





Rajiv Gandhi Cancer Institute and Research Centre

A Unit of Indraprastha Cancer Society

Registered under "Societies Registration Act 1860"



EDITORIAL

CANCER OUTCOME - CAN IT BE IMPROVED?

Roughly one million new cases of cancer are added every year in India, which is one-fourth of that recorded in Europe. However, nearly 70% cancer patients die in India. Fewer than 30% of Indian cancer patients survive 5 years or longer after diagnosis. By contrast, in North America and Western Europe, five year survival for patients with all types of cancers is about 60%. According to a publication in Lancet, delayed diagnosis, inadequate, incorrect or suboptimal treatment are chief factors for poor survival in India. Nearly 92% patients from rural households first consult private practitioners, 79% of whom are not qualified in Allopathic medicine.

Can we improve cancer outcome is a million dollar question?

We know that, in the outcomes of cancer care, we are failing to achieve our aim. Our health care outcomes fail to match those achieved by even average performing countries. Higher morbidity and mortality in disadvantaged groups and areas are a key driver of our poor average outcomes. That is our challenge. There is a range of actions needed to respond to this but, in particular, we need to

- a) Reduce the incidence of cancer which are preventable, by lifestyle changes. Provide access to services (stop smoking services) which can help them reduce their risk of cancer. Provide information on early s/s of cancer so that they can seek help if problems arise.
- b) Improve access to screening for all groups and introduce new screening programs where there is evidence they will save lives. Poor outcome in India is due to late presentation and lack of awareness. Figure of seventy percent patients presenting late may get reversed with primary prevention.
- c) Achieve earlier diagnosis of cancer, to increase the scope for successful treatment as diagnosis of cancer at a later stage is generally agreed to be the single most important reason for the lower survival rates.
- d) Make sure that all patients have access to the best possible treatment. It is estimated that 45000 new health care facilities are needed in rural areas. Investment in high technology and methods to take treatment to the peripheral part of the country is missing in India. Setting up basic

infrastructure will ensure quick detection and better care.

Big Society Approach

State Govts, NGO's, academic institutions and individuals working together can make a difference in the fight against cancer.

- NGO's raise awareness of cancer, raise money to fund research and services and deliver some services that disseminate information and campaign for life style changes.
- b) Academic institutions undertake research on all aspects of cancer including basic science, prevention, early diagnosis and treatment.
- c) Pharma companies research in new molecules and contribute in various ways e.g. training of medical professionals; treatment of disadvantaged patients etc.
- d) Thousands of cancer patients support each other both informally and through support groups.

An appeal to readers - bring an information revolution- Be aware and make everyone aware about s/s of cancer. Have screening atleast once in 2 years. When you can have servicing of your cars every 3-6 months, why not service your ownself. Make the right choices about healthy lifestyles.

Appeal to state Govt. and bureaucrats - to build infrastructure and have community based or state run insurance programmes. A patient diagnosed with early cancer should not wait for months together to start treatment. Early diagnosis should also mean early treatment. State Govt. should also address the issue of quackery in cancer to improve cancer outcomes. Treatment should be timely, accessible and affordable.

Cancer is a preventable tragedy. Cancer outcome can be improved by primary prevention and early detection.

Dr. Dewan AKMedical Director



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TIMES OF INDIA & NEW INDIA ASSURANCE HEALTHCARE ACHIEVER AWARD 2014





RGCI & RC was awarded the trophy for Best Oncology Hospital in the country in the recently concluded Times of India - New India Assurance Healthcare Achievers Awards 2014.

HCA Awards have been instituted by Times of India & New India Assurance, and are given to healthcare providers that have outstanding clinical outcomes and demonstrate exceptional commitment to quality and ethics. It is a prestigious honor that serves to recognize the best of the best within the healthcare industry.

The selection process involved exhaustive surveys of doctors, patients and general public in 8 metropolitan cities, and took four months to complete. In choosing the recipient, several things were considered, including years of service, leadership, clinical outcomes, adherence to quality & ethics, and more importantly, opinion of patients and doctors. The entire survey, ranking and deliberation exercise was conducted by Earnst & Young. Names of the top contenders of each category were forwarded to a national jury who then deliberated and selected a winner. This award, therefore, is a direct endorsement of our untiring war on cancer, by our patients and the medical fraternity.

Mr D S Negi (Chief Executive Officer) and team received the award from Hon'ble Shri Ram Bilas Paswan, at a glittering awards ceremony on the 11th of December 2014.

THE WEEK MAGAZINE RANKS RGCIRC AMONGST BEST ONCOLOGY HOSPITALS IN THE COUNTRY



RGCI & RC has been ranked 4th in India's Top Ten Cancer Hospitals, in the Week-Nielsen Best Hospitals Survey 2014. The selection process included a survey of doctors with 5 years or more of experience, in 15 cities such as Delhi, Ahmedabad, Bhopal, Bengaluru, Jaipur, Kolkata, Chennai, Chandigarh, Mumbai, and Hyderabad.

The Week – Nielsen Best Hospitals Survey 2014 was conducted from September to October 2014. The doctors then nominated the top hospitals in selected categories. Parameters for nomination included competency of doctors, patient care, and availability of infrastructure, innovation and commitment to research. To obtain authentic unbiased results, responses for hospitals from doctors associated with that hospital were ignored.

While our fierce commitment to serving cancer patients does not expect gratitude, awards such as these are milestones in our journey to excellence.

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HEALTHCARE RADIUS - SCHNEIDER ELECTRIC AWARD FOR OUTSTANDING CONTRIBUTION TO INDIAN HEALTHCARE

The Chief Executive Officer of RGCIRC, Mr D S Negi, was felicitated with Healthcare Radius – Schneider Electric Award for Outstanding Contribution to Indian Healthcare, on 4th December 2014.

The awards were given to stalwarts from Indian healthcare industry, on the concluding day of "Thinkturf Seminar Series" organized from November 21st till December 4th 2014, by Healthcare Radius and ITP Publishing in association with Schneider Electric.



CANCER AWARENESS & SCREENING CAMP AT JAHANGIR PURI, NEW DELHI

RGCI & RC participated in 2nd Annual Health Mela organized by Maharishi Dadhichi Manav Seva Sansthan on Sunday, 14th December 2014 at Jahangir Puri, New Delhi. Dr. Jai Gopal Sharma & Dr. Indu Aggarwal from Preventive Oncology Department conducted a Cancer Awareness & Screening Camp in the said event.





WORKSHOP ON URINARY DIVERSION



A workshop on Urinary Diversion on 20th & 21st December 2014 was jointly organized by Rajiv Gandhi Cancer Institute & Research Centre and PGIMER & Dr. RMLH, New Delhi. On the first day, Web – Seminar of USI was organized by Board of Education (BOE).

With improvement in anesthesia and surgical techniques, more and more patients are now-a-days being offered Orthotopic Neobladder as primary choice of diversions. However, only few high volume centers in India offer the Neobladder. This workshop was an effort to showcase these complex surgeries by the masters in the field.

International experts like Dr. Hassan Abol – Enein (Mansoura, Egypt), Dr. Arnulf Stenzl (Tuebingen, Germany) Dr. Jorgen Bjerggaard Jensen, (Denmark) Dr. Badrinath Konety (USA) and Dr. Ashok Kumar Hemal (Wake Forest University, USA) had also operated in this workshop.

The Organizing Secretary & Organizing Chairman of this conference was Dr. Sudhir Kumar Rawal, Director – Surgical Oncology, RGCI & RC, New Delhi & Dr. Rajeev Sood, Prof. & Head, Urology, Dr. RMLH & PGIMER, New Delhi and the Co – Organizing Secretary of this conference were Dr. Amit Goel, RGCI & RC, New Delhi & Dr. Raman Tanwar, Dr. RMLH & PGIMER, New Delhi.

CME WITH IMA PANIPAT



RGCI & RC organized a CME Programme in association with IMA Panipat on Friday, 12th December 2014 at Hotel Le Gem, Panipat, Haryana. Dr. Shivendra Singh, Sr. Consultant – Surgical Oncology delivered a lecture on "Advancement in GI Malignancy" & Dr. Ullas Batra, Consultant – Medical Oncology delivered a lecture on "Overview of Lung Cancer", which was very well appreciated by doctors of IMA Panipat.

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