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Kenya to Expand Access to Cancer Diagnosis and Treatment Services



Dr Iqbal A. Khandwalla (left), Coast Province General Hospital's Chief Administrator in Mombasa, discusses the cancer registry data with Dr Zahra Mohamed, Cancer Clinic Medical Officer. (I Veljkovikj/IAEA)

“Our primary objective is to strengthen our existing health services to adequately address the growing cancer crisis.”

— Dr Nicholas Muraguri, Principal Secretary for Health

The Kenyan Government is planning to significantly increase the availability of public services for the early detection and treatment of cancer. The existing referral system for cancer patients will also be improved from community health clinics to hospitals at all levels.

“Our primary objective is to strengthen our existing health services to adequately address the growing cancer crisis,” said Dr Nicholas Muraguri, the Principal Secretary for Health. “Building on the experience we have in tackling communicable diseases, we plan to expand affordable cancer

services throughout the health system, particularly at the local level”, he remarked.

Kenya has one of the highest cancer burdens in sub-Saharan Africa. Each year, around 41,000 new cases are diagnosed, with 28,500 related deaths¹. According to the Ministry of Health, cancer is the third leading cause of death after infectious and cardiovascular diseases, with more than 80 percent of cancer cases diagnosed at a late or incurable stage. The country's most common forms of cancer are cervical and breast cancer in women, and prostate, throat and colon cancers in men.

In August 2016, a team of cancer experts from the International Atomic Energy Agency (IAEA), the World Health Organization (WHO) and the International Agency for Research on Cancer (IARC), conducted a comprehensive assessment, called an ‘imPACT Review’, of the national cancer control system and its needs at both national and provincial levels. The Review, coordinated by the IAEA's Programme of Action for Cancer Therapy (PACT), will guide the planning of a new Kenya Cancer Control Strategy for 2017-2021.

¹ Source: IARC GLOBOCAN (2012)



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Cancer
Therapy
PACT

During the mission, the team met with government representatives, civil society organizations, professional societies, academic institutions and international development partners. This also included visits to two of Kenya's largest county hospitals in Eldoret and Mombasa to discuss their plans to expand cancer treatment.



The experts found that Kenya has made significant progress developing cancer control services, policy and legislation since the last imPACT review in 2010 and are putting forward a set of detailed recommendations on activities that will help improve tackling the cancer burden in the country.

The government has also initiated a review of the National Cancer Control Strategy 2011-2016 with a view to improve access to a wide range of cancer services. "The biggest gaps we have in the response to cancer are in the early identification of cases, the availability of radiotherapy services and the provision of palliative care," said Dr Muraguri. "At the moment, Nairobi has the only public radiotherapy centre to treat Kenya's cancer patients," he said.

With the present shortage of public facilities, cancer patients face long waiting times for treatment, as most cannot afford private healthcare. Increasing the availability of publicly funded services will help reduce mortality rates and costs associated with long term treatment.

The expansion of Kenya's cancer services is supported through a joint IAEA, WHO and IARC initiative, aimed at building partnerships and sharing expertise and resources. Dr Joyce Nato, Technical Officer for the WHO Kenya Country Office underlined this and WHO's collaboration to improve the country's cancer registration system. "We are committed to support the further development and implementation of evidence-based programmes for cancer prevention, early detection and treatment.

In this regard, a good cancer surveillance system is essential to provide quality data for improved policy and planning purposes," she said.

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