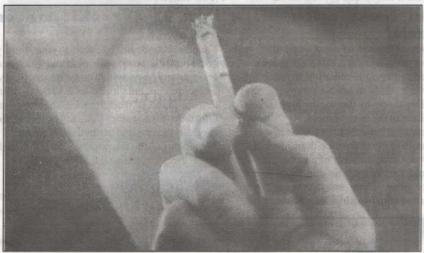


Official Publication of the Cancer Aid & Research Foundation)

SMOKING AFFECTS CHILDREN'S GENE

Men's exposure to smoke early in life can affect genes, which are inherited by future generations.



People's lifestyle and environment can alter genes in ways that can be inherited by subsequent generations

may have to be modified as a result of new before the age of 11. He then studied the research showing that smoking causes growth of these men's offspring. Pembrey genetic changes that can be passed on to said: "The sons of the early smokers were children, tending to make them obese. The significantly bigger than other children. The study is thought to be the first to show daughters were unaffected." Pembrey clearly that people's lifestyle and believes the men's exposure to smoke so environment can alter genes in ways that early in life did not damage their DNA can be inherited by subsequent generations. directly. Instead it affected the mechansims Standard evolutionary theory derived from Darwin maintains that such changes take place by chance over numerous generations.

Marcus Pembrey, professor of paediatric genetics at the Institute of child

Health at University, College London, who carried out the Research, said the findings indicated a proposing is that such changes can be new mechanism of inheritance. "It seems inherited. Such findings cannot be that the way we live our lives can affect explained by modern theories of evolution future generations," he said. "It is not just based on Darwin's theories. Darwin our own genes that we affect by choices like suggested that evolution occurs through smoking or diet. It is those of our random mutations; those which make an descendants, too." In his research Pembrey organism better equipped for life survive used a database assembled as part of Bristol while others vanish. Pembrey told a BBC University's 'Children of the 90s' project, Horizon programme: "If early smoking can which has collected data on more than affect children conceived so many years

smoked. Pembrey identified 166 of and nutrition through-out childhood."

Charles Darwin's theories of evolution them who said they had started smoking controlling which genes are active and which are inert. It has long been known that lifestyle and environment can have their own additional impact on the way genes are switched on and off.

What has never been accepted and what Pembrey is now 10,000 youngsters born during 1991-92. later, then this is powerful evidence for the Of those, about 5,000 had fathers who importance of high-quality health, lifestyle

(Times of India, 15th December, 2005)

Talk less on Mobile Phones...

Scientists have discovered that exposing human endothelial cells which line the minute



blood vessels in the brain - to mobile phone radiation can damage the blood-brain barrier, a vital safety barrier that stops harmful substances in the blood from entering the brain. Please use left ear while using cell (mobile), because when the right ear is used it affects the brain directly. This is a true fact from Appollo medical team.

(www.yahoo.com)

Children's craze for tans may lead to tumours

Children as young as 11 are risking skin cancer by using sunbeds to get celebritystyle tans. Many youngsters visit tanning studios in UK up to four times a week and some salons hold children's parties to entice young customers, a study reveals. Some mothers are said to have been taking their babies into tanning booths. The findings have alarmed skin cancer campaigners as the number of adolescents diagnosed with the deadliest form of skin cancer, malignant melanoma, has trebled in Britain in 25 years.

Research suggests young skin is particularly susceptible to damage from UV light and just one bout of sunburn in childhood doubles the risk of melanoma. There is no law banning under-16s from using sunbeds, however, the UK government guidelines strongly advise against it.

Many of the tanning studios let children who arrived in school uniform use the sunbeds. Researchers found many of the children had the additional risk of developing cancer of the eye as they refused to wear goggles for fear of white patches on their faces.

(Times of India 15th December, 2005)

thyroid Cancer

The thyroid gland

The thyroid is a small gland in the front of the neck just below the voice box (larynx), and is made up of two parts, or lobes. It is one of the network of glands throughout the body that make up the endocrine system. This system is responsible for producing the body's hormones that help to control and influence various functions. The thyroid is many people are completely cured, even if sometimes known as the 'activity' gland the cancer has spread beyond the thyroid. thyroxine (T4) and triiodothyronine (T3), which are needed to keep the body functioning at its normal rate. The thyroid gland needs a regular supply of iodine (which is added to table salt and found in fish and milk) in order to produce thyroxine.

If the blood levels of T3 and T4 fall, the hypothalamus (a part of the brain) sends out thyroid-releasing hormone (TRH) into the blood. As the levels of TRH in the blood rise, the pituitary gland releases thyroidstimulating hormone (TSH) which stimulates the thyroid to produce more thyroid hormones.

If the thyroid gland doesn't produce enough hormones you will feel tired and lethargic and put on weight easily. This is called hypothyroidism, or myxoedema. If the thyroid gland produces too much hormone you will lose weight, have an increased appetite, feel shaky and anxious, or have palpitations. This is known as hyperthyroidism, or thyrotoxicosis.

Cancer of the thyroid

Cancer of the thyroid is an uncommon cancer that usually affects , middle-aged and older people, although papillary thyroid cancer can occur in younger people. Thyroid cancer is more common in women and very rare in children.

There are four main types of cancer of the

Papillary: This is the commonest type of thyroid cancer.

Follicular: This is a rare type of cancer affecting many family members, and usually found in older people.

Medullary: This is a rare type of thyroid cancer that is known to run in families.

Anaplastic: This is also a rare type of thyroid cancer. It occurs more commonly in medullary thyroid cancer. older people and grows quickly. Unlike other types of thyroid cancer, it can be difficult to What are the symptoms? treat.

the lymph tissue of the thyroid. The lymph gradually gets bigger. Occasionally, a beyond its original site. tissue is part of the body's immune system. thyroid tumour may press on the gullet This helps the doctors to decide on the most Usually thyroid lymphomas are of the type (oesophagus) or windpipe (trachea) and appropriate treatment.

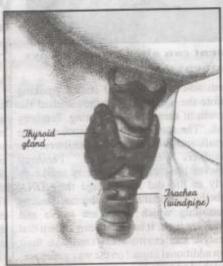
(NHL).

Apart from the anaplastic type and lymphoma, cancer of the thyroid tends to develop very slowly and it may be some years before it starts to cause any problems. with cancer of the thyroid is very good and

thyroid?

cancer are not known, although some can be linked to previous radiation exposure. This may be due to radiotherapy given in childhood, or to unusually high levels of radiation in the environment.

People who eat very little iodine in their diet are more likely to develop thyroid cancer. In a very small number of people, medullary thyroid cancer may be due to an inherited faulty gene. There are two main types of inherited condition in which this occurs:



familial medullary thyroid cancer (FMTC),

multiple endocrine neoplasia (MEN) syndromes type 2A and 2B, where family members are at risk of developing number of different endocrine tumours including

In most people cancer of the thyroid Staging of thyroid cancer

known as non-Hodgkin's Lymphoma cause difficulty in swallowing or breathing. Very rarely, the first symptoms may be caused by secondary tumours in the bones or lungs after the cancer has spread beyond the

If you notice a lump in your neck, or any of With treatment the outlook for most people the above symptoms, you should see your doctor as soon as possible. However, most thyroid swellings (or goitres) are benign (non-cancerous).

because it produces the two main hormones. What causes cancer of the How is thyroid cancer diagnosed?

The exact causes of most cases of thyroid Usually you begin by seeing your family doctor (GP), who will examine you and arrange any tests which may be necessary. These may include blood tests to see if your thyroid gland is working as it should. Your GP will then refer you to hospital for specialist advice and treatment.

The doctor at the hospital will take your full medical history before examining you.

Further Tests

The specialist will want to do some further tests. These may include any of the following:

. Blood tests

Samples of blood will be taken to check your thyroid hormone and TSH levels. Your blood will also be tested to check your general

. Ultrasound thyroid scan

Sound waves are used to make up a picture of the inside of the neck and the thyroid.

. Thyroid radioisotope scan

For this test a small amount of a slightly radioactive liquid (technetium or iodine) is injected into a vein in your arm. After about 20 minutes a machine called a gamma camera will be positioned over your neck.

Cancer cells do not usually absorb the radioactive liquid as well as normal thyroid cells, so the camera may be able to show any areas of cancer in the thyroid. These are called 'cold areas' or 'cold nodules'.

. Fine-needle aspiration or biopsy

A small needle is passed gently into the swelling in your neck. A sample of cells is taken and examined under a microscope to check whether there are cancer cells present.

It is also possible to have a lymphoma of the develops very slowly. The first sign is The stage of a cancer is a term used to thyroid gland. This type of cancer starts in usually a painless lump in the neck which describe its size and whether it has spread

cancer...

Staging

cases of thyroid cancer is described below:

Stage 1: The turnour is no bigger than 1cm in size, is contained within the thyroid gland, reason for this extra surgery is to ensure that and there has been no spread to either the lymph nodes or other parts of the body.

Stage 2: The tumour is contained within the thyroid gland and is between 1 and 4cm in size. Cancer has still not spread to lymph nodes or other parts of the body.

Stage 3: The tumour is bigger than 4cm in size and is contained within the thyroid gland.

Or, the tumour is of any size that has spread just outside the gland or to nearby lymph nodes in the neck.

Stage 4: The tumour has spread into surrounding parts of the neck (such as the muscles, nerves or blood vessels).

Or, the tumour has spread to involve more of the lymph nodes in the neck or the upper

body.

thyroid is considered to have stage 4 disease.

When people are diagnosed with papillary or follicular thyroid cancer under the age of deep breathing exercises. The physio-45, different staging categories are used.

Stage 1: The tumour can be of any size and nearby lymph nodes may also be affected, but there is no spread of the cancer to other parts of the body.

Stage 2: Any tumour that has spread to other parts of the body, such as the bones or

There is no stage 3 or 4 for these patients.

Types of treatment

The treatment chosen will depend on a number of factors, including your age, If you have either papillary or follicular thyroid.

Surgery

The first treatment for cancer of the thyroid is usually an operation. When the cancer is detected and removed early, most people be treated with stronger doses of radioactive have an excellent chance of being cured of iodine to destroy the cells. the cancer completely.

well, during a second operation.

A commonly used staging system for most only the affected lobe of the thyroid (partial hypothyroidism, e.g. weight gain, tiredness, more common for the surgeon to remove the slowness. whole gland (total thyroidectomy). The as much of the cancer is removed as possible and to examine the thyroid very carefully for cancer cells which may be present in other parts of the gland.

Occasionally, because of the position of the thyroid, the operation may affect the nerves supplying the voice box (larynx). This can result in your voice sounding weak for some time after the operation. In a thyroidectomy there may also be some damage to the parathyroid glands (the tiny glands behind the thyroid). Their function is to control the level of calcium in the blood and, if damaged, this may become low. If necessary your doctor will prescribe calcium supplements for you.

After your operation

Or, the tumour has spread to other parts of the After your operation you will be encouraged to start moving about as soon as possible. Everyone with anaplastic cancer of the This is an essential part of your recovery and, even if you have to stay in bed, it is important to do regular leg movements and therapist will help you with these. A drip (intravenous infusion) will be used to replace your body's fluids until you are able to eat and drink again-normally within 24 hours. One or two drains will be in place at back or has spread to other parts of the body. the side of your wound. These are usually removed within 48 hours. If clips are used instead of stitches to close the wound, these will be removed before you go home.

Whole-body radioisotope scanning

general health, the type and size of the thyroid cancer and have had the thyroid tumour, and whether it has spread beyond the gland removed, you are likely to have further scans of the neck and body using radioactive iodine. The scans are done to see if there are any thyroid cancer cells in the neck, or other parts of the body, after the operation.

If cancer cells are seen on the scan, you can

It is not always possible for the doctors to Thyroid hormone replacement

make a diagnosis of cancer before surgery. In The thyroid gland produces hormones which this situation the surgeon will remove the are responsible for keeping the body affected lobe of the thyroid gland so that it functioning at its normal rate. Once your can be examined under a microscope. If the thyroid gland is removed and no longer diagnosis of cancer is confirmed, the producing these hormones, you will need to remaining lobe will often be removed as replace them by taking tablets for the rest of your life. Without these hormone tablets you

In some people it may be possible to remove would develop the signs and symptoms of or hemi-thyroidectomy); however, it is far dry skin and hair, and physical and mental

Internal radiotherapy

Small doses of radioactive iodine can be used to help diagnose cancer of the thyroid (thyroid radioisotope scan), and to see if any papillary or follicular thyroid cancer cells have been left behind after a thyroidectomy (whole-body radioisotope scanning). When given in larger doses, radioactive iodine can be used to treat any remaining cancer cells. Radioactive iodine is only useful for the detection and treatment of any cancer cells that may remain once all of the healthy thyroid tissue has been removed.

External radiotherapy

Radiotherapy treats cancer by using highenergy rays which destroy the cancer cells, while doing as little harm as possible to normal cells.

This type of treatment is used less commonly than internal radiotherapy for treating cancer of the thyroid, but it may be given after surgery to destroy any cancer cells in the neck that were not removed by the operation.

Chemotherapy

Chemotherapy is the use of special anticancer (cytotoxic) drugs to destroy cancer cells. It is rarely used to treat cancer of the thyroid but may be used if the cancer comes

Follow-up

Once your treatment is completed, you will have regular check-ups and tests. These will probably continue for several years. If you have any problems, or notice any new symptoms between appointments, let your doctor know as soon as possible.

Doc Jokes

- Patient: Doctor, doctor, I think I'm a cat. Doc: How long have you felt like this? Patient: Since I was a kitten.
- Datient: Doctor, doctor I feel like a sheep.

Doc: That's baaaaaaaaaaaaad!

@ Doc: I have some good news and some very bad news. The good news is that the lab called with your test results. They said you have 24 hours to live.

Patient: 24 HOURS! That's terrible!! WHAT could be WORSE?

Doc: I've been trying to reach you since yesterday.



Editorial

Cancer is "invading" us, yes that's the word I would like to use to describe the situation in our country because poverty, illiteracy, total ignorance of health issues and an ever increasing population are only contributing and increasing number of cancer cases. So, you see India has hardly any weapons to fight back CANCER.

It is heart wrenching to see a parent breakdown on hearing the diagnosis, a grown man reduce to tears, a son not able to see his future without a parent. This is where proper counselling and guidance comes in. Cancer Patients and relatives need counselling in terms of acceptance of diagnosis, the treatment and its side effects, the diet, the follow- ups and last but not the least how to deal with the uncertanity of the treatment which may in some cases lead to death.

The patients do get a lot of their answers from the oncologist or treating doctor but maybe due to time constraints and work pressures not all are answered. So we need to reach out to these patients and their families and help them emotionally and financially to overcome the hurdles they face.

We also need to spread the awareness and guide people to recognize the first signs of cancer what are the causes and how to prevent it? This has to reach out from the grass roots to the creme of the society. I wish more people would join us in our endeavour to make India cancer free,

Dr. Asra I. Kazi Family Physician & Counsellor

After battling cancer, 9-yr-old spreads cheer

Big B Doc Performs Rare 8-Hr Surgery

Mumbai: The yellow and green scarf hides most of Leila's face, but it can't dim the wattage of her smile. "Merry Christmas," she greets visitors trooping into the 10th floor paediatric ward at Lilavati Hospital, while digging into a bag for gifts to hand out. It's difficult to gauge that this nine-year-old was battling a rare form of cancer for over five months, has undergone a marathon surgery just a week back, and at the moment has just a quarter of her liver. The oversized scarf is to hide the ravages of chemotherapy on her once shoulder-length hair.

"Leila is a hero," says cancer surgeon Dr. P. Jagganath who operated on the Hyderabad girl for eight hours on December 19. "It was one of the most difficult cases of my life," adds the doctor who operated on superstar Amitabh

Bachchan at the same hospital less than a month back.

"As we had to remove three-fourth of her liver, there was no margin for error. There was a moment in the surgery when I came out of the operation theatre and told her parents that the surgery could end with either result," he recalls. But two days after the surgery, Leila was clamouring to get out of the ICU. On the third day, she was out and drawing Christmas cards. "I am amazed at her speedy recovery," says Dr. Jagganath, And, yes, Leila caught a glimpse of Bachchan leaving the hospital on December 17. The icon was operated on by a team led by Dr. Jagganath on November 30.

For Leila's parents, the C-night-mare began with a pain in her abdomen on July 11. "We took her to a gastroenterologist in Hyderabad. Co-incidentally, our doctor met Dr. Jagganath in Delhi that week and discussed the case. Soon, we

were in Mumbai," recalls father Cirrus.

Leila's liver was almost totally replaced by the tumour and the first chemotherapy session had no result. "We then started chemotherapy meant for sarcoma of the liver, which is very rare in children. But the results were quick," says the doctor who plans to publish the case as one of the rarest cases.

As for Leila, she is waiting to leave the hospital on December 27. "We are getting an earlier air ticket. Please let me go home. My younger brother has fever," she tells her doctor. The air ticket is the only concession the family can afford after the long treatment, which has been subsidised by the hospital. "My daughter is very brave. I remember bundling her into a bus for Hyderabad immediately after a chemotherapy session and she never complained," says Cirrus, who has brought Leila to Mumbai about six times in six months, every time in a bus.

Leila does have a small worry though. A first-ranker at school, she missed school throughout this academic year. "I will go back to second standard now" the says

Leila may need another two months and two more visits to Mumbai before she is well enough to return to school. "But her reports show she is well now and will grow up as normal as any child," says Dr. Jagganath.

(Times of India, 27th December, 2005)

How does one deal with stress?

* Pay attention to your own thoughts. Think positive and progressive.

* Prioritise. Do not over load the day with too much work.

 Be selfish about our time once in a while and try to adopt stress and time management methods in your everyday life.

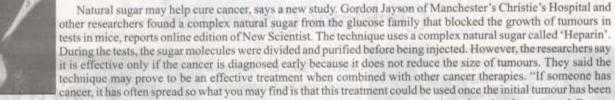
 Do not loose your cool over mundane things. It is better to understand the situation and then react rather than reacting without thought.

- * Consult with friends/ family/ colleagues for solutions for a possible stressinducing situation instead of tackling it yourself. Remember: two heads are better than one.
- * Take up a relaxing activity like Yoga.

(Times of India, 3rd January, 2006)

FOOD FAC

Sugar may help cure cancer



removed," said Mark Matfield, another researcher. "It could be used to stop the cancer cells developing when they have spread. But we will have to see how it develops in future trials. Cancers depend on a supply of oxygen and nutrients, and they trick the body into growing new blood vessels by sending out chemical signals," said Kat Arney, a science information officer at Britain's Cancer Research. Dr. Jayson's research is exciting because it shows for the first time that complex sugars can block the development of blood vessels by jamming these signals. Because adults don't normally need to grow new blood vessels, this discovery could lead to a highly specific and effective treatment for many types of cancer," she said. However, this research is still at an early stage and it will be essential to develop these sugars further and test their actions in patients," she added. Scientists hope to start clinical trials in the next two years.

(Times of India, 21st November, 2005)

Certain vegetable diet may ward off cancer

A certain vegetable diet could cut the risk of pancreatic cancer, say US researchers. Conducting interviews with 532 people with the cancer and 17500 people who did not have the disease, Elizabeth Holly and other researchers from the University of California said eating five portions daily of the most protective vegetables cuts the risk to half, reported the online edition of BBC News.

The most protective vegetables are onions, garlic, beans, carrots, corn, dark leafy vegetables and citrus fruits, said the new research published in the Cancer, Epidemiology, Biomarkers and Prevention journal.

More than 10,000 people die each year in Britain from pancreatic cancer, which is not nearly as common as breast or lung cancer. It remains largely untreatable, with the five-year survival rate at under three percent. Its diagnosis and treatment are particularly difficult.

Finding strong confirmation that simple life choices can provide significant protection from pancreatic cancer may be one of the most practical ways to reduce the incidence of this dreadful disease.

However, the scientists acknowledged that the results might have been influenced by food that may often be eaten with the vegetables and other lifestyle factors, such as smoking.

(Mumbai Mirror, 28th December, 2005)

Common mint leaf destroys cancer tumours, new research reveals

A phytochemical in mint leaves has been found to demonstrate powerful antiangiogenesis effects, meaning that it cuts off the blood supply to cancer tumours. It's yet another example of the healing power of nature and the medical efficacy of phytochemicals found in your own garden.

Nature is the only pharmaceutical lab you really need, and plants are simply astonishing producers of powerful healing nutrients. The mint leaf is just one of many anti-cancer herbs, weeds, vegetables and fruits that are readily available to practically everyone. Consuming these on a daily basis wards off cancer for life.

Some of the most powerful anti-cancer plants and foods include broccoli, onions, ginger, licorice root.

(www.newstarget.com)

Curry spice mag

urcumin (the main ingredient of the spice turmeric, often used in curries) may help protect against cancer, heart disease, diabetes and eye disorders. A new study by University College London, which analysed around 1,500 other studies world wide, found that it works as an antioxidant and fights inflammation. Beneficial effects have been suggested for a number of conditions which also include respiratory, liver, pancreatic, intestinal and gastric diseases.

(Times of India, 14th January, 2006)

Walnuts puts the

alnuts are one of the richest natural sources of ellagic acid, a flavonoid that fights cancerous tumours, especially of the lung, liver, skin and esophagus. In addition, men should know that a few walnuts a day could safeguard their prostate. The University of Massachusetts Medical School gathered information on diet and prostate cancer from 59 countries. They found that nuts, along with grains and cereals, offered real protection. Plus, with the antioxidant Vitamin E mopping up those dangerous free radicals, walnuts give you even more anti-cancer benefits.

(Bombay Times, T. O. L., 4th January, 2006)

Carbonated Drinks

Next time you reach for a carbonated soda think about this, carbonation neutralizes the stomachs hydrochloric acid, preventing the breakdown of nutrients as well as the bodies ability to absorb them, which depletes several important elements such as magnesium, potassium, and selenium causing deficiencies, irregular heart beats, or cramping, and it weakens bones and teeth. How about a glass of cranberry juice diluted with water instead?

(www.bodiesofstone.homesead.com)

At the Foundation.....

Christmas Celebration



Cancer Aid → Research
Foundation had organized a
variety entertainment programme to celebrate
Christmas on 27th
December 2005 for cancer
patients and their families.
The cancer patients



participated whole-heartedly in the entertainment programme. It was very heartening to see them all laughing and enjoying the splendid performance by the artist Ranjeet Kumar who enthralled them with magic show, mimicry and Charlie Chaplin show. Santa Claus presented them with toys, gift hampers and other goodies. The aim of Cancer Aid & Research Foundation is to bring joy and cheer into the lives of the cancer patients and we strongly believe that such moments will help them fight their battle against cancer with courage and patience.

Mrs. Supriya Sule addresses cancer patients

Mrs. Supriya Sule, Managing Trustee of Pawar Charitable Trust and daughter of Shri Sharad Pawar, Hon'ble Minister for Agriculture & Food Civil Supplies visited our Foundation on January 12, 2006. She was very impressed with the working of the Foundation and praised Prof. A. A. Kazi-Chairman of the Foundation



for the great effort put in by him in helping the poor and needy cancer patients. Having seen cancer afflicting her near and dear ones, she sincerely promised Prof. A. A. Kazi all her support and help in the wonderful work that he was doing. On behalf of the Foundation she handed over cheques & gifts to the cancer patients.







Mrs. Supriya Sule interacting with cancer patients.

Chairman, CARF, Prof. A. A. Kazi Honoured



Prof. A. A. Kazi Chairman of CARF receiving Life Time Achievement Award-2006 presented by 'Life Care Foundation' a leading charitable organization. The award was presented in recognition of his dedicated services in the field of Education & Health.



Cancer Awareness Drive



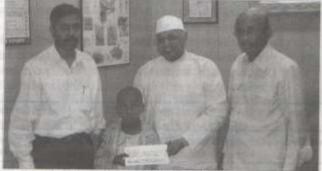
As a part of cancer awareness drive the Programmes Department's team of CARF screened films on cancer to 8000 students of Thakur College of Commerce and Arts, Kandivali (€) on their premises on 16th, 17th & 19th Januaray 2006. Pamphlets on cancer were distributed too. At the end of the programme the students pledged to stay away from cancer causing habits like smoking, drinking and chewing tobacco. They promised to spread this message to all their relatives and friends.

CARF participated in the Annual Synergy Exhibition organized by the students of St. Francis Education Institute at J. C. Colony, Borivali (W) from 26th to 29th January, 2006. It was a nice opportunity to make the Foundation's presence felt in the Western suburbs. It was well attended by over 2 lakh people. All those who visited the CARF stall were educated about cancer. Quarterly bulletins, brochures on the activities of the Foundation and pamphlets on head & neck cancer were given to them. Many people volunteered to help the Foundation when needed and some promised to send in their donations.



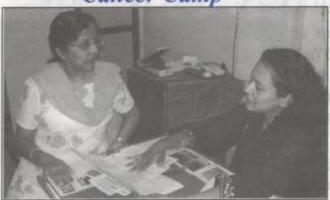


Dr. Kusum Lele a donor from the U.S.A presenting Baby Soumya Keshari with a cheque of Rs. 25,000 on behalf of the Foundation.



Noted film maker & Ex. Sheriff of Mumbai Mr. Kiran Shantaram handing over a cheque to Master Akash Soni, a cancer patient, Mr. M. Kazi (extreme L) and Prof. Kazi.

Cancer Camp



Cancer Aid & Research Foundation held a free Cancer Detection Camp for women on 12th March, 2006 at Kazi Clinic, Mazgaon. The response was immense. Free breast cancer detection, gynaec check-up, counselling and pap smear test for cervical cancer were done in this cancer camp. More camps of this type are expected to be held in the next financial year.

Certificate of Registration CANCER AID & RESEARCH FOUNDATI

We are pleased to inform our readers that CARF has been awarded the ISO 9001-2000 certification. This is indeed a testimony to the Quality Management System adopted by CARF.

Feedback from Visitors



Prof. Saroj Hazari : Fmr. Prof. & Head of the Dept. of English, St. Xavier's College,

I was impressed with what Prof. A. A. Kazi has accomplished within a short span of five years. Everything is arranged and organized in such a methodical manner that a stranger understands immediately what is going on. I wish all success to this organization.

Dr. Kusum Lele: Donor, U.S.A

My visit to CARF was very fruitful. I learnt a lot about the Foundation's work which was impressive. I wish the CARF every success.



Dr. Rammohan Tiwari: Head & Neck Surgical Oncology, Bangalore Institute of Oncology

It is indeed a pleasure to visit this oasis which provides solace to patients suffering from cancer. Prof. Kazi and his team deserves to be complimented on the excellent organization of the activities of this organization.

Mr. Sahir Shiwee: Noted Urdu Poet from U.K. I am at loss of words to describe the wonderful work being done by CARF. May God bless and give courage to all those working in CARF, who are always ready to help mankind.



CANCED AID & RESEARCH FOUNDATION

- Registered under the Bombay Public Trust Act, 1950.
 Donations exempted under 80G of the Income-Tax Act, 1961.
- E-mail: cancerarfoundation@yahoo.com
- Website: cancerarfoundation.org
- ✓ Monetary help to needy cancer patients
- ✓ Free medicines for chemotherapy treatment
- ✓ Rent-free accommodation in Mumbai to poor outstation cancer patients
- ✓ Return railway fare to poor outstation cancer patients
- Spreading awareness of the dangers inherent in prevailing social practices by screening cancer films in schools /colleges/ institutions.
- ✓ Printing literature on cancer & publishing CARF news bulletin
- ✓ Free Ambulance service provided to patients all over Mumbai / Thane dist.
- ✓ Free counselling to cancer patients & their family members
- ✓ Initiating steps for early detection of cancer by conducting free cancer detection camps
- We have been permitted by the Home Ministry, Govt. Of India vide Foreign Contribution Reg. No. 083780936 to receive overseas donations. The same can be credited to "Cancer Aid & Research Foundation" S.B. A/c. No. 026104000088372 IDBI Bank, Prabhadevi Branch, Mumbai - 400 025, INDIA
- Please draw your cheque in the name of Concer Aid & Research Foundation and send it to its Adm. Office: Cancer Aid & Research Foundation. Municipal School Bldg., Grd. Fir. Room No.15-18, Near 'S' Bridge, N.M. Joshi Marg. Byculla(W), Mumbai 400 011. Tel: Nos :091-22-2300 5000/ 7000/ 8000/ 23016000 Fax: 23008000

All views expressed in the CARF News Bulletin belong to the author. The Foundation need not necessarily subscribe to them. Chief Editor Dr. Rehan A. Kazi, MS. DNB, DLORCS (Eng.), DOHNS (Eng.) Sr. Editor - Shahina Kara

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