

Global Diversity: Equity and Access

Access to treatment and Cultural issues-Africa situation

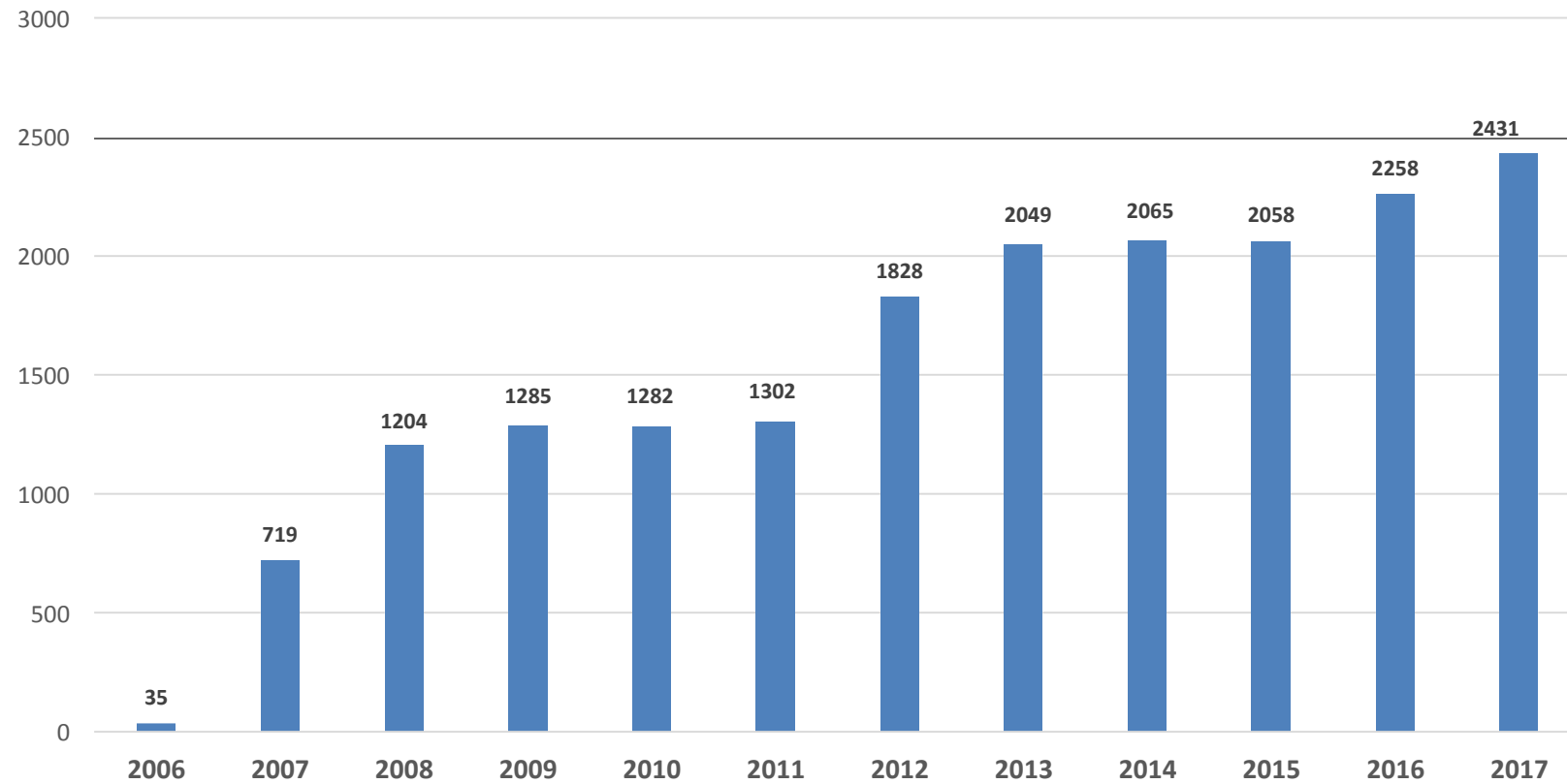
Patience Mbozi
RN, Dip(HE)PC, BSC PC

Zambia-Cancer Diseases Hospital (CDH)

- CDH is the only hospital offering radiation therapy in Zambia
- Situated in Lusaka, in the South-West corner of the University Teaching Hospital premises
- National referral center for cancer
- Catchment population-15 million people of Zambia spread in its ten provinces
- The hospital caters for patients from neighbouring countries such as Malawi, The Democratic Republic of Congo and Angola
- It is Government funded

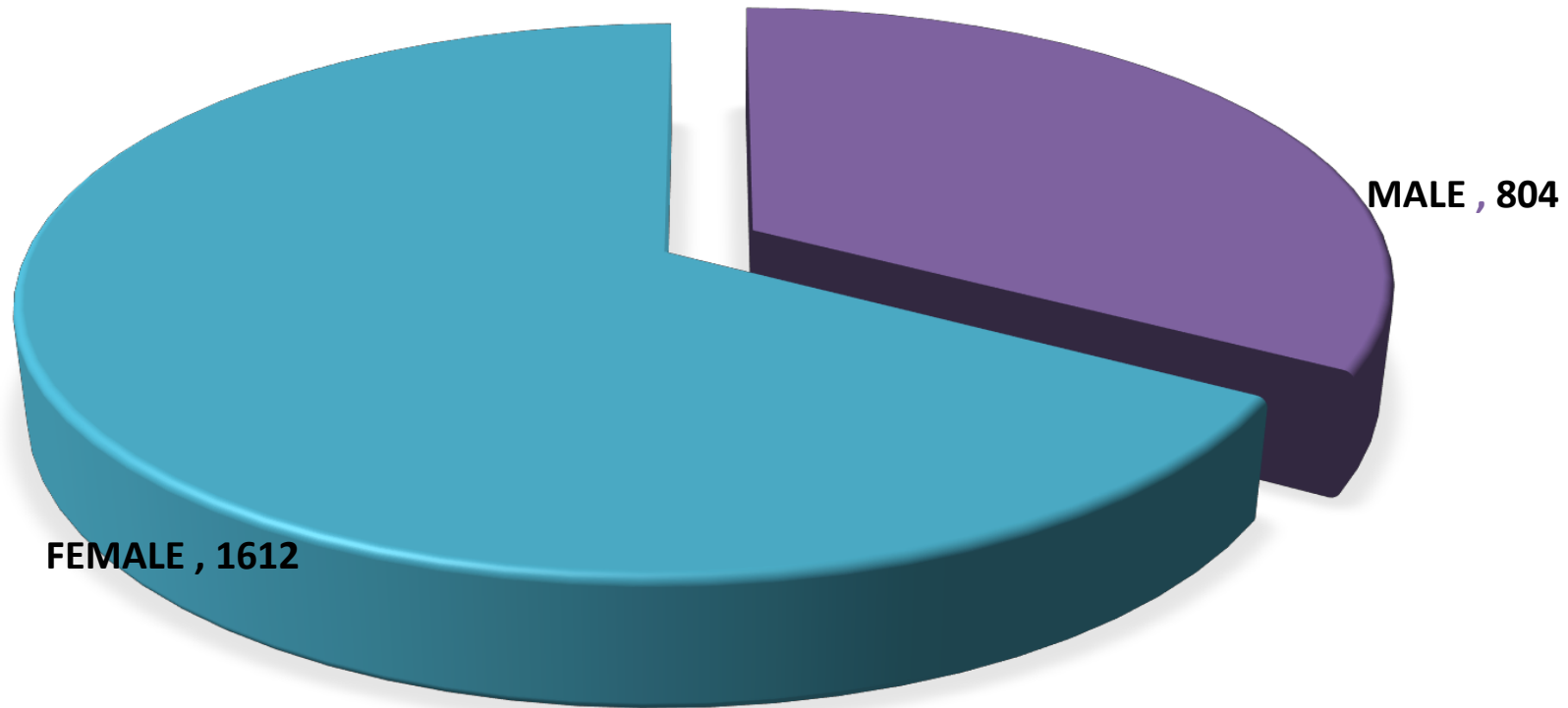


CDH No. of OPD cases attended (2006 to 2017)

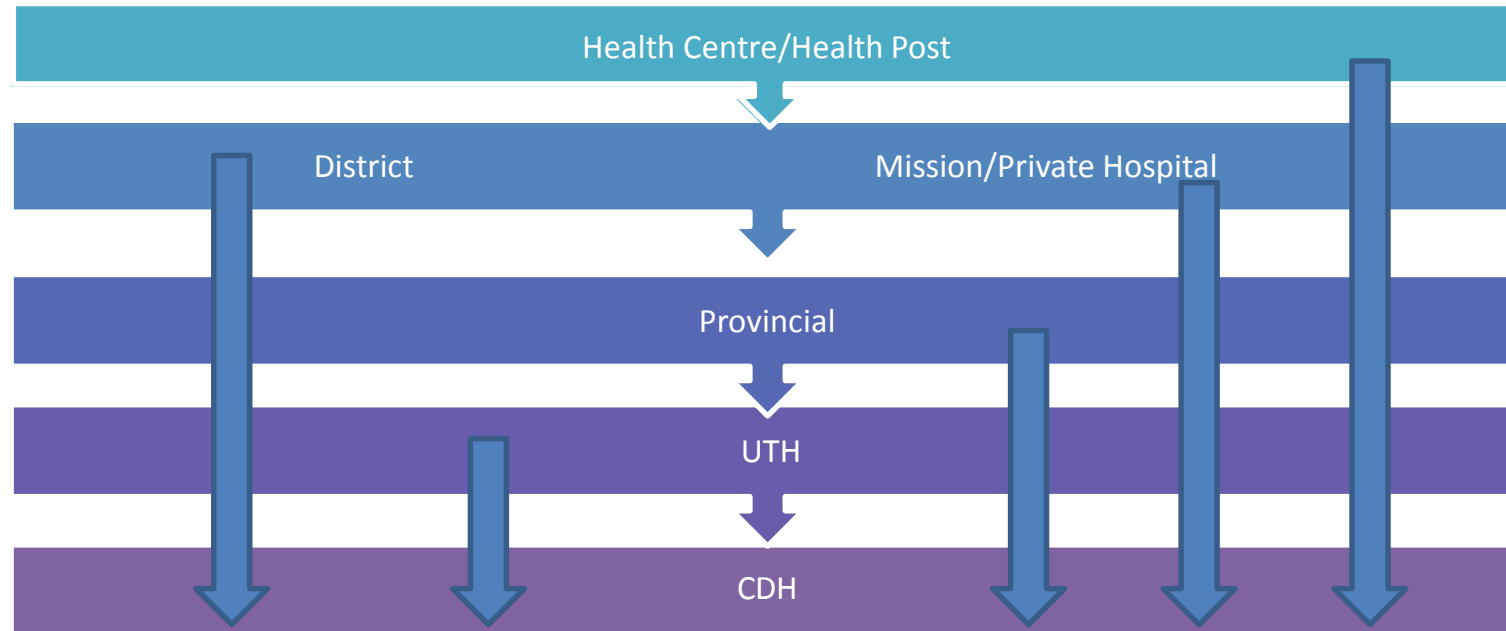


CDH

GENDER DISTRIBUTION 2017 (N2431)



Cancer Diagnosis and Referral System

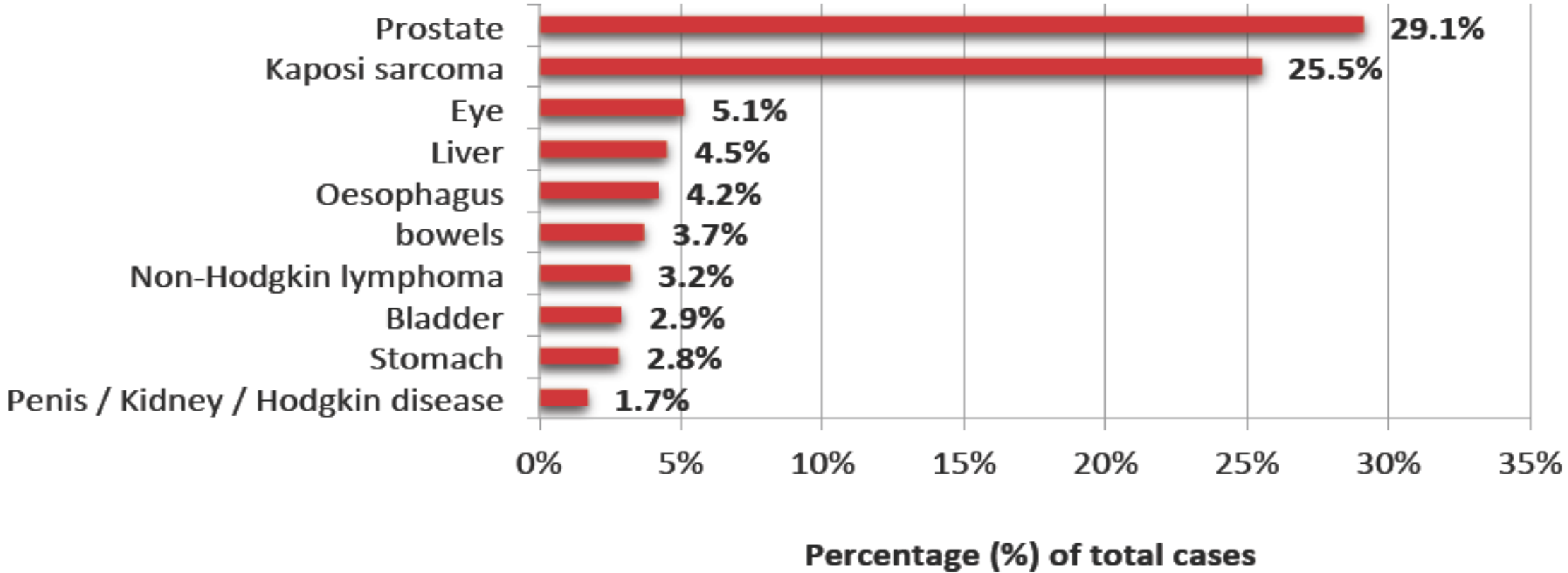


Referral to CDH with histological diagnosis. Preferable if staging investigations done.

Zambia National Cancer Registry (ZNCR)

2013

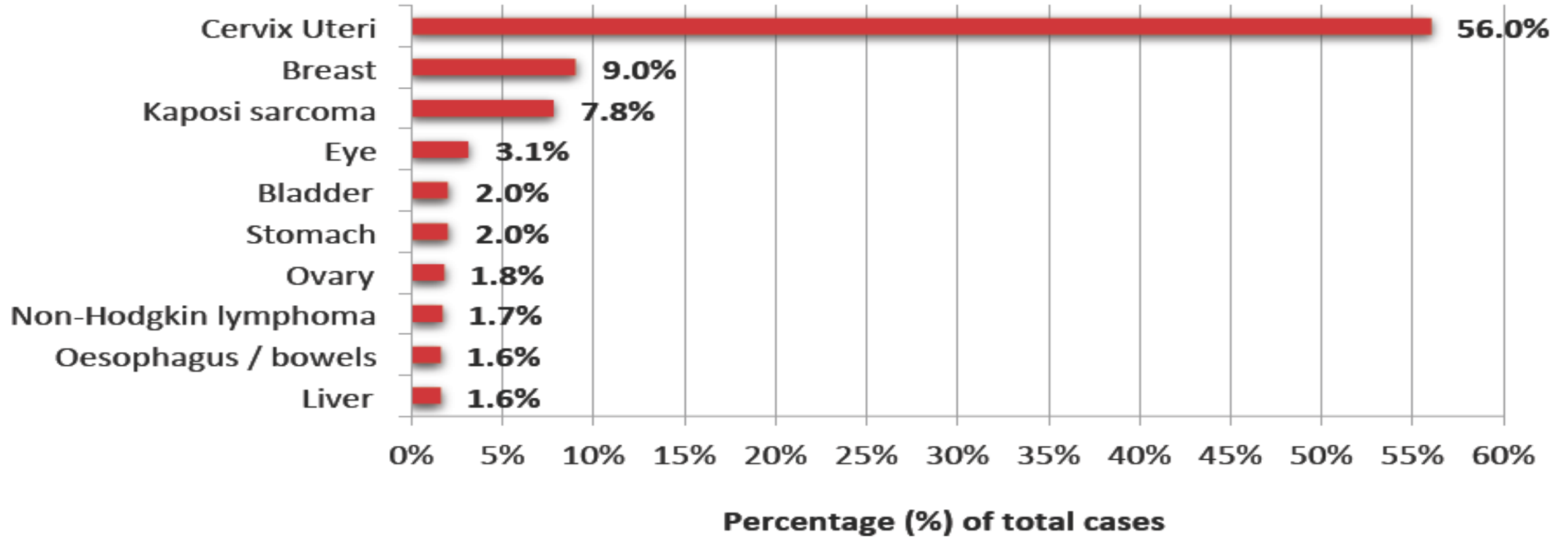
Top 10 Male Cancer Sites



1238 registered. 359 ca prostate, 314 KS

ZNCR 2013

Top 10 Female Cancer Sites



1938 registered in women, 1079 cacx,
breast 174, KS-151

Anti-Cancer Medications

Well stocked pharmacy with over 80% stock level

- **Anthracyclines** Actinomycin D Doxorubicin Epirubicin Bleomycin Mitomycin
- Mitoxantrone
- **Antimetabolites** 5-Fluorouracil Fludarabine Capecetabine Methotrexate
- Gemcitabine
- **Vincalkolides** Vinblastine Vincristine Vinorelbine
- **Platinum Compounds** Carboplatin Cisplatin Oxaliplatin
- **Taxanes** Paclitaxel Docetaxel
- **Alkylating drugs** Cyclophosphamide Ifosfamide
- **Topoisomerase I inhibitors** Irinotecan Hcl
- **OTHERS** Thalidomide Etoposide Darcabazine Temozolamide Procarbazine
- **Hormone Antagonists** Anastrozole Letrazole Tamoxifen Goserelin Bicalutamide
- **Adjuvants** Filgrastim Calcium Folate Calcium Folate Zoledronic Acid
- **Targeted therapy**-Imatinib, bevacuzimab, cetuximab, Rituximab, Bortezomib, Transtuzumab

Pain Management

- Opioid Analgesics Codeine Phosphate, Paracetamol, Tramadol, IR Morphine Sulphate, SR Morphine Sulphate and Fentanyl patches
- Oral Morphine suspension is available at secondary and tertiary institutions and a few primary care facilities
- Other drugs according to the WHO step ladder are also available e.g.
 - Step 1 paracetamol and non steroidal anti inflammatory drugs
 - Step 2 tramadol, codeine
 - Step 3 oral morphine, and morphine slow release tablets, fentanyl patches

Challenges - Zambia perspective

System / Service Delivery

- Access to screening, cancer histopathological diagnosis and care for the remote areas low
- No available out-patient accommodation
- Expensive equipment maintenance and cancer drugs
- Limited funding

Workforce

- Specialist Staffing levels are very low
- Low levels of understanding of the need for multidisciplinary cancer management

Patient / Family Factors

- Inadequate patient food and daily needs
- Late presentations of patients with advanced disease due to socio cultural issues: language barriers
- Poor access to treatment due to transport from different geographical areas.

Nurse Oncology and Palliative Care Education

- November 2017 first draft of diploma and BSc Oncology Nursing curricula developed with GNCZ/CDH
- December 2017 validation: local and international input
- January 2018 final diploma in Registered Oncology Nursing curriculum completed
- 20 March 2018 curriculum launched for implementation July 2018
- No palliative care curriculum yet

Sub-Saharan African perspective

Morhason-Bello et al (2013) ; Stefan DC (2015)

System / Service Delivery

- Rare palliative care or homebased care services for terminally ill patients
- Cancer care is expensive
- Many countries in sub-Saharan Africa have no/inadequate radiotherapy and histopathological diagnosis facilities

System / Service Delivery cont'

- Low prioritization of oncology services among policy makers, health administrators, and health care educators
- Shortage of systemic anticancer agents
- Scarce local, effective, and sustainable research
- Low quality of cancer data systems leading to scarcity of updated, comprehensive, and reliable data
- High cost of immunisation against human papillomavirus and other infections that cause cancer

System / Service Delivery cont.'

- Laws and regulations restricting or prohibiting the use of opioids
- No government subsidies for health care
- Fewer than 11 countries in sub-Saharan Africa offer access to oral morphine
- High cost of treatment resources and medications

Workforce

- Shortage of trained health-care personnel

Patient / Family Factors

- Believe prognosis better than what they are told
- Unrealistic expectation of disease response
- Patient-family disagreement about treatment options
- Heavy economic and psychosocial burden of cancer

References

- Morhason-Bello IO, Odedina F, Rebbeck TR, Harford J, Dangou JM, Denny L and Adewole IF (2013) Cancer Control in Africa 1 Challenges and opportunities in cancer control in Africa: a perspective from the Africa. Organisation for Research and Training in Cancer. *Lancet Oncol*; 14: 142–51
- Stefan DC (2015) Cancer Care in Africa: An Overview of Resources. *Journal of Global Oncology*. 1(1) 30-36