

**Section 1.01 Joint Press Release  
WHO/UICC/61**

**4 August 2003**

**Helsinki, Finland** - The Alliance for Global Cancer Control issued its first public statement today, calling for the rapid implementation of the Framework Convention on Tobacco Control (FCTC). The Alliance, the first worldwide coalition addressing global cancer control, emphasized that elimination of tobacco could prevent an estimated 30% of all cancer cases and 90% of all lung cancer cases.

In the statement issued at the World Conference on Tobacco or Health in Helsinki, the Alliance for Global Cancer supports and accepts shared responsibility for worldwide implementation of the FCTC. The FCTC is the first global health treaty and intends to curb the tobacco epidemic. More than 30 organizations signed the statement including the World Health Organization (WHO) and the International Union Against Cancer (UICC).

The FCTC provides a unique opportunity for the global cancer control community to join forces with the tobacco control community to stop the spread of the tobacco epidemic. For the reduction of the cancer burden and for the benefit of future generations, the Alliance for Global Cancer Control calls for action across countries, sectors and disciplines to reverse current trends in the fight against tobacco globally.

The cancer burden is increasing in all regions of the world including in poor countries. Over 20 million people are living with cancer today, with 10 million new cases of cancer worldwide and 6 million cancer deaths each year. By 2020, cancer-related deaths will increase to 10 million per year.

By taking immediate and concerted action, the Alliance for Global Cancer Control estimates that at least 2 million lives could be saved by 2020, that at least 6.5 million lives could be saved by 2040 and that of the 22.4 million people living with cancer today, all could benefit from improved quality of life.



**Dr. Rehan A. Kazi joins Royal Marsden Hospital, London.**

Mumbai -Dr.Rehan A. Kazi, a leading Head & Neck Cancer Surgeon of the City has been invited by the world famous cancer hospital – Royal Marsden Hospital, UK to work on a research project in head and neck cancers. Dr. Kazi therefore, will be away from the city for about 1 year.



The Royal Marsden is Europe's largest comprehensive cancer centre, with more than 30,000 patients from

across the UK and abroad being treated at the hospital every year.

The Hospital has one of the largest centre for children with cancer in the UK. The Royal Marsden was founded in 1851. **It was the first hospital in the world to be dedicated wholly to the study and treatment of cancer.** The hospital was granted its Royal Charter of Incorporation by King George V in 1910 and became Known as The Cancer Hospital (Free). It has an unrivalled worldwide reputation for its patient care, research and education.

**Cancer diagnosis in Mumbai is cheaper**

**In fact, say doctors, the new cancer treatment machine could be one of the cheapest in the world**

ABOUT 15 to 20 percent of Indian cancer patients go aboard, to the UK and US, for a scan using the SPECT-PET/CT Imaging System. This costs them upwards 1,500 Dollars in America and 8,000 Pounds in UK. Thanks to a new machine unveiled at Hinduja Hospital today, a scan in India will cost just 30 percent of that. This is likely to have major impact in the

treatment of cancer, brain diseases and heart problems in this country. The Discovery VH Integrated Hybrid SPECT-PET/CT Imaging System is the first Fusion CT/PET technology of its kind in India that can scan the body to see how far cancer, for instance, has spread using isotopes and give very precise measurements.

It allows the doctor to fuse anatomical, physiological and biochemical changes in an organ and has three specific uses for cancer treatment. The scan also helps the doctor to diagnose the exact area that should receive radiation.

The technology used in the SPECT-PET/CT Imaging System is a fusion of technology that existed separate from each other and is not new. It was invented about 15 to 20 years ago in the West, but could not be imported because of its high cost. The machine at Hinduja cost the hospital Rs.3.5 crore. For the machine to function, availability of isotopes is a must. This was possible only after the Tata Memorial Hospital at Parel bought a medical cyclotron costing about Rs.3 to 4 crore late last year. They are now equipped, and ready to aid in the treatment of not just cancer patients from around the country but other countries also.

None of our immediate neighbours possess this technology with the exception of China, who has close to 15 to 20 such machines. Singapore has two and Korea four. Already, patients from Bangladesh are coming to India for cancer treatment and these numbers are likely to go up.

(Mid-Day-25.05.03)



### **Acting Secretary of the CAF**

Mumbai–Principal (Rtd) Mrs. Rashida A. Kazi has recently taken over as the Acting Secretary of the Cancer Aid Foundation from Dr. Rehan A. Kazi who has proceeded to London to join the Royal Marsden Hospital, London for 1 year.

Mrs. Kazi is connected with many women organizations in the city and is also a known Urdu writer.

### **Early detection – A key to cancer cure**

Each year 200,000 women are diagnosed with breast cancer, of which 60 percent die. One in every eight women either has or will develop breast cancer in her life time. In addition, 1500 or more women will be diagnosed with breast cancer and how many of those will die is a moot question.

Breast cancer is the leading cause of deaths among

women aged between 40-55 and is second only to lung cancer in deaths caused by cancer. If detected early breast cancer has a five-year survival rate. The earlier breast cancer is detected, the more options a woman has for effective treatment and survival.

A screening mammogram is the best option for early detection – before symptoms appear. Mammograms reduce the risk of dying from breast cancer, yet most of the women in India have never had or even heard of a mammogram.

While there have been efforts to reduce the risk of cancer as well as help patients to face this critical health disorder, none of the drugs so far have been able to make a beneficial contribution. Using the Gemcite combination is an exception though. An endeavour to improve the quality of life of patients fighting this disease, it is a chemotherapy drug or agent that has a different mechanism as opposed to normal treatment for cancer.

Gemcite works in a distinct way. It not only has few side effects, the majority of patients do not even shed much hair as they usually do while undergoing chemotherapy. It also does not cause vomiting, making it much easier for the patient.

Cancer institutes recommend that women perform monthly breast self-examinations and have a clinical breast examination by a trained medical professional. Women with family histories of breast cancer are at greater risk of contracting the disease. Age also increases the risk.

Treatment for breast cancer usually includes one or more of the following: surgery, radiation, chemotherapy and hormone therapy.

There are large number of drugs being used to combat cancer; Gemcite is one drug that helps in controlling it. It is used both before and after surgery and is even effective in advanced cases.

While the search for new drugs to eradicate cancer continues, we can at least breathe a sigh of relief that drugs such as these will increase survival rates.

(The Asian Age – 04.08.2003)

### **Betel chewing is cancer hazard, reveals study**

Chewing betel products, used from time immemorial in India and elsewhere in Asia as a mild stimulant and consumed even by children, are major cancer hazards.

Countries where betel chewing is prevalent have higher rates of cancer of the mouth, pharynx and oesophagus, and Asian immigrant communities also suffer more from these diseases than the surrounding population, according to a report by the International Agency for Research on Cancer (IARC).

Of the 390,000 cases of cancers of the mouth and

related symptoms estimated to occur in the world each year, 228,000 or 58 percent occur in the Indian subcontinent and Southeast Asia, the IARC study said. Oral cancer is common in some parts of India.

There are hundreds of millions of users worldwide, and there is great concern that the habit will spread to populations in North America and Europe not previously exposed to the habit. Britain is the world's leading importer of betel products outside Asia.

A commonly consumed product is betel quid, a kind of candy made from areca tropical palm nuts, slaked lime and spices, and wrapped in a leaf from the betel vine. Tobacco is often added to this to make it more strong.

The quid is held between the teeth and the cheek, where it slowly releases a stimulant called arecoline. People who use betel frequently over a long period of time usually have red teeth. They are also likely, the new study finds, to suffer from a hardening of tissue called oral submucous fibrosis, which can turn into cancer.

### Cancer Hospital at Khopoli

Mumbai – The Cancer Aid Foundation has received an oral offer of 7<sup>1</sup>/<sub>2</sub> acres of land at Khopoli near Mumbai for its proposed Cancer Hospital. The offer was made by Mr. Imran Furniturewala, Chairman, Memon Co-op. Bank Ltd., during the Governing Body Meeting of the Foundation which he attended as its Special Guest. Mr. Sohail Lokhandwala Ex. MLA and the Trustee of the Foundation had taken a lead in this matter. The Foundation, therefore has entrusted to him the entire project of Cancer Hospital at the above site for implementation.

### UNDERSTANDING

### HEAD & NECK CANCERS

**Dr. Rehan A, Kazi**

MS, DNB, DLORCS(Eng), Fc.Oncology,  
FAAOHNS, FIAOMS, UICC FELLOW.

Consultant ENT & Head, Neck Cancer Surgeon.

Cancer is a disease of the tiny building blocks called cells. It occurs when cells become abnormal and divide without control or order. Normally, this division of cells takes place in an orderly and controlled manner. If, for some reason, the process gets out of control, the cells will continue to divide, developing into a lump, which is called a tumour. Tumours can be either benign or malignant.

Benign tumours are not cancer. They can usually be removed, and in most cases, they don't grow back. Most important, the cells in benign tumors do not

invade other tissues and do not spread to other parts of the body. A malignant tumour consists of cancer cells, which have the ability to spread beyond the original site. If the tumour is left untreated, it may invade and destroy surrounding tissue. Sometimes cells break away from the original (primary) cancer and spread to other organs in the body through the bloodstream or lymphatic system. When these cells reach a new site they may go on dividing and form a new tumour, often referred to as a secondary or a metastasis.

It is important to realize that cancer is not a single disease with a single cause and a single type of treatment. There are more than 200 different kinds of cancer, each with its own name and treatment.



A man went to see his doctor because he was suffering from a miserable cold. His doctor prescribed some pills, but they didn't help.

On his next visit the doctor gave him a shot, but that didn't do any good.

On his third visit the doctor told the man, "Go home take a hot bath. As soon as you finish bathing throw open all the windows and stand in the draft."

"But doc," protested the patient, "if I do that, I'll get pneumonia."

"I know," said the doctor, "I can cure pneumonia."

### cancers of the head and neck

Cancer can occur in any of the tissues or organs in the head and neck.

#### CANCER OF THE ORAL CAVITY:

These can develop on the lips or in the mouth itself.

#### OROPHARYNGEAL CANCER:

This develops in the oropharynx, the part of the throat that sits directly behind the mouth

#### LARYNGEAL CANCER:

Cancer of the larynx occurs mainly in middle-aged and older people but can occur in younger people who started smoking at an early age.

#### THYROID CANCER:

Cancer of the thyroid is an uncommon cancer that usually affects middle aged and older people, more commonly women. It is very rare in children.

#### CANCER OF THE NOSE:

It can develop in the skin of the nostril and the lining of the nose. The highest part of the throat, which lies behind the nose, is called the nasopharynx. A particular type of cancer called nasopharyngeal carcinoma can develop here.

**CANCER OF THE EAR:** Cancers of the ear are

uncommon and most develop in the skin of the ear. They can develop in the structures deep inside the ear but these cancers are very rare.

### causes of head and neck cancer

Cancers of the head and neck are more common in men, older people and those people who smoke. In some cases the causes are unknown, for example salivary gland cancers, sarcomas and lymphomas.

#### Risk factors:

People who experience long periods of sun exposure and contact with certain chemicals in their daily life have an increased risk.

Nasopharyngeal cancer may be connected with a viral infection known as Epstein-Barr virus.

Most head and neck cancers do not usually 'run in the family'.

### Diagnosis of the head and neck cancers

This involves:

- Biopsy of primary.
- Imaging Studies.
- Laboratory Tests.
- Radiation therapy consultation.
- Examination under anesthesia.
- Other tests.

#### Types of treatment available:

There are three regular types of treatment for head and neck cancer: surgery, radiotherapy and chemotherapy..

In most cases, the treatment is aimed at:

- Removing the visible cancer
  - Reducing the chances of the cancer coming back
- In many hospitals, a team of specialists will decide the treatment that is best for you. This team will include a head and neck or ear, nose and throat (ENT) surgeon, a clinical oncologist, radiotherapist and may include a number of other healthcare professionals such as a maxillo-facial surgeon, dentist, nurse, speech and language therapist, dietician, physiotherapist & occupational therapist.



#### Dr. SHEHNAZ SHAIKH EDITOR – CAF News Bulletin

The Cancer Aid Foundation is happy to announce the appointment Dr. Shehnaz Shaikh as the Editor of CAF News Bulletin. Dr. Shaikh is a freelance Medical writer and editor. She completed her MBBS from Gandhi Medical College, Bhopal and MD in Human Physiology from TN Medical College and Nair Hospital, Bombay. She has written many newsletters, product monographs, and training manuals for the medical community. She was a copyeditor of an American ejournal [www.emedicine.com](http://www.emedicine.com) for 2 years. In addition to medical writing and editing, she is also running an Islamic School for girls and working on the word-for-word English translation of the Holy Qur'an.

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We invite your suggestions and comments on CAF News Bulletin. All views expressed in the CAF News Bulletin belong to the author. The Foundation need not necessarily subscribe to them.

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