



**Rajiv Gandhi Cancer Institute  
and Research Centre**

A Unit of Indraprastha Cancer Society  
Registered under "Societies Registration Act 1860"

# Insight

Internal Newsletter  
July - September 2020

HAPPY  
*Diwali*  
FESTIVAL OF LIGHTS

The Management of  
**RGCIRC**  
Wishes You a  
Healthy, Prosperous &  
Happy  
*Diwali*

- Virtual Childhood Cancer Survivorship Support Group Meeting
- Webinar on Prevention and Management of Lymphedema Post Breast Cancer Treatment - A Multidisciplinary Approach
- Webinar on Oncology with IMA Janakpuri
- Webinar on Oncology with IMA Faridabad
- Virtual Meeting on Management of Genito - Urinary Rhabdomyosarcoma
- World Patient Safety Week 2020
- Webinar on Oncology with IMA Faridabad
- Webinar on Oncology with Mera Swasth Physicians Network, South Delhi
- Covid - 19: Motivational Message
- Welcome to RGCIRC Family
- RGCIRC - Star Employees
- RGCIRC in News

## VIRTUAL CHILDHOOD CANCER SURVIVORSHIP SUPPORT GROUP MEETING

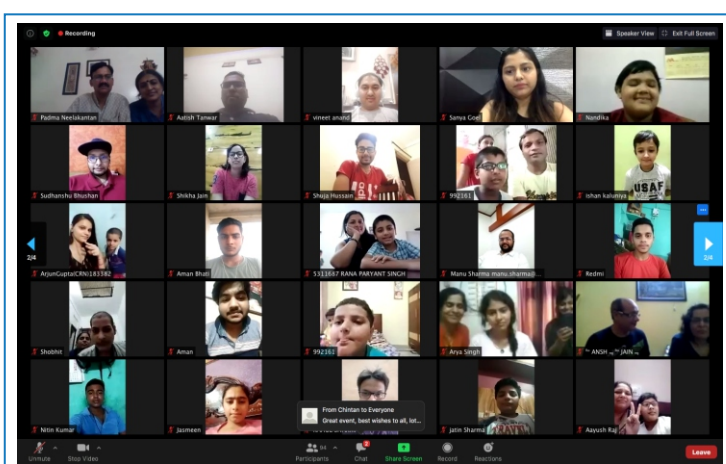
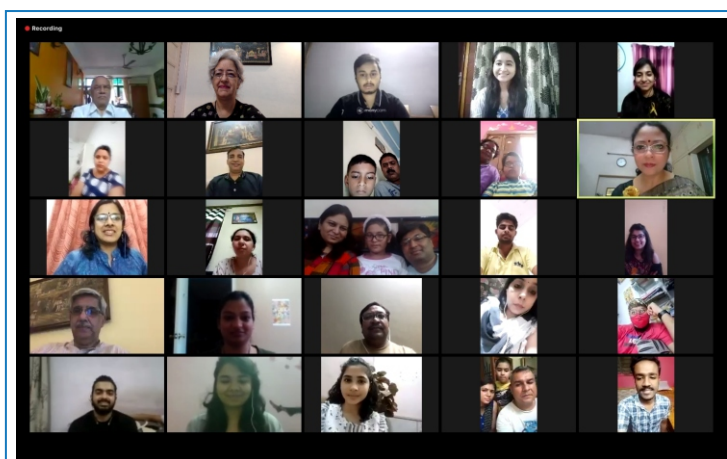
The Department of Pediatric Hematology Oncology, RGCIRC along with its Childhood Cancer Survivors Group "Aashayein" organized its first virtual support group meeting on Sunday, 9<sup>th</sup> August 2020.

Every year the department organizes childhood cancer survivorship program, with its focus on raising awareness among the childhood cancer survivors and their families about ways to stay healthy after treatment completion. But due to the ongoing pandemic, we were forced to stay apart yet, celebrate from the comfort of our homes.

This year's meeting agenda was **"Staying Safe During COVID - 19 Pandemic & Childhood Cancer Survivorship"**. The panel discussion was facilitated by Dr. Gauri Kapoor along with Dr. Sandeep Jain and Dr. Shalini Mishra followed by poem recitation and dance performance by our warriors. Importance of staying physically active especially during lockdown was also portrayed by our survivors.

Team leaders of Aashayein outlined the aim, mission and vision of the group. Our Counselor, Ms. Aayushi Khaneja co-ordinate this activity. The first newsletter of Aashayein was unveiled and it was followed by a surprise video recording from our alumni doctors. Their words of encouragement and best wishes received an overwhelming response from our participants.

Our first virtual support group meeting turned out to be a great success with more than 180 attendees from across the country and few from abroad as well.



**Aashayein** (Facebook Page)  
**Aashayein- Childhood Cancer Survivors Support Group of**  
 Pediatrics Department, RGCIRC (Facebook closed group)



**@aashayein.rgcirc** (Instagram)



**aashayein.rgcirc@gmail.com**  
**newsletter.aashayein@gmail.com**



**Aashayein Rgcirc** (Youtube)

## WEBINAR ON PREVENTION AND MANAGEMENT OF LYMPHEDEMA POST BREAST CANCER TREATMENT - A MULTIDISCIPLINARY APPROACH

8<sup>th</sup> of September is celebrated as World Physiotherapy Day every year to raise the awareness about the significant contribution of the profession in keeping people healthy, mobile and independent. This year, Department of Physiotherapy organised a Webinar on **Prevention and Management of Lymphedema Post Breast Cancer Treatment - A Multidisciplinary Approach** for the physiotherapy professionals and breast cancer survivors on Tuesday, 8<sup>th</sup> September 2020 through Zoom Meeting. The session was started by Inaugural speech given by Mr. D. S. Negi, Chief Executive Officer, RGCIRC and opening remarks by Dr. Sudhir Rawal, Medical Director & Chief of Genito Uro-Oncology Services, RGCIRC and Dr. Pinky Yadav, Medical Superintendent, RGCIRC. Dr. D. C. Doval, Chair - Medical Oncology and Chief of Breast & Sarcoma Services, RGCIRC had chaired the session.

Various topics were discussed to enhance multidisciplinary approach to manage lymphedema from surgical oncology, radiation oncology, medical Oncology, Plastic Surgery and rehabilitation perspective by Dr. Garima Daga, Dr. Anjali Pahuja, Dr. Chaturbhuj Agarwal, Dr. Rajan Arora and Dr. Navneet Singh (PT) respectively from RGCIRC. Breast cancer survivors also shared their experience and coping strategies to manage lymphoedema. Overall the meeting was a success and well appreciated by the participants.

## WEBINAR ON ONCOLOGY WITH IMA JANAKPURI

RGCIRC organized a webinar in association with IMA Janakpuri on Thursday, 10<sup>th</sup> September 2020 through Zoom. Dr. Vandana Jain, Consultant - Gynae Oncology delivered a lecture on "Cervical Cancer Screening & Vaccination" in the said virtual meeting. The webinar was very well appreciated by the gathering.

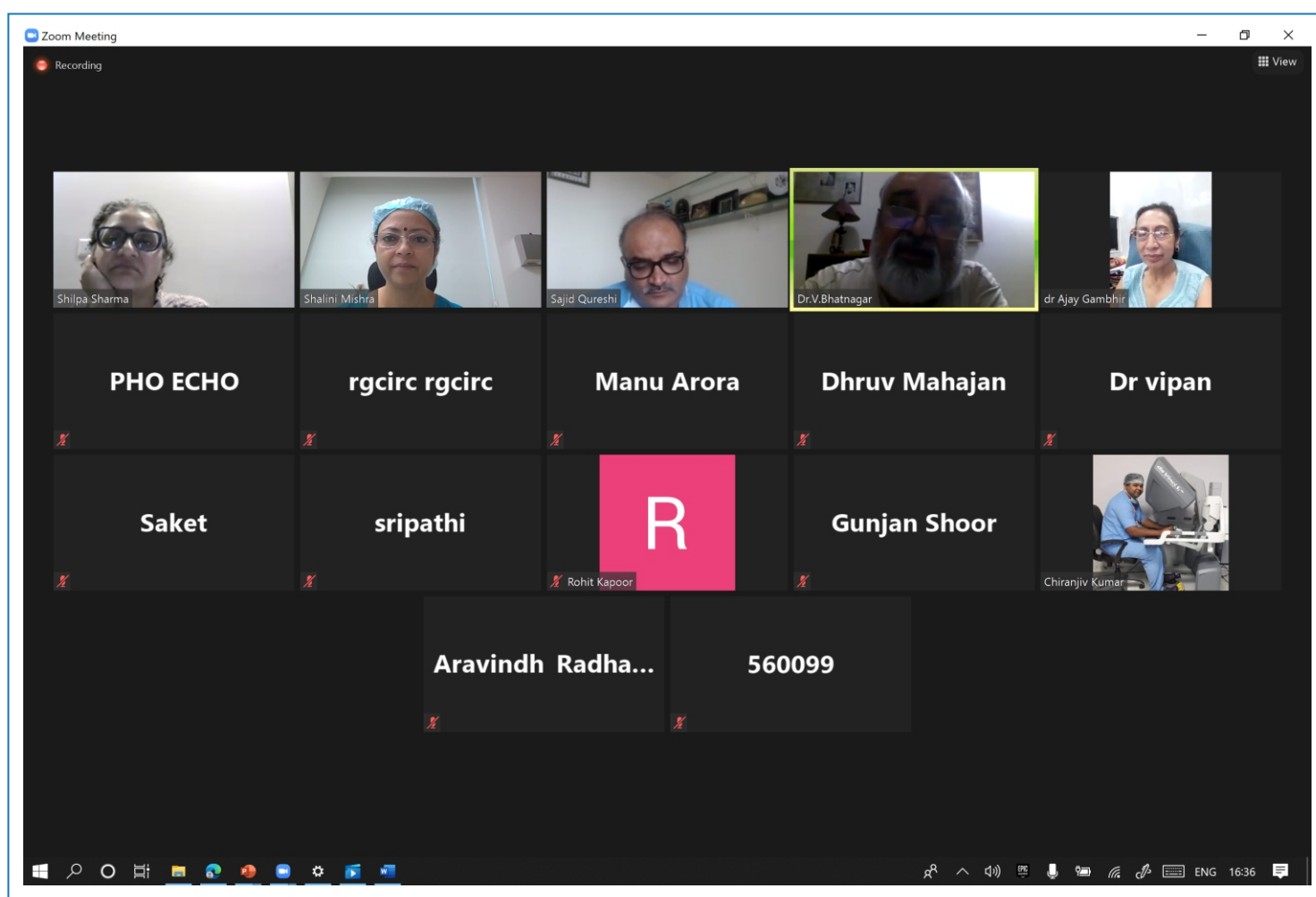
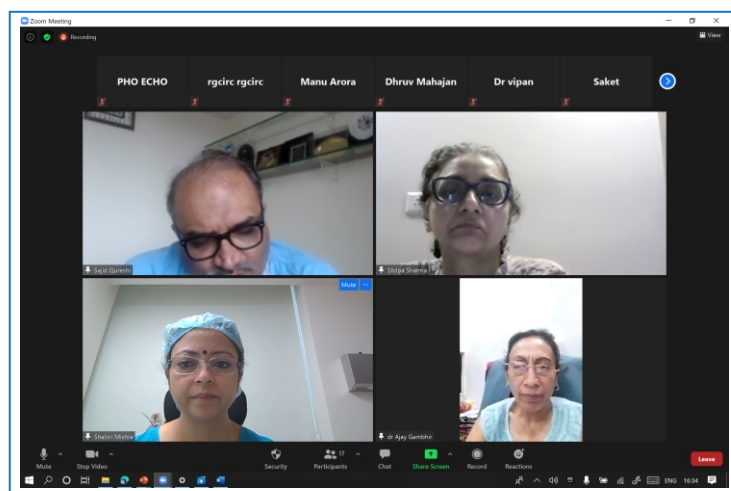
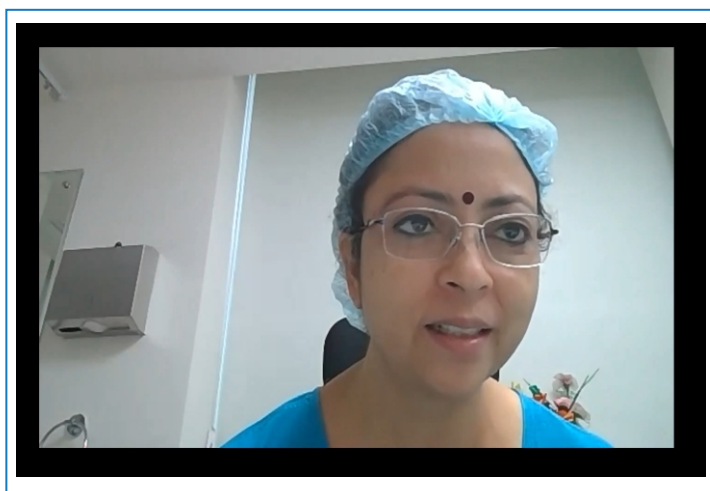
## WEBINAR ON ONCOLOGY WITH IMA AYUS, FARIDABAD

RGCIRC organized a webinar in association with IMA Ayus, Faridabad on Friday, 11<sup>th</sup> September 2020 through Zoom. Dr. Manish Sharma, Consultant - Medical Oncology delivered a lecture on "Approach to a Patient with Cancer" in the said virtual meeting. The webinar was very well appreciated by the gathering.

## VIRTUAL MEETING ON MANAGEMENT OF GENITO - URINARY RHABDOMYOSARCOMA

Dr. Shalini Mishra from the department of Pediatric Surgical Oncology, RGCIRC, organized the first virtual meeting of the Delhi Association of Pediatric Surgeons on Saturday, 12<sup>th</sup> September 2020 from 02:00 pm to 04:00 pm. The Zoom meeting was attended by nearly 100 participants from Delhi as well as National IAPS and even members of the PHO (Pediatric Hematology Oncology) group. Since September is observed as Childhood Cancer Awareness month world-wide, the topic for the day was Management of Genitourinary Rhabdomyosarcoma. Eminent speakers disseminated their knowledge on various aspects of the condition which included Prof Sandeep Agarwala from AIIMS, Prof. Sajid Qureshi from Tata Memorial Cancer Institute Mumbai, Dr. Shalini Mishra from RGCIRC and Dr. Kundan Singh Chufal from RGCIRC. There was active virtual interaction from the audience.

After the academic sessions, members of the Childhood Cancer Support Group (Dept. of Pediatric Hematology Oncology, RGCIRC) “AASHAYEIN” interacted with the audience to explain about their wonderful work. They also shared a beautiful dance performance video shot during the pandemic. Overall the meeting was a success and we received excellent feedback and appreciation from the participants.





## WORLD PATIENT SAFETY WEEK

A Patient Safety Week was observed at Rajiv Gandhi Cancer Institute and Research Center from 15<sup>th</sup> to 21<sup>st</sup> September 2020 to realign the awareness of hospital staff on World Patient Safety Day on 17<sup>th</sup> September 2020. The theme for this year was “Health Worker Safety: A Priority for Patient Safety” and the slogan was “Safe Health Workers. Safe Patients”.

The patient safety week was observed at our hospital by dedicating various activities related to the six International Patients Safety Goals (IPSG) namely:

- Identify patient correctly
- Improve effective communication
- Improve the safety of high alert medications
- Ensure correct-site, correct procedure, correct-patient surgery
- Reduce the risk of healthcare associated infections
- Reduce the risk of patient harm resulting from falls.



A webinar was organized on the World Patient Safety Day, where Directors and consultants participated by giving presentations on various aspects of patient safety. Opening remarks for the webinar were given by CEO and Medical Director.

Apart from daily webinars, competitions for posters, slogans and poems were also held. Daily mailers were sent for virtual webinars between 12:00 pm to 01:00 pm which were followed by compliance rounds and a daily quiz.

## WEBINAR ON ONCOLOGY WITH IMA FARIDABAD

RGCIRC organized a webinar in association with IMA Faridabad on Saturday, 19<sup>th</sup> September 2020 through Zoom. Dr. Amitabh Singh, Consultant - Uro Oncology delivered a lecture on “Robotic Surgery in Uro Oncology” and Dr. Vandana Jain, Consultant - Gynae Oncology spoke on “Role of Robotic Surgery in Gynae Oncology” in the said virtual meeting. The webinar was very well appreciated by the gathering.

## WEBINAR ON ONCOLOGY WITH MERA SWAASTH PHYSICIANS NETWORK SOUTH DELHI

RGCIRC organized a webinar in association with Mera Swaasth Physicians Network, South Delhi on Monday, 28<sup>th</sup> September 2020 through Zoom. Dr. Manish Sharma, Consultant - Medical Oncology delivered a lecture on “Role of Immunotherapy in Cancer Treatment” in the said virtual meeting. The webinar was very well appreciated by the gathering.

## "कोविड - 19: पेशेवर तनाव ही नहीं भावनात्मक तनाव से भी गुजर रहे हैं कोरोना चिकित्सक एवं नर्सिंग स्टाफ"

कोरोना वायरस के खिलाफ लड़ाई में अग्रिम मोर्चे पर डटे स्वास्थ्यकर्मी मरीजों को संभालने का चुनौतीपूर्ण कार्य कर ही रहे हैं दूसरी ओर वे एक और लड़ाई लड़ रहे हैं जो है अपनी पेशेवर चिंताएं या तनाव और भावनात्मक तनाव ।

उनको चिंता अपने से ज्यादा परिवार और बच्चों की रहती है। एक नर्स से जब बात की तो उसने बताया की " मैंने बीते एक महीने से अपने छः माह के बच्चे को छुआ तक नहीं है, और अपने घर के एक कमरे में अलग से रहती हूँ । जब वो डर मन में आता है तो मेरे हाथ और पैर काँपने लगते हैं और नींद भी नहीं आती है। कई बार चिंता होती है की मैं कहीं अपने परिवार और कार्यालय के सहकर्मियों को खतरे में तो नहीं डाल रही।"

जब मैं अपने सहकर्मियों के बारे में सुनती हूँ की उनको कोरोना पॉजिटिव हो गया है तो चिंता और बढ़ जाती है। क्या यह डर हमारे अंदर से निकल पायेगा । आज हर एक के मन में यही सवाल बार बार आता है, और हम इसे दबा देते हैं क्योंकि हमें पता है की इसका कोई इलाज नहीं है । इस भागती दौड़ती जिन्दगी में अचानक लगे इस ब्रेक और कोरोना वायरस के डर ने लोगों के मानसिक स्वास्थ्य पर प्रभाव डालना शुरू कर दिया है। इस बीच चिंता, डर, अकेलेपन और अनिश्चितता का माहौल बन गया है ।

कोरोना वायरस से बचाव के लिए पूरे भारत में लॉकडाउन है, फिर भी चिकित्सक एवं नर्सिंग स्टाफ बराबर काम कर रहे हैं । चिंता से हमारे मानसिक एवं शरीर और व्यवहार पर भी असर होता जा रहा है । जो काम हम करना चाहते हैं वो भी नहीं कर पा रहे हैं ।

इस मानसिक तनाव की स्थिति से बाहर निकलना बहुत जरूरी है वरना तनाव अंतहीन हो सकता है । वास्तव में सबको एक मनोवैज्ञानिक और काउंसलर की जरूरत है जो सबकी मदद कर सकते हैं । इस पेशेवर तनाव और भावनात्मक तनाव को दूर करने में जो हर कदम में सहायक सिद्ध हो रहे हैं।

मनोवैज्ञानिक और काउंसलर इस महामारी जो, कोरोना वायरस के खिलाफ बचाव कार्य में जुटे हैं । जो हमारी मानसिक स्वास्थ्य में मदद कर रहे हैं ।

जब भी जीवन में कुछ अकाल्पनिक होता है जिसकी जानकारी नहीं होती तब शुरुआत में बहुत चिंता होती है । जबकि यह बीमारी सब के लिए खतरनाक एवं चिंताजनक है ।

हमारे अनुसार कोरोना से लड़ना है तो अपने मन को मजबूत करना है और अपने डर को निकालना है। तभी इन सारी समस्याओं से बाहर आ सकते हैं, और अपने को मजबूत कर सकते हैं । अब हम को अपना जीवन चक्र को बदलना होगा । अगर कोरोना से लड़ना है तो अपने आप को मानसिक रूप से मजबूत करना होगा। जब हम मानसिक रूप से मजबूत हो जायेंगे तभी हम अपने पेशेवर तनाव और भावनात्मक तनाव को संभाल पाएंगे। इसके लिए भावनाओं को समझना और दिल की बात किसी अपने या मनोवैज्ञानिक को बताएं। अब हम को खुद की देखभाल करना होगा और इस तनाव को दूर करना होगा, सावधानी पूर्वक रहना होगा तभी इस कोरोना वायरस जैसे बीमारी से लड़ पाएंगे ।

"समझ गया दिल ये भी अब तो समझाने से

लड़ी जाएगी ये लड़ाई अब आशियाने से

मिलकर नहीं अलग अलग लड़ना है हमे

में लड़ता अपने तुम लड़ो अपने ठिकाने से

घर में हो सुरक्षित इसे कैद न समझो

मेरे दोस्त कट जायेंगे ये दिन तेरे मेरे मुस्कराने से।"

धन्यवाद ।

डॉ. हर्षा अग्रवाल  
(नैदानिक चिकित्सक)  
विभाग प्रमुख

साइको ऑन्कोलॉजी विभाग

राजीव गाँधी कैंसर इंस्टिट्यूट एंड रिसर्च सेंटर (आर. जी. सी. आई. आर. सी.)

पंकज वर्मा  
(मनोवैज्ञानिक काउंसलर)

## WELCOME TO THE RGCIRC FAMILY

### July



**Dr. Sunil Kumar Puri**  
Director  
Radiology Department



**Dr. Mini Mehta**  
Physician  
Palliative Care & Homeopathy

## RGCIRC - STAR EMPLOYEES

### July



**Mr. Neeraj Vats**  
Senior Staff Nurse  
Nursing Department



**Ms. Jamuna Chhetry**  
Staff Nurse  
Nursing Department



**Ms. Athira Francis**  
Staff Nurse  
Nursing Department



**Mr. Birbahadur Singh**  
P.T.R  
Security Department



**Mr. Anil Kumar**  
G.D.A  
Housekeeping Department

### August



**Ms. Anju Mathew**  
Staff Nurse  
Nursing Department



**Ms. Farheen**  
Staff Nurse  
Nursing Department



**Mr. Shintu Sebastian**  
Staff Nurse  
Nursing Department



**Mr. Vishal**  
Sr. G.D.A  
Housekeeping Department

### September



**Dr. Pragya Shambhawi**  
Junior Resident  
Casualty & Day Care



**Ms. Shiny Mol Abraham**  
Team Leader  
Nursing Department



**Ms. Anupama**  
Sr. Staff Nurse  
Nursing Department



**Mr. Tenzin Sangmo**  
Sr. Staff Nurse  
Nursing Department



**Ms. Rameshwari**  
Ward Aaya  
Housekeeping Services

# INTERVIEW OF DR. RAWAL ON “NEW THERAPIES REVOLUTIONIZING CANCER CARE IN INDIA “ (BUSINESS STANDARD)

## Business Standard

National Doctor's Day | 01 July 2020

### New therapies revolutionizing cancer care in India

New therapies are not only making cancer cure easier and faster but improving the quality of life while leaving least detrimental effect on the body. Excerpts from an interview with **DR SUDHIR KUMAR RAWAL**, Medical Director and Chief of Genito-Uro Surgical Oncology at Rajiv Gandhi Cancer Institute & Research Centre (RGCIRC) in which he also answered queries pertaining to Covid and special precautions to be taken by cancer patients

#### How has cancer care scenario changed in the last one decade?

Cancer care has undergone a metamorphosis of sorts in the last few years. A large number of dedicated cancer centres have come up. Multi-specialty hospitals are also expanding cancer care facilities. More number of young doctors are taking up cancer as a specialty and even going for sub specialty like Uro oncology, Gynaec oncology, GI oncology, Breast surgery, thoracic surgery, Head & Neck surgery etc. RGCIRC is the leading centre for cancer care in the country since we have 13 sub specialties in surgery, 6 in medical oncology and 5 in radiation oncology.

Also cancer care is getting more affordable with a significant percentage of cancer medicines cheaper today by 30-40% than a few years ago. Technologically also cancer treatment has taken a big leap. There is much more hope today for cancer cure than it was 10 years ago.

So, wider availability of cancer care, its affordability and the efficacy of treatment through new advancements are three key aspects of characterizing cancer care in the country in the last one decade.

#### Can you throw some light on the new technologies/ advancements in cancer care?

Cancer care has witnessed massive advancements. Traditionally, cancer treatment has three important modes- Radiation, Surgery and Medicine. Super-specialty hospitals such as RGCIRC are incorporating

new cutting-edge technologies in all the three domains.

In surgery, we have increasing role of Robotic surgery today. The advancement in robotic surgery is the precision it offers in treatment of cancer so that organs are preserved and healthy tissues are not harmed. Especially in urological cancer, lung cancer and head & neck cancer, Robotic surgery has revolutionized the treatment.

New techniques in Radiation therapy help protect normal tissues while providing high dose of radiation to the tumour. Technologies like IMRT, IGRT and Proton therapy have led to a sea change in cancer treatment. The radiation related toxicity/ morbidity which used to be very high earlier has come down since a selective high dose of radiation can be given to specific areas and avoiding toxicity to others. Tomotherapy and Cyber knife, two key robotic radio therapy devices will soon be available at RGCIRC. In fact RGCIRC will be amongst the first few centres in India to have it.

In Medical oncology, traditional chemotherapy is being increasingly replaced by Immunotherapy and Targeted therapy. Targeted therapy drugs look for targets at the cancer sites and are given in addition to conventional chemotherapy drugs to increase the killing of cancer cells and thereby increase survival rates. In case of Immunotherapy, which is state-of-the-art therapy, the immune system of the body is charged to such

## Q&A

Dr. Sudhir Kumar Rawal

an extent that the body itself fights against the cancer cells and pushes them out of the circulation. Immunotherapy and Targeted therapy have changed the course of treatment in cancers like lung and breast cancer.

#### Being a pioneer in Robotic surgery, how do you think the Robotic surgery has led to change of outcome in cancer surgeries?

Robotic surgery has revolutionized the cancer surgery especially for the cancers of prostate and urinary bladder. RGCIRC has the distinction of having undertaken maximum no of cancer surgeries through robotics in South Asia.

Robotic surgery has unique advantages over traditional surgeries as incision is very small, it causes less blood loss, less pain, leads to early recovery, entails less hospital stay and less amount of analgesic (pain killer) drug requirement post operation.

Not only in prostate, Robotic surgery is method of choice in several other cancers where surgery requires complex steps for instance GI surgery, Head & neck surgery, thoracic surgery etc. In gynaecology it is being used for uterine cancer and cervix cancer.

Higher expense has been a deterrent in wider application of robotics in cancer surgeries. However, now the technology is becoming cheaper. Many new companies are entering the fray. One Indian surgeon has

developed a robot which will soon be introduced.

#### What could be helpful in preventing the cancer?

We need to emphasize on screening and early detection of cancer. If you get treatment for any problem for a period of 3-4 weeks and the situation doesn't come under control, one needs to get investigations done very swiftly. If there is a sore, fever, lump, bleeding or altered bowel habits which don't settle down, investigations are a must. If we are able to catch the cancer at an early state the success rate of cure is very high. Maintaining good health through diet and exercise, avoiding tobacco in all forms and avoiding excessive alcohol could help in preventing a large number of cancers.

#### Coming to ongoing pandemic, what precautions cancer patients should take during Covid-19 outbreak?

Cancer patients are generally immune-compromised (have low immunity) and may experience more serious complications if they acquire Covid-19. Accordingly cancer patients should strictly observe social distancing, avoid outings as far as possible, take balanced diet and remain positive.

During Covid, one needs to consult with treating oncologists so that the visits to the hospital could be minimized without compromising with the cancer

treatment. For instance in case of cancer survivors, the routine surveillance visits can be easily postponed/ minimised.

If cancer patients have symptoms associated with Covid-19, they need to consult the treating oncologist on phone and not just turn up at the hospital without calling. Treatment of cancer can't be postponed but precautions should be taken. For instance chemotherapy and surgery needs to be postponed till the patient is cured of the infection. Even treatments such as Bone Marrow Transplant (BMT) can't take place till infection is cured.

#### What about the fear of contracting Covid in the hospitals and hence avoiding treatment?

Super specialty hospitals such as RGCIRC are taking all precautions to prevent the spread of infection. At RGCIRC, each person is screened properly and social distancing is maintained.

Moreover the hospital has strengthened the system of tele-consultancy which cancer patients could use for consultation sitting at home.

#### What can help improve immunity and fight off infections such as Covid-19 better?

Eating a well-balanced diet, exercising regularly, getting enough sleep, maintaining personal hygiene, frequent and proper hand washing, maintaining social distance and shunning tobacco in all forms can help one improve immunity.



**Dr. (Prof.) Sudhir Kumar Rawal**  
Medical Director and Chief of Genito-Uro Surgical Oncology  
Rajiv Gandhi Cancer Institute & Research Centre (RGCIRC)  
Rohini, Delhi

“ Robotic surgery has transformed the cancer treatment especially for the cancers of prostate and urinary bladder. RGCIRC has the distinction of having undertaken maximum number of cancer surgeries through robotics in South Asia.



## SARCOMA AWARENESS MONTH

## Indian Horizon

31 July 2020

## RGCIRC launches drive to raise awareness about Sarcoma cancer

Delhi 30, July There is urgent need to raise awareness about Sarcoma, the cancer of Bone & Soft tissues, to save life and limbs of young who are falling prey to this cancer. There are about 250 types of Cancers out of which only few major ones are being talked about. But there are many for which we are not even aware of. One such Cancer is Sarcoma, says Dr. Manish Pruthi, Consultant - Musculoskeletal Oncology, Rajiv Gandhi Cancer Institute and Research Centre, Rohini and Niti Bagh.

A sarcoma is a rare kind of cancer. Sarcomas are different from the much more common carcinomas because they happen in a different kind of tissue. Sarcomas grow in connective tissue -- cells that connect or support other kinds of tissue in your body. These tumors are most common in the bones, muscles, tendons, cartilage, nerves, and blood vessels of your arms and legs, but they can also happen in other areas of your body.

Though the sarcomas ac-



counts for 3% of all cancers in adults and 10-15% in pediatric age group, the disease needs to be considered in right earnest to save life as well as limbs.

There is a need to raise awareness as the cases are being reported late. Usually the tumor gets unnoticed in limbs or an inappropriate surgery is done. This can lead to further damage and also pose a threat

to lose the affected limb, which can have a significant impact on the life of young children / adults. We need to preserve the function of the affected limb and cure the cancer.

Most of the primary bone sarcomas happens in young age (<20 years) without known risk factors. So initially when the cancer is diagnosed, most parents are naturally in shock.

In NCR, another major issue is that not many hospitals have sarcoma management teams, which comprises of dedicated pediatric/ medical oncologists, surgeons, pathologists, radiation oncologists and rehabilitation services.

Talking about prevention, Dr. Pruthi says, prevention doesn't play a role here, as there are no significant risk factors. So, what's important is early and correct diagnosis. One should not ignore the persistent pain or increasing swelling in limbs, which is not responding to conservative treatment. As usually there is some history of injury, many of the times parents/child can implicate a persistent pain to injury sometime back.

It's not that every tumor/lump is cancerous; it could be an infection or a benign tumor. Sarcoma is a rare condition to have. Emphasis should be given on not ignoring increasing swelling or pain in limbs especially in young adults, as it could be sarcoma. Be aware, create awareness, diagnose sarcoma early, Dr Pruthi winds up.

## पंजाब केसरी

Punjab Kesari | 31 July 2020

## सारकोमा कैंसर की जागरूकता बढ़ाने के लिए अभियान

नई दिल्ली, (पंजाब केसरी) : सारकोमा हड्डियों और नरम ऊतकों में होने वाला एक दुर्लभ प्रकार का कैंसर है और इसकी जांच में किसी भी तरह की गलती से इलाज की पूरी प्रक्रिया प्रभावित होने का खतरा रहता है। राजीव गांधी कैंसर इंस्टीट्यूट एंड रिसर्च सेंटर (आरजीसीआईआरसी) के मसकुलोस्केलेटल ऑकोलॉजी कंसल्टेंट डॉ. मनीष परुथी बताते हैं कि आमतौर पर हाथ-पैरों में सारकोमा ट्यूमर का पता नहीं चल पाता है या फिर गलत सर्जरी कर दी जाती है। ऐसे मामले में अंगों को भारी नुकसान पहुंचता है और अंग काटने का खतरा बढ़ जाता है। हाथ या पैर कटने से किसी भी व्यक्ति का पूरा जीवन प्रभावित हो जाता है। ऐसे में सारकोमा को पहचानने, उसकी जांच करने एवं इलाज के उपलब्ध तरीकों के बारे में जागरूक करना जरूरी है। कैंसर का शिकार हो रहे युवाओं की जिंदगी और उनके अंगों की सुरक्षा के लिए सारकोमा के बारे में जागरूकता फैलाना समय की जरूरत है।

## hindustantimes

Lucknow | 01 Aug 2020

## shortstories

## AWARENESS DRIVE FOR SARCOMA CANCER

**PRAYAGRAJ :** There is urgent need to raise awareness about sarcoma, the cancer of the bone and soft tissues, to save lives and limbs of young who are falling prey to this cancer, say doctors. There are about 250 types of cancers and out of which only a few major ones are being talked about. But there are many for which we are not even aware of. One such cancer is sarcoma, says Dr Manish Pruthi, Consultant (Musculoskeletal Oncology), Rajiv Gandhi Cancer Institute and Research Centre, New Delhi.

HTC

## दैनिक भास्कर

Dainik Bhaskar | 31 July 2020

## सारकोमा ट्यूमर का पता न चलने या गलत सर्जरी से बढ़ जाता है अंग काटने का खतरा : डॉ. मनीष परुथी

नई दिल्ली। सारकोमा हड्डियों और नरम ऊतकों में होने वाला एक दुर्लभ प्रकार का कैंसर है और इसकी जांच में किसी भी तरह की गलती से इलाज की पूरी प्रक्रिया प्रभावित होने का खतरा रहता है। राजीव गांधी कैंसर इंस्टीट्यूट एंड रिसर्च सेंटर (आरजीसीआईआरसी) के मसकुलोस्केलेटल ऑकोलॉजी कंसल्टेंट डॉ. मनीष परुथी बताते हैं, "आमतौर पर हाथ-पैरों में सारकोमा ट्यूमर का पता नहीं चल पाता है या फिर गलत सर्जरी कर दी जाती है। ऐसे मामले में अंगों को भारी नुकसान पहुंचता है और अंग काटने का खतरा बढ़ जाता है। हाथ या पैर कटने से किसी भी व्यक्ति का पूरा जीवन प्रभावित हो जाता है। ऐसे में सारकोमा को पहचानने, उसकी जांच करने एवं इलाज के उपलब्ध तरीकों के बारे में जागरूक करना जरूरी है।"

कैंसर का शिकार हो रहे युवाओं की जिंदगी और उनके अंगों की सुरक्षा के लिए सारकोमा के बारे में जागरूकता फैलाना समय की जरूरत है। युवाओं में होने वाले कुल कैंसर में करीब 3 प्रतिशत मामले सारकोमा के होते



फैक्टर नहीं होते हैं। इसलिए जब इसका पता चलता है, तो ज्यादातर मरीज सदमे में आ जाते हैं। दिल्ली-एनसीआर में एक समस्या यह भी है कि यहां बहुत ज्यादा अस्पतालों में सारकोमा की जांच और इलाज की व्यवस्था नहीं है।

बचाव के तरीकों पर चर्चा करते हुए डॉ. परुथी ने कहा कि इस मामले में बचाव की बहुत बड़ी भूमिका नहीं होती है, क्योंकि इससे संबंधित कोई रिस्क फैक्टर नहीं होता है। इस मामले में सबसे ज्यादा ध्यान देने की बात है इसकी समय पर जांच। अगर पारंपरिक इलाज से कोई राहत नहीं मिल रही हो तो किसी को भी हाथ-पैरों में लगातार दर्द और बढ़ती सूजन को अनदेखा नहीं करना चाहिए। डॉ. परुथी ने आगे बताया कि हर गाँठ कैंसर नहीं होती है। गाँठ किसी संक्रमण के कारण या सामान्य भी हो सकती है। सारकोमा एक दुर्लभ मामला है। ध्यान देने की बात यही है कि हाथ-पैरों में लगातार दर्द और सूजन को अनदेखा नहीं करना चाहिए, विशेषरूप से युवाओं में, क्योंकि यह सारकोमा भी हो सकता है।

हैं, वहीं बच्चों के मामले में 10-15 प्रतिशत मामले सारकोमा के रहते हैं। इस स्थिति को देखते हुए सारकोमा के शिकार लोगों की जिंदगी और उनके अंगों की हिफाजत के लिए इस पर विशेष ध्यान दिए जाने की जरूरत है। डॉ. परुथी ने बताया कि आरजीसीआईआरसी जैसे अस्पतालों में जहाँ सारकोमा के इलाज की व्यवस्था है, वहाँ देखने में आया है कि ज्यादातर मामलों की जानकारी बहुत देर से हो पाती है, जिससे कम उम्र में ही बच्चों को अपना हाथ या पैर गंवाना पड़ जाता है। सारकोमा कम उम्र में होता है और उस उम्र में तंबाकू खाना या खराब दिनचर्या जैसे रिस्क

## नवोदय टाइम्स

Navodaya Times | 01 Aug 2020

## वित्चक रैंड

## सारकोमा कैंसर से बचाव के लिए अभियान



सारकोमा हड्डियों और नरम ऊतकों में होने वाला एक दुर्लभ प्रकार का कैंसर है और इसकी जांच में किसी भी तरह की गलती से इलाज की पूरी प्रक्रिया प्रभावित होने का खतरा रहता है। राजीव गांधी कैंसर इंस्टीट्यूट एंड रिसर्च सेंटर (आरजीसीआईआरसी) इसके लिए जागरूकता अभियान चला रहा है। अस्पताल के मसकुलोस्केलेटल ऑकोलॉजी कंसल्टेंट डॉ. मनीष परुथी ने बताया कि आमतौर पर हाथ-पैरों में सारकोमा ट्यूमर का पता नहीं चल पाता है या फिर गलत सर्जरी कर दी जाती है। ऐसे मामले में अंगों को भारी नुकसान पहुंचता है और अंग काटने का खतरा बढ़ जाता है। हाथ-पैरों में लगातार दर्द और बढ़ती सूजन को अनदेखा नहीं करना चाहिए क्योंकि यह सारकोमा भी हो सकता है। डॉ. परुथी ने बताया कि हर गाँठ कैंसर नहीं होती है। गाँठ किसी संक्रमण के कारण या सामान्य भी हो सकती है।



# INTERVIEW OF DR. NITIN BANSAL ON HOW DOCTORS ARE DEALING WITH VIRUS

THE DAILY GUARDIAN  
TUESDAY | 18 AUGUST 2020  
NEW DELHI

## HEALTH & WELLNESS | 9

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### CORONA WARRIORS

# How doctors are dealing with virus

As doctors continue to fight against the pandemic as frontline warriors, *The Daily Guardian* talks to some of them to know how they are maintaining a healthy work-life balance.

KRITIKA DUA  
NEW DELHI

Healthcare professionals are worrying about their families' health besides their own — like the rest of us. They are wondering whether it's safe to come home after disinfecting themselves or they should live in a separate floor or place. Some of them are only seeing their family through the window or video calling them, while others thoroughly scrub themselves in the shower before greeting their loved ones. Be it taking the right precautions at the workplace or maintaining a bit of judicious social distancing at home, these doctors are doing everything possible to keep their loved ones safe. All this while, giving utmost importance to treating patients



### No better stress buster than to see people recover: Dr Nitin Bansal

Initially, the strange scenario felt like a burden. Learning to wear PPE was not an easy task and there was a lurking fear whether the PPE was working or not. There was still not much clarity on issues like how closely a patient can be examined or how much can one consult a patient. Now five months into the pandemic, I can wear a PPE within five minutes which used to take me 15-20 minutes before. We are at peace since many patients are recovering in front of our eyes. There is no better stress buster than to see their health improving. Support from my family and the hospital has helped me maintain a sound balance. The fact that you are not alone and have a supporting infrastructure helps you overcome the challenges.

Dr Bansal is a consultant, infectious diseases at Rajiv Gandhi Cancer Institute & Research Centre, Delhi.



### Highly fulfilling to serve the nation at this time: Dr Shuchin Bajaj

Life has become an emergency drill. Being a doctor at a full-fledged Covid-19 hospital, my life revolves around emergencies. Though it's highly fulfilling to serve your nation at this time of need, at times we also crave for a normal life. I go to the hospital and treat patients, then come home and scrub myself while taking a shower. The intensity is probably harder than ever. I diligently do it three a day to avoid putting my family's life at stake. Like other parents, I worry for my children but try to hold my feelings and emotions inside. As doctors, we have been trained well to do that. I hope the pandemic will end soon.

Dr Bajaj is a consultant, internal medicine at Ujala Cygnus Orthocare Hospital, Delhi.

I believe in existing for a purpose: Dr Jayakanth MJ  
I believe that everything has a purpose and my existence



is to serve the current purpose that the world is struggling with. I exercise for a longer duration and consume more fruits and vegetables to feel light and energetic throughout the day. I used to be stressed about the pandemic earlier. But with the government's awareness campaigns about Covid-19, I started seeing the change in



### Can't allow fears to overpower our will: Dr Vijay Dutta

Duty at the hospital has become more challenging than pre-pandemic times as there are strict protocols to adhere to for our safety. This was never the case before as we used to always be concerned for patients' safety. Wearing PPEs for long hours means no food or water or even restroom breaks but it's necessary. The fear of contracting the infection exists but we cannot allow our fears to overpower our will. We are certainly worried about our families, especially those with elderly parents or toddlers at home. But understanding what our nature of work entails we support each other. Being around them does bring a sense of normalcy in our lives.

Dr Dutta is a consultant, internal medicine at Indian Spinal Injuries Centre, Delhi.

nal medicine at Indian Spinal Injuries Centre, Delhi.



### Discipline is the key: Dr Amita Phadnis

Covid-19 has forced us to reorganise our lives, a proper structure and discipline are key, which we had to re-ensure in our lives. During this time, we found that meditation has been largely beneficial as it keeps us fit and maintains our mental resilience. I am mainly working from home as online consultations are the new thing. Making conscious efforts towards staying positive is helping me to strike a balance. In the evenings, I make virtual social engagements such as calling friends, organising online games or re-living lost connections.

Dr Phadnis is CMD and paediatrician & neonatologist at ONP Hospitals, Pune.

### DOCTORS ANSWER FREQUENTLY ASKED QUESTIONS

**Q: With new information and findings emerging every other day, how have dealt with the complexities involved with this fatal disease?**

**Dr Ishwar Gilada:** Covid-19 being a new disease, new information and surprises are expected. We cannot lose guard when getting any good news nor can remain panic-stricken with bad news. Life has to go on. Being a doctor, I cannot sit idle at home and deny treatment to my patient. I do take the required precautions without being a hypochondriac about it.

**Q: How are you dealing with apprehensions about the safety of your children?**

**Dr Shuchin Bajaj:** I can't recall the last time I hugged my children as there is always a fear that it can spread the deadly virus to my children who diligently follow hygiene practices. I try to be there for my kids. Once the pandemic is over, I can go back to loving them without any fear, maybe more this time. I haven't been able to attend the digital parents meet since some time now as it clashes with my peak operating hours. We haven't even watched films or shows together in recent times. However, I try to utilise whatever time I get with my family before rushing to the hospital.

**Q: What are your sanitisation habits like in the day-to-day life owing to the pandemic?**

**Dr Amita Phadnis:** Ever since the pandemic, everyone is aware of 'Donning and Doffing' which involves the procedure of wearing and removing the protective gear while entering and leaving health and social care settings. We follow an adaptation of that process at home. The major threat is from the people outside who are entering our house. We ensure that they follow the safety and sanitation rules.

**Q: Have you found any upsides to the new normal in the times of pandemic?**

**Dr Jayakanth MJ:** Many individuals have found the most valuable thing on earth, suddenly available in abundance — time. Many of my patients utilised this time very well and brought their uncontrolled blood sugar and hypertension to the desired level.

**Q: With Unlock 3.0, how would you encourage people into maintaining social distancing and taking hygiene seriously?**

**Dr Nitin Bansal:** Life is all about finding a balance. One needs to balance fear with practicality and move on. Covid-19 needs to be taken seriously but that should not stop us from moving on with our lives and its businesses. Simple precautions such as physical distancing, good hand hygiene and wearing masks will help a great deal. If one still contracts infection, we have good infrastructure to save lives.



## MEDIA COVERAGE ON CHILDHOOD CANCER



# दैनिक जागरण

Dainik Jagran | 23 Sept 2020

## बच्चों में कैंसर के 70 प्रतिशत मामलों का इलाज संभव : डॉ. गौरी कपूर

जागरण संवाददाता, बाहरी दिल्ली : कैंसर किसी भी व्यक्ति को किसी भी उम्र में हो सकता है। लेकिन अगर इसका सही समय पर पता लगा लिया जाए तो उपचार संभव है। यह बातें रोहिणी स्थित राजीव गांधी कैंसर इंस्टीट्यूट एवं रिसर्च सेंटर की निदेशक (बाल चिकित्सा, हेमेटोलॉजी एवं ऑन्कोलॉजी) डॉ. गौरी कपूर ने कही। वे चाइल्डहुड कैंसर अवेयरनेस कार्यक्रम के तहत अपने विचारों को व्यक्त कर रही थीं। सितंबर को चाइल्डहुड कैंसर अवेयरनेस माह के रूप में मनाया जाता है।



उन्होंने कहा कि बच्चों में कैंसर बहुत आम नहीं है। एक अनुमान के मुताबिक, भारत में 14 साल से कम उम्र के बच्चों में कैंसर के लगभग 40 से 50 हजार नए मामले हर साल सामने आते हैं। बच्चों में कैंसर के करीब 70 प्रतिशत मामले इलाज के योग्य हैं। बच्चों में होने वाले कैंसर के प्रकार वयस्कों की तुलना में अलग तरह के होते हैं। जैसे ल्यूकेमिया, ब्रेन एवं अन्य सेंट्रल नर्वस सिस्टम ट्यूमर, न्यूरोब्लास्टोमा, लिम्फोमा, रैब्डोमायोसार्कोमा, रेटिनोब्लास्टोमा, हड्डी का कैंसर आदि। आमतौर पर इसके अलावा अन्य प्रकार के कैंसर बच्चों में नहीं देखे जाते। बच्चों में इसके लक्षण को पहचानना मुश्किल होता है, क्योंकि ये सुस्ती, कमजोरी, चक्कर आना, पीठ, पैर, जोड़ों में दर्द, सिरदर्द, असामान्य रक्तस्राव, मसूढ़ों से खून आना, भूख न लगना, वजन घटना, पेट में सूजन, पेट दर्द, कब्ज, सांस लेने में कठिनाई, लगातार खांसी, पीठ दर्द, पुतली के पीछे सफेद रंग आदि जैसी सामान्य बीमारियों की तरह होती है। इसमें से कोई लक्षण होने पर जांच जरूरी है और थोड़ा भी शक होने पर कैंसर अस्पताल में जांच कराना चाहिए। उन्होंने कहा कि गलत खान-पान व खराब जीवन शैली के चलते बच्चों में भी कैंसर की शिकायत पाई जा रही है। उन्होंने जोर देकर कहा कि बच्चों को स्वस्थ भोजन कराएं।



Pioneer | 22 Sept 2020

## सही लाइफस्टाइल बच्चों को कई कैंसर से बचाने में कारगर : डॉ. गौरी कपूर

प्रायनियर समाचार सेवा। नई दिल्ली।

कैंसर आज न केवल भारत में बल्कि पूरे विश्व में एक ऐसी भयानक बीमारी बन चुका है। जागरूकता के प्रयासों के बावजूद यह महामारी में तेजी से फैल रहा है। ऐसे में कैंसर तथा उसके कारणों के प्रति लोगों को जागरूक किए जाने की आवश्यकता है ताकि वे इस बीमारी, इसके लक्षणों और इसके भयावह खतरे के प्रति जागरूक रहें। अगर कैंसर का सही समय पर पता लगा लिया जाए तो उपचार संभव है। सितंबर माह को 'चाइल्डहुड कैंसर अवेयरनेस मंथ' के रूप में मनाया जाता है।



लेकर जानकारी साझा की। डॉ. गौरी कपूर ने बताया, बच्चों में कैंसर बहुत आम नहीं है। कुछ पश्चिमी देशों में 10 लाख बच्चों में 110 से 130 बच्चों में इसकी शिकायत मिली है। आबादी के आधार पर पर्याप्त आंकड़े नहीं होने के कारण अपने देश में इस तरह के मामलों का पूरी तरह अनुमान लगाना संभव नहीं है। हालांकि एक अनुमान के मुताबिक, 14 साल से कम उम्र के बच्चों में कैंसर के लगभग 40000 से 50000 नए मामले हर साल सामने आते हैं। अधिकतर बच्चों का समय से निदान नहीं हो पाता, जिसका मुख्य कारण है स्वास्थ्य सेवा तक पहुंचने में देरी। उन्होंने बताया कि बच्चों में होने

वाले कैंसर में सबसे आम ल्यूकेमिया (ब्लड कैंसर), लिंफोमा और मस्तिष्क या पेट में ट्यूमर हैं। बच्चों में होने वाले कैंसर के प्रकार वयस्कों की तुलना में अलग तरह के होते हैं जैसे ल्यूकेमिया, ब्रेन एवं अन्य सेंट्रल नर्वस सिस्टम ट्यूमर, न्यूरोब्लास्टोमा, लिम्फोमा, रैब्डोमायोसार्कोमा, रेटिनोब्लास्टोमा, हड्डी का कैंसर आदि। आमतौर पर इसके अलावा अन्य प्रकार के कैंसर बच्चों में नहीं देखे जाते।

उन्होंने आगे बताया कि कैंसर के लक्षण को पहचानना मुश्किल होता है क्योंकि ये सामान्य बीमारियों की तरह होते हैं जैसे सुस्ती, कमजोरी, चक्कर आना, पीठ, पैर, जोड़ों में दर्द, सिरदर्द, असामान्य रक्तस्राव, मसूढ़ों से खून आना, भूख न लगना, वजन घटना, पेट में सूजन, पेट दर्द, कब्ज, सांस लेने में कठिनाई, लगातार खांसी, पीठ दर्द, पुतली के पीछे सफेद रंग आदि। इसलिए इसमें से कोई लक्षण होने पर अस्पताल में जांच जरूरी है और थोड़ा भी शक होने पर कैंसर अस्पताल में जांच कराया जाये।

# नवोदय टाइम्स

Navodaya Times | 23 Sept 2020

## कैंसर से बचाना है तो बच्चों को जंक फूड से बचाएं: डॉ. गौरी कपूर

नई दिल्ली, 22 सितम्बर (नवोदय टाइम्स) : बच्चों में कैंसर आम नहीं है। भारत में 14 साल से कम उम्र के बच्चों में कैंसर के लगभग 40000 से 50000 मामले हर साल सामने आते हैं। बच्चों में होने वाले कैंसर अलग तरह के होते हैं जैसे ल्यूकेमिया, ब्रेन एवं अन्य सेंट्रल नर्वस सिस्टम ट्यूमर, न्यूरोब्लास्टोमा, लिम्फोमा, रैब्डोमायोसार्कोमा, रेटिनोब्लास्टोमा, हड्डी का कैंसर आदि। आमतौर पर इसके अलावा अन्य प्रकार के कैंसर बच्चों में नहीं देखे जाते। यदि समय पर पता चल जाए तो बच्चों में कैंसर को ठीक किया जा सकता है। यह बातें 'चाइल्डहुड कैंसर अवेयरनेस मंथ' सितम्बर के अवसर पर आयोजित कार्यक्रम में बच्चों में कैंसर की विशेषज्ञ डॉक्टर गौरी कपूर ने कही।



राजीव गांधी कैंसर इंस्टीट्यूट एवं रिसर्च सेंटर (आरजीसीआईआरसी) नीति बाग की मेडिकल डायरेक्टर और बाल चिकित्सा हेमाटोलॉजी एवं ऑन्कोलॉजी डिपार्टमेंट की निदेशक डॉ. कपूर ने बच्चों में कैंसर के लक्षणों को पहचानना मुश्किल होता है क्योंकि ये सामान्य बीमारी की तरह होते हैं जैसे सुस्ती, कमजोरी, चक्कर आना, पीठ, पैर, जोड़ों में दर्द, सिरदर्द, असामान्य रक्तस्राव, भूख न लगना, वजन घटना, पेट में सूजन, पेट दर्द, कब्ज, सांस लेने में कठिनाई, लगातार खांसी, पीठ दर्द, पुतली के पीछे सफेद रंग आदि। ऐसे में इसमें से कोई लक्षण होने पर अस्पताल में जांच जरूरी है और थोड़ा भी शक होने पर कैंसर अस्पताल में जांच करानी चाहिए। गलत खान-पान व खराब लाइफस्टाइल के चलते बच्चों में कैंसर की शिकायत पाई जा रही है। कैंसर से बचने के लिए बच्चों को पोषिक भोजन कराना चाहिए और जंक फूड से बचना चाहिए। बच्चों के अंदर शुरू से ही हरी सब्जियों को खाने की आदत डालनी चाहिए। डॉ. कपूर ने कहा कि कैंसर से जूझ रहे बच्चों के जीवित बचने के मामलों में पिछले 30 साल में उल्लेखनीय सुधार हुआ है।

# पंजाब केसरी

Punjab Kesari | 24 Sept 2020

## सक्षिप्त समाचार

### बच्चों में कैंसर के मामलों का इलाज संभव

नई दिल्ली, (पंजाब केसरी) : कैंसर किसी भी व्यक्ति को किसी भी उम्र में हो सकता है लेकिन अगर इसका सही समय पर पता लगा लिया जाए तो उपचार संभव है। सितंबर माह को 'चाइल्डहुड कैंसर अवेयरनेस मंथ' के रूप में मनाया जाता है। इस मौके पर दिल्ली स्थित राजीव गांधी कैंसर इंस्टीट्यूट एवं रिसर्च सेंटर (आरजीसीआईआरसी) की मेडिकल डायरेक्टर और निदेशक बाल चिकित्सा हेमाटोलॉजी एवं ऑन्कोलॉजी डॉ. गौरी कपूर ने बच्चों में होने वाले कैंसर को लेकर जानकारी साझा की। उन्होंने बताया कि बच्चों में कैंसर बहुत आम नहीं है। एक अनुमान के मुताबिक, भारत में 14 साल से कम उम्र के बच्चों में कैंसर के लगभग 40000 से 50000 नए मामले हर साल सामने आते हैं। बच्चों में होने वाले कैंसर के प्रकार वयस्कों की तुलना में अलग तरह के होते हैं जैसे ल्यूकेमिया, ब्रेन एवं अन्य सेंट्रल नर्वस सिस्टम ट्यूमर, न्यूरोब्लास्टोमा, लिम्फोमा, रैब्डोमायोसार्कोमा, रेटिनोब्लास्टोमा, हड्डी का कैंसर आदि। आमतौर पर इसके अलावा अन्य प्रकार के कैंसर बच्चों में नहीं देखे जाते। बच्चों में कैंसर के लक्षणों के बारे में डॉ. गौरी कपूर ने कहा कि इसके लक्षण को पहचानना मुश्किल होता है क्योंकि ये सामान्य बीमारी की तरह होते हैं जैसे सुस्ती, कमजोरी, चक्कर आना, पीठ, पैर, जोड़ों में दर्द, सिरदर्द, असामान्य रक्तस्राव, मसूढ़ों से खून आना, भूख न लगना, वजन घटना, पेट में सूजन, पेट दर्द, कब्ज, सांस लेने में कठिनाई, लगातार खांसी, पीठ दर्द, पुतली के पीछे सफेद रंग आदि। इसलिए इसमें से कोई लक्षण होने पर अस्पताल में जांच जरूरी है और थोड़ा भी शक होने पर कैंसर अस्पताल में जांच कराई जाए।

## MEDIA COVERAGE ON COVID 19 MORTALITY IN CANCER PATIENTS

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# Hospital highlights higher COVID-19 fatality rate in cancer patients

IANs 2 days ago

A study conducted by the Rajiv Gandhi Cancer Institute and Research Centre here has highlighted the high rate of COVID-19 infection in cancer patients and also revealed that the fatality rate in such patients is 7.6 times more than the national average fatality rate for COVID-19.

Public health experts postulate that the severity and resulting mortality in cancer patients with COVID-19 is amplified due to their elderly and immunocompromised state which is further worsened by cancer treatment.

"Our study highlights the incredibly high rates of COVID-19 in cancer patients. More distressingly, the CFR is 7.6 times more than the national average CFR for COVID-19," six researchers from the Delhi-based cancer hospital noted, after conducting a study on 186 active cancer patients with confirmed infection between June 8 and August 20.

Dr Vineet Talwar, Director of Medical Oncology at Rajiv Gandhi Cancer Institute and Research Centre, said that this is the first study to show the case fatality rate and its clinical association in Covid-19 infected cancer patients.

A total of 3,101 cancer patients were treated at the indoor facility of the centre. 1,088 patients had developed signs and symptoms suspicious of Covid-19. Of these, 186 tested positive for COVID-19 and formed the study cohort. The infection rate among all cancer patients treated at the centre was 6 per cent.

Besides this, the Covid-associated fatality rate in the cohort was 14.5 per cent as against the national average of 1.96 per cent, i.e. 27 out of 186 patients succumbed to the disease.

"Although the incidence and CFR was 14.5 per cent against the national average in this study, this can be ascribed to patient factors, visitations and admission in health care facilities with high risk of contracting infection. This was also seen in the New York hospital system with CFR of 28 per cent," Dr Talwar told IANS.

Cardiovascular diseases and diabetes posed a higher risk of death in this cohort. Co-morbid conditions like diabetes frequently co-occur with hypertension or coronary artery disease in cancer patients and can further weaken the immune response escalating the risk of death due to Covid-19.

Most cancer patients with coronavirus disease had solid malignancies (82.3 per cent); gastrointestinal cancer (21.5 per cent) was the common cancer type in such patients. About 17.7 per cent of cases presented with hematological malignancies, cancers that affect the blood, bone marrow, and lymph nodes.

More than a quarter of cases (26.9 per cent) were metastatic. Eighty-six patients (46.2 per cent) presented at least a single co-morbidity -- hypertension (24.2 per cent) and diabetes (18.3 per cent) were most common.

About 60 per cent of cases were on active cancer treatment and had received cancer-directed treatment within a month before the onset of COVID-19 symptoms. Thirty-seven per cent of patients were on chemotherapy. No significant effect on mortality was noted in the patients who had received anti-cancer therapy in the past month.

The doctors of the tertiary cancer care centre managed Covid-infected cancer cases by treatments including corticosteroids, hydroxychloroquine, remdesivir, tocilizumab and convalescent plasma therapy.

According to the study, assisted ventilation had to be given to 12 patients (6.4 per cent), however, all of them eventually developed COVID-related complications like pneumonitis and associated respiratory failure, septic shock or sudden cardiac arrest and succumbed to the disease.

Two recent studies from the European continent have shown a far greater case fatality rate in cancer patients with Covid-19. In the United Kingdom's Coronavirus Cancer Monitoring Project, a case fatality rate of 30.6 per cent was observed. Similarly, high rates were noticed in the New York hospital system where a rate of 28 per cent was observed.

"Relatively, lower case fatality rate in the present study when contextualised to CFR in the general population shows the similar proportion to those observed elsewhere. This study once again establishes the far higher CFR in cancer patients with COVID-19," the researchers said.



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# Delhi hospital highlights higher Covid fatality rate in cancer patients

Last Updated: Sat, Sep 19th, 2020, 18:27:19hrs

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