lymphoma.

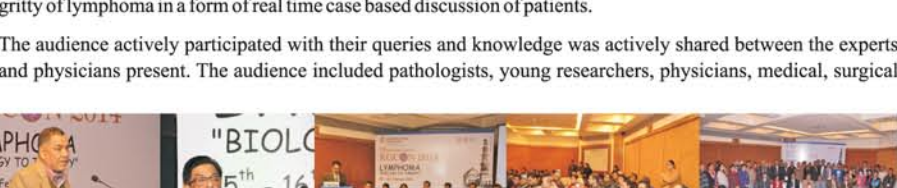
The conference witnessed a galaxy of senior International speakers, who were stalwarts in the field of lymphoma. In the field of pathology, the main speakers were Professor h. c. H. K. Muller - Hermelink; Professor Dr. Dr. h. c. Stefano A. Pileri; Dr. S. David Hudnall and Professor Bharat N Nathwani. Dr. Hermelink apprised the audience about three newly recognized entities in lymphomas, which could be confused with other lymphomas, so that unnecessary morbidity due to treatment could be avoided.

Amongst the clinical side, represented by Dr. Wolfgang Hiddemann and Dr. Ranjana H. Advani. Dr. Ranjana Advani gave deep insight into the management of lymphoma. All the new drugs including latest targeted therapies were delved upon during the proceeding of the meet.



The National faculty included stalwarts like Dr. Anita Borges, Dr. Purvash Parikh, Dr. B. K. Smruti, Dr. G. S. Bhattacharya and Dr. Lalit Kumar. The Indian Bone Marrow Transplant data was discussed in depth by Professor Lalit Kumar from AIIMS. The deliberation also included lively debates between young oncologists followed by lucid interactions and audience comments. Three panel discussions were spearheaded by senior Medical Oncologists, Dr. A. K. Vaid, Dr. Ranga Rao and Dr. Shyam Agarwal and they also discussed the nitty gritty of lymphoma in a form of real time case based discussion of patients.

The audience actively participated with their queries and knowledge was actively shared between the experts and physicians present. The audience included pathologists, young researchers, physicians, medical, surgical



and radiation oncologists, nuclear medicine physicians and radiologists from different part of the country in large numbers with attendance of over five hundred doctors and researchers.

The Inaugural Ceremony was held in the evening of Saturday, 15<sup>th</sup> February 2014, which was solemnized by the Chief Guest, Dr. T. Ramasami, Secretary to the Government of India, Department of Science and Technology and Guest of Honor, Dr. G. K. Rath, Professor, Department of Radiation Oncology & Chief, Dr. B. R. A. Institute Rotary Cancer Hospital, AIIMS, New Delhi. Mr. Rakesh Chopra (Chairman), gave the vision of RGCI & RC followed by addresses by various dignitaries including Mr. D. S. Negi (CEO), Dr. A. K. Dewan (Medical Director) and Dr. D. C. Doval (Chairman Organizing Committee). This was followed by a cultural programme. Final Vote of Thanks was given by Dr. Vineet Talwar, Organizing Secretary.

The second day of the conference witnessed deliberations with renewed vigor and unusual situation were discussed with brevity. A separate symposium on cancer survivorship issues, which included a talk on diet for cancer patients and two dedicated panel discussion on patient related issues moderated by Dr. Vineet Talwar and Dr. Ullas Batra.

All the session were stringently kept on time and were completed as per schedule which was well appreciated by all the delegates and faculty members. The lawn outside the auditorium of IHC had exposition from Trade Fraternity from all over the country. Four awards were given for oral presentation and poster presentation of original work of young oncologists by our judge, Dr. Gauri Kapoor, Director - Pediatric Hematology Oncology, RGCI & RC. The valedictory session was presided by Mr. D. S. Negi, CEO, RGCI & RC, to conclude the meeting.

**Dr. Anurag Mehta**  
Director Lab Services & Blood Bank  
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**Dr. Vineet Talwar**  
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