



# CARF

# News Bulletin

(Official Publication Of The Cancer Aid & Research Foundation)

Member: UICC (International Union against Cancer), Geneva, Switzerland

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

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

## CANCER IN PREGNANCY

Cancer is not so common in pregnancy but sometimes it is first diagnosed during pregnancy. These days more women are choosing to be mothers later in their reproductive life, and we are detecting more cases of cancer during pregnancy. As a general rule as age increases so does the risk of developing cancer in general population. Sometimes there might be even delays in diagnosing cancer early in pregnancy because common symptoms may be associated with pregnancy also: such as nausea and vomiting, feeling full (bloating), bleeding from rectum, fatigue (easily feeling tired), headaches. All these symptoms can be associated with normal pregnancy as well, but if these symptoms persist then it needs to be investigated.

Although pregnancy does not adversely affect the pregnancy but treatment modality for cancer can adversely affect the unborn child. Whether it is chemotherapy, radiotherapy or surgery, especially first 3 months of pregnancy can be associated with risk of abortion, fetal malformations. Some of the cancers that are detected first during pregnancy are breast cancer most common, followed by cervical cancer, Hodgkin's lymphoma, Non Hodgkin's lymphoma, Ovarian cancer, melanoma, leukemia, thyroid cancer and cancer of colon.

Previously it was thought that as soon as cancer was detected during pregnancy, it is best to terminate the pregnancy and start therapy. It was also thought that numerous changes during pregnancy may influence tumor growth and help in spreading disease faster. Now we know that just by terminating a pregnancy the prognosis of the tumor does not change. Delay in diagnosis during pregnancy, type of tumor, stage of tumor and some cancers can be more aggressive than others, so it is not pregnant state but the tumor type that is more likely to affect the pregnancy as well as the prognosis of disease.

Obstetricians however can play a crucial role in prevention and picking up cancer early on. Like routine breast examination during antenatal check-up, thorough history taking of family history of cancer. Routine Pap smear test during antenatal period also can help picking up cervical cancer or cervical abnormalities early on. Magnetic resonance imaging (MRI) and ultrasound examination are safe during pregnancy. Sometimes pregnant women undergoing first trimester scan and help diagnose ovarian tumors also.

In general cancer itself does not affect pregnancy adversely. It is the various modalities of treatment that can have an effect on pregnancy, this also depends upon when the treatment has

been started. Like if one gives chemotherapy during the first 12 weeks when the babies organs are being formed, than the baby can develop abnormalities. Studies also have shown when the same chemotherapy is given after 12 weeks of pregnancy than it has not caused fetal abnormalities. So certain chemotherapy drugs may be associated with certain abnormalities in the fetus. Management of cancer during pregnancy depends upon type of cancer, how advanced her pregnancy (weeks of pregnancy), expected date for delivery, stage of cancer and what the pregnant women and her husband choose after being explained about the various treatment options. Multi specialist care is crucial for optimal outcome of pregnancy and management of cancer: obstetrician, medical/surgical oncologist / radiotherapist in joint consultation can best manage cancer. Sometimes if women are very advanced in their pregnancy team may delay treatment till baby is born.



**Dr.(Mrs.) Rajshree Kumar**  
( Consultant, Gyn. Oncologist)

### UPCOMING "NEW LOOK" FOR CARF WEB SITE

In a few days, you will see the 'new look' of our Website. Please do visit our website for obtaining any information and to know about us much more in details.

Website: [www.cancerarfoundation.org](http://www.cancerarfoundation.org)

# Thoughts of



**Dr. Miss Jayamala S. Shinde**  
M.B.B.S., M.S. (ONCO & GEN. SURG.)  
Consulting Surgeon at Cumballa  
Hill Hospital & Heart Institute,  
Seven Eleven Hospital,  
Ashirwad Nursing Home,

## Uterine Malignancies

Uterine cancer is defined as invasive neoplasm of uterine corpus. 15% of all cancers in women are of female pelvic organs invasive neoplasm, most common 95 % are uterine, the endometrial cancer. In US annually 40100 cases diagnosed leading to 7470 deaths. 4th most common accounting 6% female cancers following breast, lung & colorectal, majority present at early stage hence favourable prognosis, only 3% of cancer deaths in women.

### Symptoms :-

- 1) 90 % Postmenopausal bleeding -10 -20% of these has Gynaecologic malignancy. 70-75% diagnosed with stage I disease either menorrhagia or metrorrhagia.
- 2) Firm polypoid mass growing in uterine cavity - pelvis, rapidly increasing. Mean age-61yrs, 75% occurs in postmenopausal.
- 3) Abdominal pain /bloating or other symptoms of metastatic disease.
- 4) Purulent genital discharge, pain, weight loss.
- 5) Change of bowel /bladder habits 6) 5% asymptomatic - diagnosed on Pap smear.

### Risk factors :-

- 1) Premenopausal females to develop endometrial cancer - obesity , nulliparity, anovulatory menstrual cycles, diabetes & hypertension -most common -low grade endometrioid endometrial cancer. Also at higher risk of 19-25% of synchronous primary ovarian cancer.
- 2) Lynch II syndrome - hereditary nonpolyposis colorectal cancer (HNPCC) - 9% are younger than 50yrs with endometrial cancer, 40-60% risk of same by age of 70yrs due to mutation in MSH, MSH2, MSH6 genes. Also increased risk for cancer stomach, ovary, small bowel, hepatobiliary system, pancreas, brain, breast, ureter or kidney.
- 3) Incidence higher in Caucasians than Asian /black women due to poor access to care & presentation at more advanced stages.
- 4) Sarcomas more in black females. Leiomyosarcoma at 30-50yrs.

**Etiology :-** Endometrioid adenocarcinomas due to excess estrogen.

- a) Exogenous estrog i) Estrogen replacement therapy, ii) Tamoxifen.

- b) Endogenous -i) Obesity- increased BMI in which Androstenedione converted to estrone & Androgens to estradiol thus increases estrogen. ii) Polycystic ovary syndrome (PCOS) with anovulatory cycles iii) Estrogen secreting tumors -Granulosa cell tumors, iv) Nulliparity & Infertility- related to chronic an ovulation, v) Excess alcohol use - increases estrogen, vi) Late menopause & early menarchy has more anovulatory cycles with more estrogen.

- c) For Leiomyo sarcoma - African American race,
- d) Pelvic radiation causing carcinosarcomas.

Protective factors - which decreases unopposed estrogen - i) Combination oral contraceptive pills for 12 months decreases risk more than 40%. ii) Postmenopausal females -combined estrogen and progesterone hormone replacement therapy. iii) Smoking decreasing estrogen -early menopause.

Types- I) 60-80% Adenocarcinoma ii) 2% Adenosquamous Ca iii) 5% Clear cell/Papillary 5-10% iv) Sarcomas-4% Carcinosarcomas or mixed 48-50%, Leiomyosarcomas 38-40%, Endometrial stromal sarcoma 8-10%, Remaining heterologous histologic component foreign to uterus are Rhabdomyosarcomas, Osteosarcomas /Chondrosarcomas. Endometrial cancer also can be divided in 2 classes depending on etiohistology. I) More than 80% type I due to unopposed raised estrogen - stimulate, low grade histology grade I, associated with atypical endometrial hyperplasia - precursor lesion, good prognosis. II) Type II- Estrogen independent, in older females with high grade histologies grade II & III -uterine papillary serous or clear cell -poor prognosis. Spread -Ca endometrium may originate in small area e.g. Endometrial polyp or diffuse multifocal pattern. Early tumor growth is exophytic & spreading-friable-spontaneous bleeding -even at early stage.

Later tumor growth -myometrial invasion & grows toward cervix. Four routes of spread occur beyond the uterus - 1) Direct /Local spread -most local extension beyond the uterus . 2) Lymphatic spread to pelvic, para-aortic & rarely inguinal nodes. 3) Hematologic to lungs, liver, bone, brain . 4) Peritoneal /transubal spread -intra peritoneal implants in papillary serous ca (UPSC) -like ovarian cancer.

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

## CARF Oration & Awards 2015

**Date : 27th February 2016**

**Time : 3.00 to 6.00 pm**

**Venue : Yashwantrao Chavan Centre,  
Gen. Jagannath Bhosle Marg,  
Opp. Mantralaya, Mumbai - 400 021**

## Chilli compound pill could kill cancer cells



*Two researchers from the Indian Institute of Technology, Madras, found that in high doses, capsaicin's heat causes cell membranes to come apart.*

Researchers from the Indian Institute of Technology, Madras, have figured out how the compound responsible for chillies' heat kills prostate cancer cells.

The findings suggest that the chilli compound, capsaicin, could one day be used to develop effective anticancer drugs in the form of an injection or pill. The compound is also used in creams sold to relieve pain.

In this study, researchers Ashok Kumar Mishra and Jitendriya Swain found that in high doses, the compound causes cell membranes to come apart.

About 10 years ago, researchers reported that capsaicin can kill prostate cancer cells in mice while leaving healthy cells unharmed

But translating that dose to humans would require them to eat a huge number of chili peppers per day.

Figuring out how capsaicin works could help researchers transform it into an effective drug in the form of an injection or pill.

So, the researchers tried to gain a deeper understanding of capsaicin's effects so that it might be harnessed for new medicines in the future.

The scientists were able to detect how the compound interacts with cell membranes by monitoring its natural fluorescence. The study showed that capsaicin lodges in the membranes near the surface. Add enough of it and the capsaicin essentially causes the membranes to come apart.

The findings appeared in *The Journal of Physical Chemistry B*.

**Mumbai Mirror - Sept 11, 2015**

## Health Tips



Red kidney beans are one of the richest anti-oxidants. They help the body fight free radicals and also reduce the risk of cancer

**Mumbai Mirror Oct 29, 2015**

## Chemicals in shampoos may up breast cancer risk

**WASHINGTON:** Parabens -common chemicals found in personal care products such as shampoos, body lotions and sunscreens -may increase breast cancer risk even at low doses, according to a new study.

Parabens are a class of preservatives widely used in consumer products. They are considered estrogenic because they activate the same estrogen receptor as the natural hormone estradiol.

Studies have linked exposure to estradiol and related estrogens with an increased risk of breast cancer. "Although parabens are known to mimic the growth effects of estrogens on breast cancer cells, some consider their effect too weak to cause harm," said lead investigator Dale Leitman, from University California, Berkeley. "But this might not be true when parabens are combined with other agents that regulate cell growth," said Leitman.

Existing chemical safety tests, look only at parabens in isolation and don't into account that parabens could interact with other types of signalling molecules in the cells to increase breast cancer risk.

**Times of India Oct 29, 2015**



## Sausages, ham cause cancer, red meat risky: WHO

**PARIS** Eating sausages, ham and other processed meats causes colon cancer, and red meat "probably" does too, a UN agency said on Monday in a potentially blow for the global meat industry.

The analysis of 800 studies from around the world by the International Agency for Research on Cancer (IARC) found "sufficient evidence in humans that the consumption of processed meat causes colorectal cancer".

The agency cited research attributing about 34,000 cancer deaths per year worldwide to diets high in processed meat. As for red

meat — if the suspected link were to be confirmed — it would account for some 50,000 cancer deaths per year worldwide.

The processed category includes meat that has been salted, cured, fermented or smoked — hot dogs, sausages, corned beef, dried meat like beef jerky, canned meat or meat-based sauces. The finding supports "recommendations to limit intake of meat" — particularly in processed forms. For an individual, the risk of getting cancer from eating processed meat was statistically "small", IARC said, but "increases with amount of meat consumed".

**Mumbai Mirror  
Oct 27, 2015**





Hello Mam,  
 I am thankful to you for your help in my treatment. Mam I completed my treatment & living a healthy & life followed by health diet, including follow up after every 3 months. Thanks once again we always remember you cell in our prayer.

Postcard  
 Doreya Anand Pandey  
 Lomwala 416101  
 Ph: 9975625747

CANCER AID & RESEARCH FOUNDATION  
 BRIGLIA MUNICIPAL SCHOOL BLDG, NEAR S BRIDGE, BRIGLIA (WAK), MUMBAI - 400 011.  
 Tel: 2300 7000/8000/5000

POST CARD  
 15 JUN 2015

असलाभुअर्जुन  
 हमे आपका रतल मिला यह जानकर बहुत खुशी हुई थी की माप हमे अब भी मदद करने हैं। आपके फावले बन के ओर ले उससे के बिने जो मदद मिली थी उससे हमने हमारे बेटे आशिफ का इलाज किया। अष्टा की मेहरबानी से इलाज अच्छी तरह हुआ है। और आशिफ लबीयत भी अच्छी है। फिलहाल सभी हर चीज महीने बाद येकअप के लिए बुलाया जात है। खुशी की बात ये है की हमारे बेटे आशिफ की लबीयत काफी अच्छी है। हम आपके शुक्रगुजार हैं की आपने हमारी मदद की।

शुक्र गुवा में माद रत्तना आपका शुक्रगुजार  
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POST CARD  
 15 JUN 2015

## 7 Things to Know While You're Undergoing Chemotherapy

When I was diagnosed with breast cancer in October, 2012 at the age of 37, my world was turned upside down. My particular flavor of cancer was stage 1, grade 3, triple negative infiltrating ductal carcinoma. That's a mouthful, huh? I had my bi-lateral mastectomy performed and one month later I began six months of ACT (Adriamycin, Cytosan, and Taxol) chemotherapy.

While I can't guarantee that your road will be without bumps, in fact, I can almost assure you that there *will* be bumps, I can offer you some insights that helped me along the way. So, buckle up and hold on tight, you can do this. Good luck to you my friend. I'm sending you love and strength.

### 1. Don't eat anything you actually like during chemo

Chemo can cause all sorts of aversions. The most common being that you won't be able to stand anything you consume during chemo. I don't know if it's just the association with it being "chemo food" or if there is some scientific explanation. So do not, I repeat, do not bring your favorite candies or snacks with you to the infusion room. Rather, bring something you're trying to quit (lol), candy bars anyone? Just kidding. Your best bet is to bring bland, stomach-soothing items like crackers, licorice, ginger candies etc.

Some people get a funny metallic taste in their mouth throughout chemo. If this happens to you, I'd advise you to avoid using metal utensils to eat, that'll only make it worse. Other than that, you just have to grin and bear it. And remember, this too shall pass.

Still other get mouth sores. If this happens to you, talk to your oncologist about a special mouthwash that can help on that front.

### 2. Hire a cleaning service (and other bougey services)

Non-negotiable. Listen, you won't be buying razors, shaving cream, shampoo or conditioner for the next eight months or so. Divert those funds to a cleaning service.

While I'm at it, look into receiving complimentary integrative service like massage, acupuncture and/or working with a dietician during treatment. Insurance might cover some of the cost of these complimentary services so be sure to investigate.

### 3. Take center stage, you're the star of this show

Speak up to anyone and everyone. Make them listen. Now is the time to act like your oncologist is your personal therapist. Tell him or her *everything* that you are feeling, especially if you have a gut feeling something isn't right. When I was receiving my third Adriamycin dosage, my vein collapsed and the drug escaped into my body. It is extremely poisonous and I knew something was wrong immediately. I spoke up, and I kept speaking until I was listened to. I had to go to the ER to get an antidote which was administered over a three-day period. The point is, nobody else is inside your skin. Only you know when something isn't right, so be your own advocate.

Also on this front, each infusion will be different for you. If you think you've figured out the key to your anti-emetics, that formula will likely change by your next infusion. So, listen to your body and if you feel nauseous, ask for stronger anti-emetics. Your doctor has them, she's just waiting for you to need them.

### 4. Infusion-day outfits must be planned carefully

Most people receive their chemo infusion through their power port. But if you didn't get a port, you'll receive your chemo through a regular IV in your arm or hand. Having to deal with that catheter in, your arm, rolling the IV pole to the bathroom, getting your pants down, doing your business and then getting dressed again can be a real chore with one free arm. Do yourself a favor and wear elastic/stretchy pants. When you aren't fast asleep in Benadryl heaven, you will be peeing the rest of the time. In addition to the bags of chemo dripping, your doctor will also drip some anti-emetics and lots of saline to help keep you hydrated. You'll also want to drink lots of water to keep your veins plump and to keep all the poison cruisin' through your body. That's a lot of liquid going into you. Bathroom stops will be frequent!

Oh and just an aside for those of you who are getting Adriamycin like I did, do *not* be alarmed when your pee is red. That's a totally normal side effect of the drug, that's the reason it's nicknamed the "red devil".

### 5. Entertainment

Every infusion room is different, some are really drab and pack patients in like cattle. Others are beautiful wide open spaces. Learn about yours in advance and bring things like noise canceling headphones and downloaded movies on your iPad or smartphone to make you feel at little more at home. You'll likely sleep through the entire infusion from the yummy Benadryl bag they mainline, but at least you'll have your creature comforts, just in case. Personally, I always had gossip rags like US Weekly with me. That was about all my mind could process. I felt pretty spacey during chemo and couldn't always comprehend what I was reading. So pictures and gossip blurbs were the perfect companions on infusion day!

### 6. Be kind to yourself

Rest and sleep as much as you need. Today, I'm almost 3 years out and I still ask my husband on the regular "what, exactly, did I *do* during chemo?" I have to ask because I've basically lost that year of my life. Not sure if it's chemo brain or just my brain protecting me by blocking out that traumatic year. His answer is always the same, "you pretty much slept and were in bed for the year."

In my case, relaxation was key. For some of you, maintaining your normal work schedule will be key. Whatever your path, just be sure to listen to your body and be gentle with yourself.

In fact, have someone take you to chemo and keep you company. But that someone should be close enough to you that they won't be offended if you ignore them completely (or sleep the whole time). If you're on your own for an infusion, don't drive yourself, take an Uber. You'll be too whacked out and tired from the Benadryl and the emotion of the day to drive yourself.

### 7. Get your thank you cards ready

Being diagnosed with cancer is the shits. But one upside is all the presents you will receive from friends and family, near and far :) These gifts will serve as your fuel and they will taper off once you're through with active treatment. So enjoy them while they roll in and be sure to send out a handwritten thank you.

- Andrea Ghoorah Sieminski,  
HuffintonPost.in

Times of India - Aug 28, 2015



### Happy Birthday

Justice(Retd.) Shafi S. Parkar	1 October	Mr. Usman Kazi	6 November
Mr. Mohd Arif Nasim Khan	21 October	Dr.(Mrs.) Irfana Rehan Kazi	24 November
Mrs. Savita Nathani	2 November	Mrs. Rohini Ramnathan	19 December

## Survivor Story



**Mrs. Zarina Usman Koradia** - 55 years, had a lump in her breast. She went to her family doctor for a preliminary check-up who advised her to have a more thorough check-up with an Oncologist. She got the biopsy done at Prince Ali Khan Hospital and was diagnosed with breast cancer. This led her to state of depression but the brave lady decided to fight the disease. The treatment cost was estimated very high, which led her to further depression. Through various sources and through word of mouth, Zarina came to know about CARF. When she came to CARF, she was given moral support through counselling as well as took care of her financial burden. She underwent surgery, followed by few Chemotherapy sessions and subsequent booster doses. The ordeal took a huge toll

on her physical and mental health but by God's grace, the lady survived and is now recuperating towards a healthy life. In her own words "God & CARF saved my life. I am hugely indebted to them". CARF wishes her a healthy life for future.

## Breast Cancer Day



On the occasion of "**World Breast Cancer Day 2015**" CARF organized a **Breast Cancer Awareness Drive** for students at SNTD Women's University, Churchgate on **Wednesday, 28th October, 2015** with a view to spread maximum awareness and precautionary measures on this topic amongst the young generation of our Country.

CARF distributed Brochures & Pamphlets specially printed on the above said topic along with Pink Ribbons to provide guidelines and health tips amongst more than 500 students.

The Drive was very successful and the College authorities & students welcomed and appreciated CARF's initiative.

## Children's Day Celebration at CARF



**Date: 14<sup>th</sup> November, 2015 - CARF Organized Diya Painting program on the occasion of Children's Day for young cancer kids.** It was fun and entertainment for these children to add some colourful moments in their lives. This was headed by a team of Trainers at CARF's office premises where 30 cancer patients participated in the program by decorating the diyas with beautiful colours & designs. The program started at 11am along with CARF staff and the kids were served snacks & chocolates. It was an enjoyable & memorable event for all. The programme ended with return gifts distribution to cancer kids by CARF. **In all, CARF was happy to bring a smile on the faces of children on the occasion of Children's Day.**

## World Rose Day

CARF celebrated World Rose Day on Wednesday, 30<sup>th</sup> September 2015 in the CARF's office at Byculla. By this act these poor patients were assured that CARF is with them in their battle against fighting this disease, and that we care for them. Cancer affected children along with their parents attended the function. Besides serving snacks & fruit juice, Mr. Shamshi Mulla-CEO, Mrs. Savita Nathani-COO & Mrs. Tabassum Khan-DGM distributed gifts, roses & fruits to the little children and spent some light moments with them. On this occasion, BabyCell Foundation presented CARF with a donation cheque towards the treatment of these children.



## Talk at CARF



**Dr. Satish Khude - M.B.B.S., F.C.P.S. (MEDICINE) HAEMATOLOGIST.**

As September is for "Acute Leukemia Awareness" month, we had organized a lecture by **Dr. Satish Khude**, Haematologist on the same. He explained the disease and types of the disease to patients and their relatives. He also explained how it can be controlled and diet for patients during the treatment. The talk was very informative.

**Dr. Jayamala Shinde - M.B.B.S., M.S. (ONCO & GEN. SURG.)**

22nd Oct is the breast cancer day, **Dr. Jayamala Shinde**, the well-known oncologist had given a talk on "Breast cancer". She focused on the risk factors of the breast cancer & its prevention and also gave some tips for identification of Breast cancer. She described the various diagnostic techniques for the same.

## World Food Day



**World Food Day** is being celebrated during the month of October, and Cancer Aid & Research Foundation spares no opportunity in participating in such occasions. World Food Day is a day of action against hunger. Hundreds of poor people who are suffering from cancer or, their near and dear ones who are admitted in the hospital, they have no place to stay while the treatment is going on and hence are scattered around the Tata Memorial Hospital (TMH) premises. These poor people can barely afford two square meals a day, whereby they go hungry for days together. To celebrate this occasion, CARF organized two events – one at CARF's office on 30th Oct. where around 80 patients were distributed food and food grains, second at Tata Memorial Hospital campus on 31st Oct. where more than 300 patients and their relatives were served food packets.



Stoptober - the month-long campaign to get people to quit smoking – is exactly what **CARF** supported during the month of October. Life is precious and Stoptober is all about supporting and encouraging each other to quit smoking potentially adding years to your life. Taking part in the challenge was the first step to a longer and healthier life. Smoking accounts for one in four cancer deaths and nearly one fifth of all cancer cases, so it's vital that work continues to support smokers to quit. We encouraged every smoker to consider making a quit attempt this October and join the thousands of people who are feeling the benefits from stopping smoking last year.

**A public health initiative supported by the Cancer Aid & Research Foundation.**



This year also **CARF** Mo Bro's actively took part by growing moustaches during the month of November, with a celebration on the last day by winning the title "Man of Movember" whose moustache was well grown and well groomed.

Men grew moustaches during Movember (known as the month of November), to spark conversation and raise vital funds for its men's health programs. Moustaches have been grown worldwide, but won't stop growing as long as serious men's health issues exist.

Mo Bros participated by growing a moustache for 30 days of Movember, whereas Mo Sistas committed to support the men in their lives while helping to promote men's health.

We are committed for saving and improving the lives of men affected by prostate cancer and testicular cancer.

**A public health initiative supported by the Cancer 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](mailto:cancerarfoundation@yahoo.com) | [carf@cancerarfoundation.org](mailto:carf@cancerarfoundation.org)
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- Providing career guidance and Rehabilitation to cancer patients and their relatives



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., Ground Floor, Near 'S' Bridge, N.M. Joshi Marg, Byculla (W), Mumbai - 400 011. Tel. No : 0091-22-2300 5000 / 2306 4442 / 6455 6280-6303 (24 Lines) TeleFax: 2300 8000

All views expressed in the CARF News Bulletin belong to the author. The Foundation need not necessarily subscribe to them.

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- **Photography : Mr. Kamran Siddiqui**

**CARF** wishes all it's readers and well wishers



CARF will be participating in the Mumbai Marathon 2016. We want your support by purchasing a charity Bib from us, the proceeds of which will be utilized towards the funding and services for cancer treatment of poor and needy cancer patients, or, you can even support by way of donation. Hence our earnest appeal to you, to join hands in the United Fight Against Cancer.

**COME JOIN US TO FIGHT AGAINST CANCER**

For further enquiry please contact :  
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