



News Bulletin

(Official Publication of the Cancer Aid & Research Foundation)

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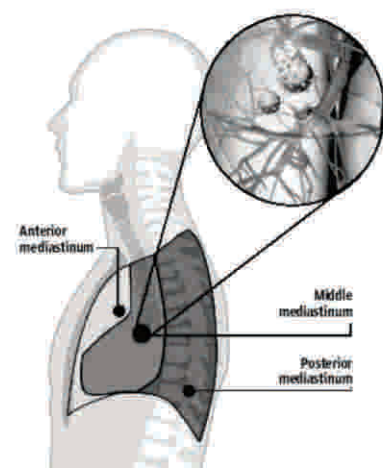
INCTR (International Network for Cancer Treatment and Research), Brussels - Belgium

Internet Journal of Head & Neck Surgery [www.ispub.com] - official scientific journal of CARF

YUVRAJ'S CANCER RARE BUT CURABLE

It is not lung cancer that prompted cricketer Yuvraj Singh to fly to the US but a rare form of the disease called germ cell seminoma. The 30-year-old all-rounder has a cancerous growth right in the centre of his chest, in the space between his lungs. As this area is called the mediastinum, Yuvraj's cancer is better labelled as mediastinal seminoma, said medical oncologist Nitesh Rohtagi from Max Healthcare in New Delhi.

ONLY 3-5% OF CANCERS ORIGINATING IN THE MEDIASTINUM DUE TO GERM CELLS



UNCOMMON TUMOUR

A germ cell tumour develops from a germ cell, which is a reproductive cell that develops into sperm cells in men and egg cells in women. Accordingly, germ cell tumours usually develop in the testicles or in the ovaries. But they can grow in other parts of the body as well like the stomach, brain or mediastinum. The mediastinum is the area in the chest's centre, between the lungs. The heart, the windpipe and the food pipe as well as main blood vessels and lymph nodes are located here. Very rarely, germ cell tumours grow outside the ovary or testicle. These are called extragonadal tumours. The mediastinum is the most common place for extragonadal tumours to develop.



SYMPTOMS

Many people with a tumour in the mediastinum don't have any symptoms. Symptoms could include: Shortness of breath, Pain in the chest, Cough, Raised temperature, Weight loss, Night sweats.

DIAGNOSIS

Chest X-ray Blood tests | Germ cell tumours often produce chemicals or hormones (tumour markers) that can be measured in the blood, CT scan Testicular ultrasound scan to check for signs of cancer, MRI scan

CAUSE

The most widely discussed theory states that some germ cells get misplaced during the person's development in the womb and are lodged in the abdomen and mediastinum. When cancer develops in these cells, it is an extragonadal tumour.

TYPES OF TUMOURS

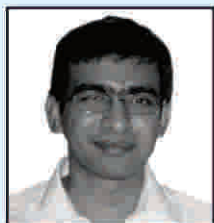
There are mainly two types of mediastinal germ cell tumours—seminoma and non-seminoma. While there are several medical reasons for the classification, one of the main differences is that seminoma cancers are extremely sensitive to radiotherapy while non-seminomas are not. Incidentally, American champion cyclist Lance Armstrong, too, suffered from a form of germ cell cancer. He was diagnosed with Stage IV of testicular cancer but was cured and went on to win the Tour de France. - Times of India, Feb 7, 2012

TREATMENT • Chemotherapy • Surgery • Radiotherapy • A combination

Gene that causes pancreatic cancer

Scientists have identified a genetic mutation which they believe increases the hereditary risk for developing pancreatic cancer. The finding of the ataxia telangiectasia mutated gene, or ATM, may hold the key to better screening the fourth most common cause of cancer-related death, the researchers said. Less than 5% of patients survive five years after being diagnosed with the cancer, to detect which there is no recommended screening tests at present. Roughly 10% of patients come from the families with a history of disease. "There was significant reason to believe this clustering was due to genetics, but we had not, to this point, been able to find the causative genes that explained the cluster of pancreatic cancer for a majority of these families," said lead study author Alison Klein, an associate professor of oncology at the Johns Hopkins University. - Times of India, Dec 31, 2011

Thoughts Of...



Kapila Manikantan
MS (ENT) Fellow
Dept of Hear & Neck Surgery
Tata Medical Centre,
Kolkata.

In the long journey of an oncosurgeon, I may just be a few steps from the start, but the start and the inspiration to get into the journey was from my teacher and mentor Dr. Rehan Kazi. The initial days were spent at the prestigious J. J. Hospital in Mumbai as a fellow of the Cancer Aid and Research Foundation learning the nuances of head and neck surgery. A year later traveling across the country, visiting various cancer centres, I have tried to increase my knowledge. During these years I have come across patients from all walks of life with different types of cancer. Each patient being different from the other with a different story to relate. One universal thing I happened to note in all patients was that no matter how rich or poor the patient may be, a diagnosis of cancer has a major impact on the lifestyle and family of the patient. The only thing that makes the difference in patients is the will to fight and survive the fight against cancer. Having said that one must not forget that in this fight the patient is never alone, his or her entire family is trying to win the fight. As a treating physician the doctor is a part of many fights. Every victory brings joy to all but a loss is equally disheartening.

As surgeons the patients whom we treat are usually subject to surgeries which can be quite mutilating. The struggle we face when treating such patients is to make them not only cancer free but also to help them lead a normal life as far as possible. The search for better rehabilitation and reconstructive techniques to make the patients life as near normal as possible is a never ending journey and one that every surgeon strives for.

In this disturbing world of cancer where many patients, families and doctors are struggling, the one thing that keeps every one moving on is hope. The hope that we can get that cure. It is one quality one must never lose in this fight, for it is this, that keeps us moving on.

Why nuns need birth control pills

The church may be averse to contraception, but a new research suggests contraceptive pills for nuns so that they can reduce their risks of developing cancer. According to a comment piece published in the Lancet, like any other nulliparous women, or those who do not have children, Catholic nuns are also have an increased risk of dying from breast, ovarian, and uterine cancer compared with women who bear children. This is because women who never give birth or breastfeed have more periods than those who do, and an increased number of menstrual cycles has been linked to higher cancer risk.

—Times of India, Dec 9, 2011

New cancer 'cluster bomb' to help blast tumours

Israeli medical researchers say they have developed a new technique for blasting cancer tumours from the inside out which reduces the risk of the disease returning after treatment. Tel Aviv University professors are about to start clinical trials of a pin-sized radioactive implant that beams short-range alpha radiation from within the tumour. Unlike conventional radiation therapy, which bombards the body with gamma rays from outside, the alpha particles "diffuse inside the tumour, spreading further and further before disintegrating," a statement said. "It's like a cluster bomb — instead of detonating at one point, the atoms continuously disperse and emit alpha particles at distances."

—Times of India, Dec 15, 2011

Exercise cuts bowel cancer risk

Want to stave off bowel cancer? Exercise daily, for a new study claims that regular workouts can cut the risk of developing the disease significantly. An international team, led by University of Western Australia and the Western Australian Institute for Medical Research, has found people who engage in vigorous physical activity may be protected against types of colorectal cancer. The study found people who performed regular vigorous physical activity over their lifetime had 40% reduced risk of cancer of the distal (lower) colon and rectum.

—Times of India, Jan 5, 2012

Bone-marrow cancer genes found

In what's being hailed as a major breakthrough, scientists claim to have identified genes that can raise a person's risk of developing multiple myeloma, an aggressive form of bone marrow cancer, by nearly 30%. It was already known that relatives of those suffering from the incurable cancer were at increased risk, but until now, no responsible gene had been identified.

—Times of India, Nov 29, 2011

Why deadliest skin cancer often proves fatal

Scientists claim to have found a clue to why nodular melanoma, a deadliest form of skin cancer, often proves fatal, as they spread vertically and doesn't grow in diameter like other cancers that can easily be detected. Nodular melanoma accounts for about 14% of all diagnosed skin cancers, but makes up 37% of ultimately fatal cases as they grow in depth and become more deadly, the researchers found.

—Times of India, Jan 23, 2012

Genetic test could spare women chemotherapy

Almost half of women with the most common form of early breast cancer could be spared chemotherapy thanks to a genetic test, research suggests. The Oncotype DX test involves the examination of genes taken from a sample of a tumour removed during surgery. It can help doctors decide whether chemotherapy would actually benefit patients and the risk of cancer returning.

—Times of India, Dec 18, 2011

Modern chemo cuts mortality in breast cancer patients

Chemotherapy on breast cancer patients reduces mortality rate by a third. A major analysis of 123 randomized trials involving over 100,000 women with breast cancer over the past 40 years shows that modern chemotherapy regimens reduce mortality by around one third. The findings appear in the research published in *Lancet* by Early Breast Cancer Trialists' Collaborative Group (EBCTCG) of the Oxford University. The researchers studied the trials of various older chemotherapy regimens, finding that standard 1980s chemotherapy regimens could produce a reduction of almost a quarter in breast cancer mortality. They also studied recent trials of modern regimens vs older ones, which showed a further reduction of about one-sixth in breast cancer mortality. They conclude that modern regimens reduce breast cancer mortality rates by about a third among a wide range of patients. The reduction applies to all women, irrespective of age, how big the tumour was, whether it had started to spread to the local lymph nodes and whether it was oestrogen-receptor (ER)-positive. The risk of an ER-positive breast cancer causing death can be reduced substantially by five years of endocrine therapy, which is much less toxic than chemotherapy. However, the present results showed that ER-positive disease chemotherapy along endocrine with therapy was more effective than endocrine therapy.

—Times of India, Dec. 6, 2011

Genetic link to prostate cancer

US researchers have found the first genetic mutation linked to an inherited form of prostate cancer, raising new hope of one day improving early screening for the disease.

—Times of India, Jan 13, 2012

Sari Cancer A Threat For Women: Docs Mum Medics Cite Three Instances



The next time you drape a sari, you might want to re-tie that petticoat knot. According to an article in the November issue of the *Journal of the Indian Medical Association*, doctors at Grant Medical College (GMC) in Mumbai have reported cases of what they are referring to as 'sari' cancer. "We have treated three women for waist or sari cancer in the past couple of years," says author of the article Dr G D Bakhshi, who is an associate professor of surgery at GMC. He authored the piece with colleagues Dr Ashok D Borisa and Dr Mukund B Tayade. While two of the patients diagnosed a couple of years ago are mentioned in the article, the third was detected three months ago. All the women were above the age of 40. "The sari petticoat, if tied in the same place day after day, can cause chronic irritation along the waistline," says the report. "The constant irritation can result in scaling or pigmentation. But most sariwearers don't notice it until it gets chronic," says Dr Bakhshi. He adds that women need to be cautious because waist dermatoses can turn malignant as it did in the case of the three women treated at GMC. Dr Bakhshi advises sariwearers to tie their petticoats looser or switch from the usual rope-like belt to broader ones that reduce pressure on the area. He also suggests that they keep changing the level at which they tie saris. "This kind of cancer does not really affect those wearing pants or belts because the pressure is spread over a larger area, unlike in the case of a petticoat nada or string," he says. Treatment depends on the stage at which the cancer has been diagnosed. "If detected early, it can be treated with reconstructive surgery. But if the cancer has spread to the lymph nodes then we need to remove the malignancy," says Dr Bakhshi. He adds that if detected early the cancer is curable. Chennai-based dermatologist Dr Maya Vedamurthy says that around 3% of sariwearers who come to her have waist dermatoses but she has not seen any cases where it has turned malignant. "The moment I notice it, I tell the patient to start wearing the nada a little looser or switch to a broader string," she says. Like sari cancer, there are several lifestyle-related cancers that are increasingly being seen in India, such as breast, ovarian and tobacco-related cancers. "There are many types of tobacco-related cancers from lung and stomach to bladder and pancreatic. The cancer is also lifestyle-related, caused by smoking as well as increased levels of pollution in the environment," says Dr T Rajkumar, professor and head of molecular oncology, Cancer Institute, Adyar.

—Times of India, Jan 30, 2012

ATTENTION READERS !

To enable us to communicate with you effectively, we request you to kindly send us your email ID, date of birth and change of address if any, to tabassum.shaikh@cancerarfoundation.org or carf@cancerarfoundation.org

Cancer cells can be kept alive in lab

Breakthrough Sparks New Hope For Treatment Of Disease : Researchers said on Monday they have discovered how to keep tumor cells alive in the lab, generating buzz in the scientific community about a potential breakthrough that could transform cancer treatment.

Until now, scientists have been unable to make cancer cells thrive for very long in the laboratory in a condition that resembles the way they look and act in the body. Doctors have largely relied on biopsied tissue that is frozen or set in wax to diagnose and recommend treatment.

The advance has sparked new hope that someday doctors may be able to test a host of cancer-killing drugs on a person's own tumor cells in the lab, before returning to the patient with a therapy that is likely to be a good match. "This would really be the ultimate in personalized medicine," said lead author Richard Schlegel, chairman of the department of pathology at Georgetown University's Lombardi Comprehensive Cancer Center.

"The therapies would be exactly from their tissues. We would get normal tissue and tumor tissue from a particular patient and specifically match up their therapies," Schlegel said. "We are really excited about the possibilities of testing what we can do with this." The method, described in the online edition of the American Journal of Pathology, borrows on a simple method used in stem cell research, experts said.

Lung, breast, prostate and colon cancers were kept alive for up to two years using the technique, which combines fibroblast feeder cells to keep cells alive and a Rho kinase (ROCK) inhibitor that allows them to reproduce. When treated with the duo, both cancer and normal cells reverted to a "stem-like state", Schlegel said, allowing researchers to compare the living cells directly for the first time. The two elements have previously been used separately in stem cell research, according to Yale University pathology professor David Rimm.

—Times of India, Dec 20, 2011

Synthetic windpipe saves cancer patient's life

Surgeons in Sweden have replaced the cancerous windpipe of a Maryland man with one made in a laboratory and seeded with the man's cells.

The windpipe, or trachea, made from minuscule plastic fibers and covered in stem cells taken from the man's bone marrow, was implanted in November.

The patient, Christopher Lyles, 30, whose tracheal cancer had progressed to the point where it was considered inoperable, arrived home in Baltimore. It was the second procedure of its kind and the first for an American.

"I'm feeling good," Lyles said in a telephone interview. "I'm just thankful for a second chance at life." He said he hoped to resume his job, as an electrical engineer as soon as he regained full strength.

—Times of India, Jan 14, 2012

A miracle baby for cancer patient

Woman Gives Birth After Lead Shields Protect Fetus From Radiation : In a rare case, a 30-year-old British woman has reportedly given birth to a healthy baby boy after undergoing radiotherapy and chemotherapy treatment for mouth cancer during pregnancy. Sarah Best was four months pregnant with her first child when doctors told her she had mouth cancer in January. Surgeons at Coventry's University Hospital removed the tumour from her tongue, but found the cancer had spread to her lymph nodes.

Best was told she needed to undergo radiotherapy which could risk the health of her unborn baby. And, two four-inch thick lead shields were built to encase her bump during her gruelling 20-minute long radiotherapy sessions every day. The shields were built to prevent harmful radiation from reaching the foetus, say the doctors.

Incredibly, minutes after finishing her last day of treatment on April 28, Best went into labour. Because of the operation on her tongue she was unable to receive gas and air pain relief but after three hours she gave birth to Jake, the 'Daily Express' reported.

"Sarah's case was extremely rare. As far as published cases go, she was the only woman with mouth cancer in the world to have this combination of chemotherapy and radiotherapy while pregnant," oncologist Dr Lydia Fresco was quoted as saying.

Best, a child support officer at a children's centre, said: "I was devastated when I was told I had cancer. Luckily the surgeons managed to remove most of it but they said they saw specks of cancer cells on my lymph nodes. "It all happened so fast. I was expecting to have Jake at least a month after my treatment ended but I suddenly went into labour on last day. The nurses just wheeled me down the corridor to the labour ward."

—Times of India, Nov. 16, 2011

Test to predict cancer survival

Clinical trials in the US and China have shown that a new gene-based test for patients with lung cancer beats standard methods in predicting survival, researchers reported on Friday. The findings, published in the British medical journal The Lancet, should help doctors to make more accurate prognoses and better choices for treatment, the scientists said. Lung cancer is the most lethal type of the disease worldwide, claiming some 1.4 million lives — more than breast, colon and prostate cancers combined — each year.

—Times of India, Jan 28, 2012

CHARITY SALE !

For inquiry call : Mr. Gajendra Sharma
(Cancer Survivor, Officer Rehabilitation CARF)
on **2300 5000**

FOOD + CANCER

SUGAR MAY HELP HALT ESOPHAGEAL CANCER

In what's perceived to be a major development, researchers claim to have for the first time halted esophageal cancer in its tracks "by using sugar". An international team says it has identified changes in patterns of sugar molecules that line pre-cancerous cells in esophagus, a condition called Barrett's

dysplasia, thus making it much easier to detect and remove these cells before they develop into esophageal cancer. The findings have important implications for patients and may pave the way for prevention of development of the cancer, the researchers said. Individuals with a pre-cancerous condition known as Barrett's esophagus are at an increased risk of developing esophageal cancer, and need to be closely monitored to make sure that the disease is not progressing.

— Times of India, Jan 17, 2012



DIET CHANGE CAN CUT CANCER RISK:

Want to stave off pancreatic cancer? Have a diet rich in selenium and nickel, suggest researchers. A new study says that high levels of the trace elements selenium and nickel may help cut the risk of deadly pancreatic cancer — the elements offer a protective effect against the disease, the 'Daily Mail' reported.

— Times of India, Dec 21, 2011



BISCUITS, CAKES UP WOMB CANCER RISK

Regular Snacking Raises Chance By 42% : Women who snack on biscuits and cakes regularly are at an increased risk of developing womb cancer, a new study has claimed. The 10-year study that looked at the eating habits of more than 60,000 women in Sweden found that those who treated themselves two to three times a week were 33% more likely to suffer the disease. It also found that the risk of developing a tumour jumped by 42% among those who eat them more than three times a week, the Daily Mail reported. Also known as endometrial cancer, the tumours in the womb affects around 6,400 women a year and kills an estimated 1,000 annually in the UK alone. The risks are known to increase with weight gain, but a team at the Karolinska Institute in Stockholm wanted to see if there was a direct link between the amount of sweet foods eaten and the onset of cancer. They studied data from thousands of women who completed questionnaires on diet, lifestyle, weight and general health in 1987. Ten years later, those still alive were given the same questions again. After comparing the data with those earlier findings, the researchers found a total of 729 women went on to develop the diseases in the 18 years from the start of the study. They found little or no increase in risk from eating certain high-sugar items such as sweets, soft drinks, jam or marmalade. But women who frequently snacked on sweet cakes, buns or biscuits were up to 42% more likely to get cancer.

— Times of India, August 24, 2011



'FISH OIL MAY HELP CURE LEUKAEMIA'

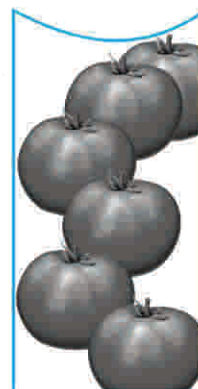
An Indian-origin scientist-led team has produced a compound from fish oil that targets and kills leukaemia stem cells, a key finding which they say could pave the way for new and effective treatments for the blood cancer. — Times of India, Jan 6, 2012



COOKED TOMATOES CAN BE KEY TO CANCER CURE

A nutrient in cooked tomatoes can slow the growth and even kill prostate cancer cells, a study done by an Indian-origin researcher-led team has claimed. Mridula Chopra and colleagues at the University of Portsmouth, through laboratory studies tested the effect of the nutrient lycopene on the simple mechanism through which cancer cells hijack a body's healthy blood supply to grow and spread. The research found that lycopene, which is what gives tomatoes their red colour, intercepts cancer's ability to make the connections it needs to attach to a healthy blood supply. The researchers, from the university's School of Pharmacy and Biomedical Sciences, are now calling for tests to check if the same reaction occurs in the human body, the Daily Telegraph reported. "This simple chemical reaction was shown to occur at lycopene concentrations that can easily be achieved by eating processed tomatoes," Chopra said. Lycopene is present in all red fruits and vegetables, but its concentrations are highest in tomatoes and becomes more biologically active when it comes from processed tomatoes with a small amount of cooking oil added.

— Times of India, Feb 3, 2012



CARF & Prof. Bellur Rajashekhar Chair



CARF & Prof. Bellur Rajashekhar Chair in Head & Neck Cancer Research and Voice Restoration at Manipal University has instituted a Professorial Chair titled, "CARF & Prof. Bellur Rajashekhar Chair in Head & Neck Cancer Research and Voice Restoration at Manipal University. The chair was officially initiated by the signing of a MOU between CARF and Manipal University in the presence of Manipal University officials- Dr. Ramdas Pai, Chancellor, Dr. H S Ballal, Pro Chancellor, Dr. Vinod Bhat, Pro Vice Chancellor, Dr. G K Prabhu, Registrar and CARF team comprising of its Trustees, Dr. Raj Tendulkar and Mr. Shamshi Mulla. This chair bears the name of the Foundation and Dr.

Rajashekhar, Dean, Manipal College of Allied Health Sciences as an acknowledgment of his pioneering work as a Speech Pathologist in the voice restoration of throat cancer patients. This endowed professorial chair funded by CARF, India and matched equally by Manipal University is the first of its kind in India in cancer research. The chair holder, who will be selected by a search team from the internationally renowned academicians in the field of cancer will build upon the recognized research strengths of the Manipal University and help develop strong transactional research programs in Head & Neck cancers and Voice restoration of throat cancer patients.



Congratulations! to Prof. A. A. Kazi

Prof. A. A. Kazi was presented with "Global Achievers Award" for the year 2011 by Citizens Integration Peace Society on 27th Dec., 2011 in Dubai, UAE.



World Cancer Day



On the occasion of world cancer day CARF's team spread out on the streets of Mumbai creating cancer awareness by way of discussions, cancer awareness leaflets and CARF newsletter.

4th ANNUAL CARF AWARDS

Lifetime Achievement Award in the field of cancer



Prof. (Dr.) Biswajit Sanyal
MD (AIIMS), MSc - Nuclear
Medicine (Lon) FICRO, FIPS

Award for Excellence in the field of Oncology



Prof. Manoj Sharma
MD, FICR, MNAMS

Award of Outstanding Contribution in the field of cancer



Mr. Sagir Deshmukh
MSW, BA.,
Medical Social Worker



Prof. A. A. Kazi (R)
Shri. A. K. Khadke(R)



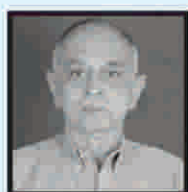
Prof. A. A. Kazi (L)
Shri. Sharad Goel (R)



Audience

Cancer Aid & Research Foundation held its 4th Annual Awards Function on February 18, 2012 at Y. B. Chavan Pratishthan Hall, Mumbai. Shri. Sharad Goel, *Senior VP Corporate Communication Reliance* gave away the awards. Shri. A. K. Khadke, *Zonal Manager of Mumbai Zone, Central Bank* was the Guest of Honour. CARF thanks Reliance Commercials and Central Bank for co-sponsoring the event.

AWARDEES of 3rd Annual Awards



Lifetime Achievement Award
Dr. Arvind Kulkarni
MD,DMRD (England),
DABR (USA)



Award for Excellence
Dr. Anita Borges
MD, FRCPath.



Award for Outstanding Contribution
Dr. Mrs. A. P. Tole
OTD, BA, BLISc, DNTY.M.,
CCBLT, CCASP, MBA



Award for Clinician Scientist
Dr. Raghav Dwivedi
MBBS, MRCS (Eng),
DOHNS (Eng), MRCPS (Glasg.),
MS (Oto-HNS)

Celebration of Holi



Cancer afflicted poor and needy children enjoyed the festival of colour at Raheja Club house, Borivali.

Field members of CARF and Raheja club ensured that the children had a joyful evening.

The chairman and Trustees take immense pleasure
in cordially inviting you to the

11th Foundation Day on Wed., 20th June 2012



Hasna Mana Hai

a Musical evening with comedy King

Raju Srivastav

at Sri Shanmukhananda Chandrasekarendra Saraswati
Auditorium, 292, Comrade Harbanslal Marg, Sion (E),
Mumbai - 22.

For any enquiry call 2300 5000

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 - ✓ Cancer Education through CARF News Bulletin, Patients information leaflets and e-news letter.
 - ✓ Cancer screening and Detection Programme.
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 - ✓ Providing free Cancer Drugs, Prosthesis & Instruments, to poor cancer patients.



The Govt. of India has also permitted us to receive overseas contributions under FC(R) Act, 1976 vide Registration No. 083780936. 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 favour of **Cancer Aid & Research Foundation** and send it to its

Adm. Office: **Cancer Aid & Research Foundation** Municipal School Bldg., Grd. Flr., Room Nos.15-18, Near 'S' Bridge, N.M. Joshi Marg, Byculla (W), Mumbai - 400 011. Tel. No :091-22-2300 5000 / 2306 4442 / 6455 6300 (32 Lines) TeleFax: 2300 8000

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), FICS, FACS, FRCS (Glasgow), PhD (Lon), CSci, UICC fellow, Chartered Scientist

Sr. Editor: **Mrs. Shahina Kara** • Sr. Manager (Publicity & Publication) : **Mrs. Tabassum Khan** • Photography : **Mr. Kamran Siddhiqui**

Layout: **Mrs. Tejashri Achwal** • Printed at: Print world, (Mr. Shamshi Z. Mulla +91-9890241699) Bhiwandi, Dist. Thane

Visitor's Comment

Prof. Hisham Mehanna

*Institute of Head & Neck Studies
and Education, University Hosp.*

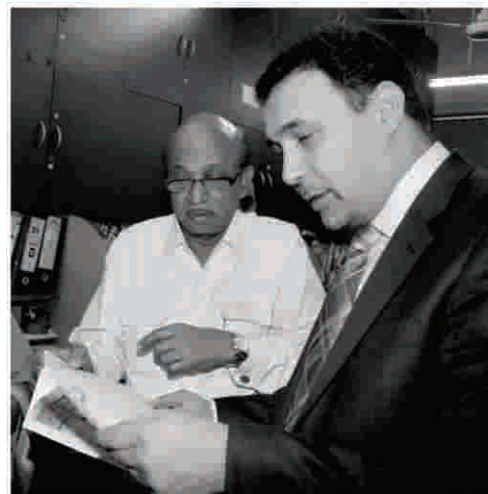
Coventry, UK

visited CARF in the month of
February.

He left very impressed with
the working of the Foundation.

Here we present his jottings
in the visitor's book of
CARF

The amazing work that CARF is doing cannot but impress and inspire. The ethos and the professionalism shines through. The amount of benefit that is provided to needy cancer patients in their time of most need is something that cannot be measured in terms of simple financial terms. I am truly inspired by CARF's work and hope that it continues to grow and flourish for the sake of the patients it helps. My admiration to its Director and Staff for all their dedication and amazing effort.



PLEASE DONATE GENEROUSLY and help CARF
save lives of the poor and needy cancer patients

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