

An Emerging



In May 2010, Dana Sacchetti was given the opportunity to accompany an IAEA mission to Tanzania and Kenya. Its objective — to comprehensively assess the cancer situation in both countries.

"I'd Rather Have AIDS Than Cancer"

1 May 2010 — An unimaginable sentence, and yet one that I heard in conversations throughout my journey with cancer patients in Tanzania and Kenya.

Once thought of as a 'rich world' disease, cancer is a looming public health catastrophe across east Africa and the developing world. Rates of incidence of the disease are rising in low- and middle-income countries. People lack access to information on how to identify early signs of different cancers. Those who do seek treatment typically have few options. Medication is expensive. Facilities are few and overcrowded. Compounding the challenge are the many stigmas attached to the disease.

A patient diagnosed with cervical cancer in Kenyatta National Hospital told me, "With HIV/AIDS, at least I know I have a fighting chance. The antiretrovirals are inexpensive and readily available, and people can live with the disease. With cancer, we just don't know how to cope."



Frederick Ikutwa, 41, is a proud cancer survivor living outside of Nairobi. "I owe my life to doctors who caught my cancer in time," he explains.

(Photo: D.Sacchetti/IAEA)

Feet on the Ground

2 May 2010 — Dar es Salaam: a teeming city on Tanzania's Indian Ocean coast. Choked with traffic. Congested with people. Movement and life everywhere.

Cancer is rapidly becoming a big problem in places like Dar. Minibuses and taxis belch out polluting fumes, diets are increasingly unhealthy, and the sedentary life of the city dweller are all factors leading

to increased incidences of cancer in countries like Tanzania.

Making matters worse, this city of nearly 4 million people holds few options for cancer treatment.

Yet a beacon of hope can be found along Dar's verdant shoreline. Ocean Road Cancer Institute is a small hospital, set up five years ago to offer much-needed cancer treatment to Tanzania's residents. At Ocean Road, hundreds of people are given daily access to radiotherapy machines, nuclear medicine, and chemotherapy drugs to fight the disease.

Meeting Muzne

3 May 2010 — It was at Ocean Road that I met Muzne Abubakar Haibar, a sweet and gentle mother of four. Nearly 40, Muzne comes from Zanzibar, a picturesque gem of an island known for its beautiful beaches and stony city center. About three years ago, Muzne discovered a lump in her breast, and quickly sought medical treatment. She was first diagnosed with breast cancer at Ocean Road in 2008, and had a partial mastectomy, or lumpectomy, performed at the time. Muzne immediately followed up this treatment with chemotherapy, and tests appeared to indicate that doctors had removed all cancerous tissue.

Unfortunately, the cancer returned months later, as Muzne began to experience deep pain within her chest. Her doctors then opted for a full mastectomy and a further regimen of chemotherapy.

"I thought I was ok then," she explained, recounting the experience of losing a breast to surgery. Muzne told me about the toll that her cancer had taken, not just on her body but on her family as well. Since Zanzibar is a three-hour ferry ride away from Dar es Salaam, she was separated from her family for weeks at a time during surgery, chemotherapy, and recovery.

Her fight took yet another turn for the worse when doctors discovered that her cancer had metastasized, or spread, to her spine. The day we met, she began to receive radiotherapy, and still seemed hopeful that she would pull through.

Epidemic *by Dana Sacchetti*

Led by the IAEA's PACT program, these missions strive to bring policymakers, doctors, and international organizations together to see what can be done to fight cancer at the national level. This is Dana's personal account of encounters with patients living with cancer, the doctors and health providers who treat them, and the administrators who set strategies for combating the disease.

The Children

4 May 2010 — Among the most arresting and powerful experiences from the trip was spending time in the children's ward at Ocean Road. Coming face-to-face with young lives that had been interrupted by various cancers is heartbreaking. But what struck me most was how avoidable many of the cases were.

One of the greatest success stories in oncology in recent decades has been in treating retinoblastoma, a cancer of the eye's retina that typically occurs in early childhood. In developed countries, signs of the cancer are quickly picked up and over 95% of children are cured. It's one of the more treatable forms of cancer as chemotherapy and other measures usually produce positive results.

Yet in Tanzania and Kenya, children and parents lack knowledge of the disease and have no access to health care. They seek treatment in later stages of the disease, which increases the risk that the disease may have spread.

This experience drove home the following point: it's not going to suffice to simply implement cancer therapy and viable health care strategies. Public outreach and education on cancer must play a strong role to foster early detection and screening for children and adults across the region.

The Models of Mwanza

6 May 2010 — We traveled up country to Mwanza, Tanzania's second largest city, to meet senior staff at the Bugando Medical Centre. The hospital, like so many across east Africa, is overburdened and understaffed. It serves a regional population of 14 million people. With a dearth of health services in the Lake Victoria region, many patients travel a great distance to Mwanza for treatment from the neighboring countries Burundi, the Democratic Republic of the Congo, Kenya, Rwanda and Uganda.

Over the last two years, Bugando has taken the first steps to become Tanzania's second center to offer oncology services. In collaboration with the IAEA and WHO, medical staff received training in South Africa and Italy, a community cancer registry is up



and running, and has drafted plans for buildings to house radiation therapy equipment.

As we made our way to the oncology department, we passed a ward where a group of women and children quietly milled about. Some seated in bed, some standing, most receiving care for cancers of the breast and cervix.

We were introduced to the group, and within minutes, the room metamorphosed from cancer ward to fashion studio. Each of the women stood proudly before our cameras, wanting to be photographed.

"Me too! Me too!" they exclaimed, as we moved about the room, capturing each of them in moments that reflect a solemn strength and a frank openness that lays bare their struggle with cancer. They wanted to put a public face on their private battle, and for that, it was one of the most moving portions of the trip.

You can view a selection of their photographs at: <http://j.mp/aXDC7E>

To read a complete account of these stories, please visit www.iaea.org/blog/cancer.

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Retinoblastoma is a curable condition, but a large percentage of children in developing countries die because of lack of awareness and access to appropriate medical care. This child was receiving treatment at the Bugando Medical Centre in Tanzania. His prospects are good for a full recovery.

(Photo: D.Sacchetti/IAEA)