

COLLABORATION BUGANDO MEDICAL CENTRE –IRST

Dr Nestory Masalu
Oncologist –BMC

Cancer in the World

▶ World wide incidence

Globocan –Today -----14 millions

Globocan projections 2030----- 22millions

▶ Worlwide Mortality

Today-----8Million

Mortality 2030-----30Million

Developing Countries

Incidence Today-----8Million(8/14)

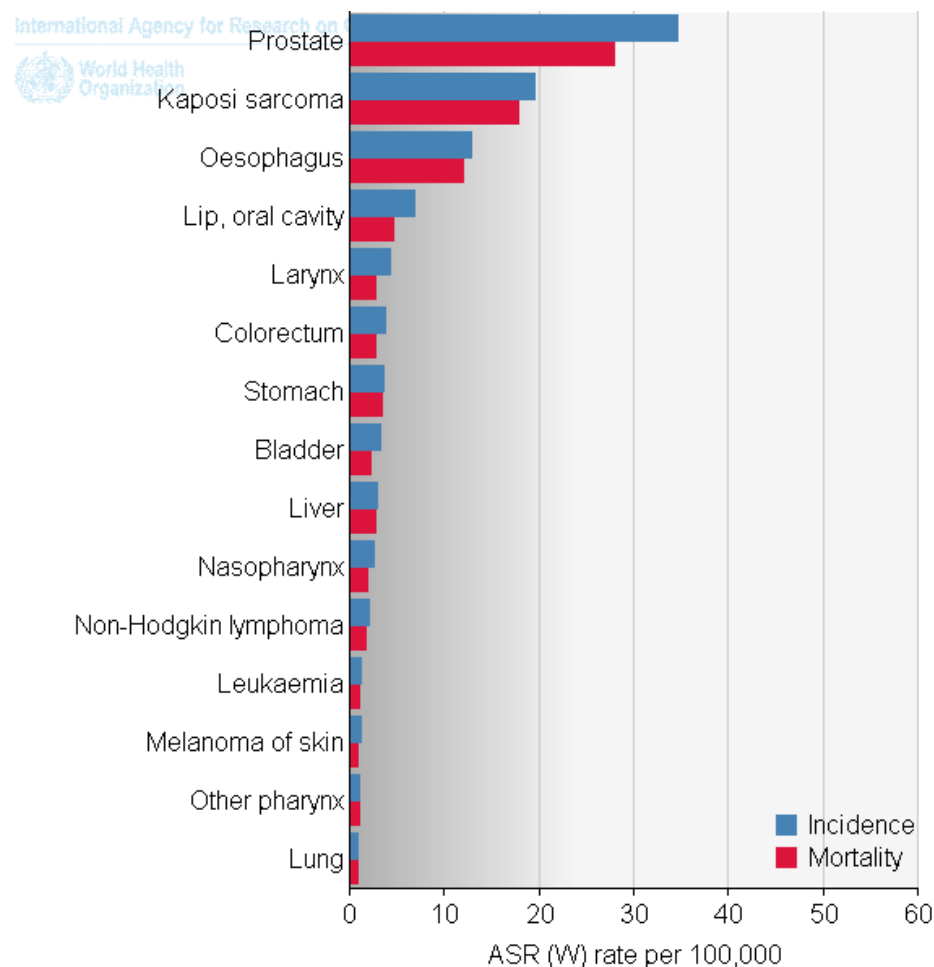
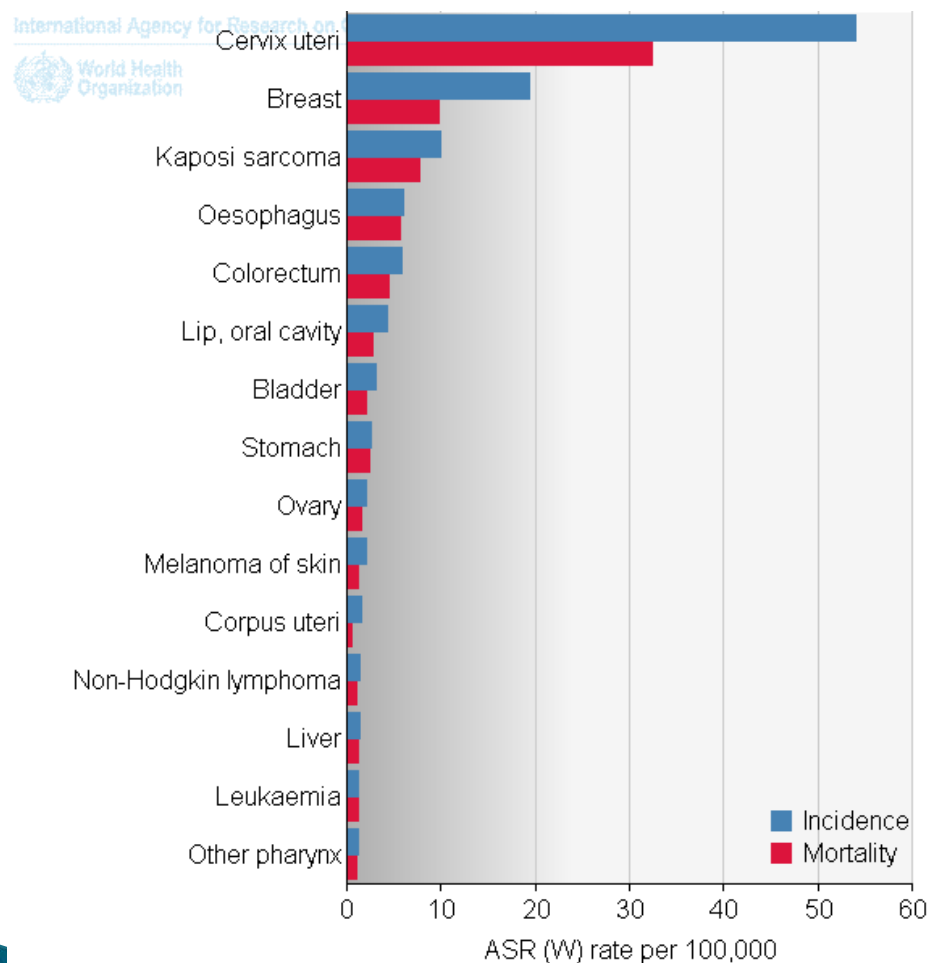
Incidence 2030-----13Million(13/22)

Mortality Today-----5Million(5/8)

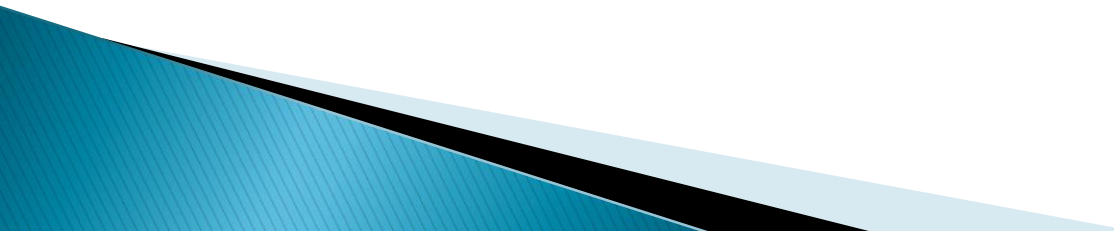
Mortality 2030-----9 Million(9/30)

TANZANIA

ESTIMATED AGE-STANDARDISED INCIDENCE AND MORTALITY RATES: WOMEN AND MEN



Outline

- ▶ Bugando Pathology
 - ▶ Bugando Oncology
 - ▶ Growth of the oncology services
 - ▶ Training.
 - ▶ Screening
 - ▶ Drug supply
 - ▶ Palliative care
 - ▶ Instrumentation.
 - ▶ Meetings
 - ▶ Re-Training
 - ▶ Research
 - ▶ The fruit of the Collaboration with IRST
- 

WHAT HAD THE COLLABORATION DONE

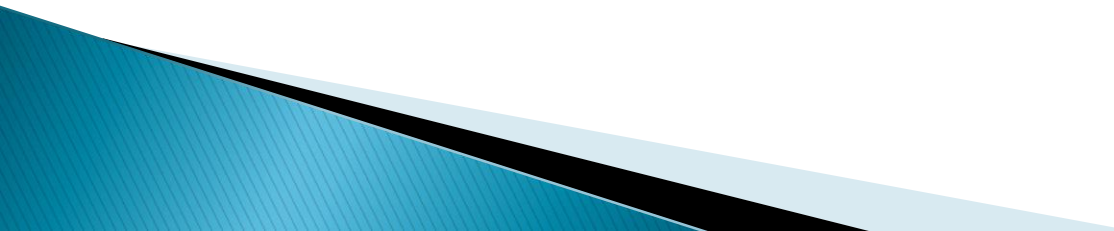


- Prior to the year 2000, there was nothing.
- The collaboration paid the school of the first pathologist– Uganda.
- While he was in Uganda the Collaborators paid the presence of the pathologists and Technicians to stay and work at Bugando.
- The Laboratory was inaugurated in 2000 and It Bears the Name Vittorio Tison.
- In 2008 the Laboratory was handed over to Bugando Medical centre.



Dr. Maurizio Puccetti e Dr. Vittorio Tumino

Bugando Pathology

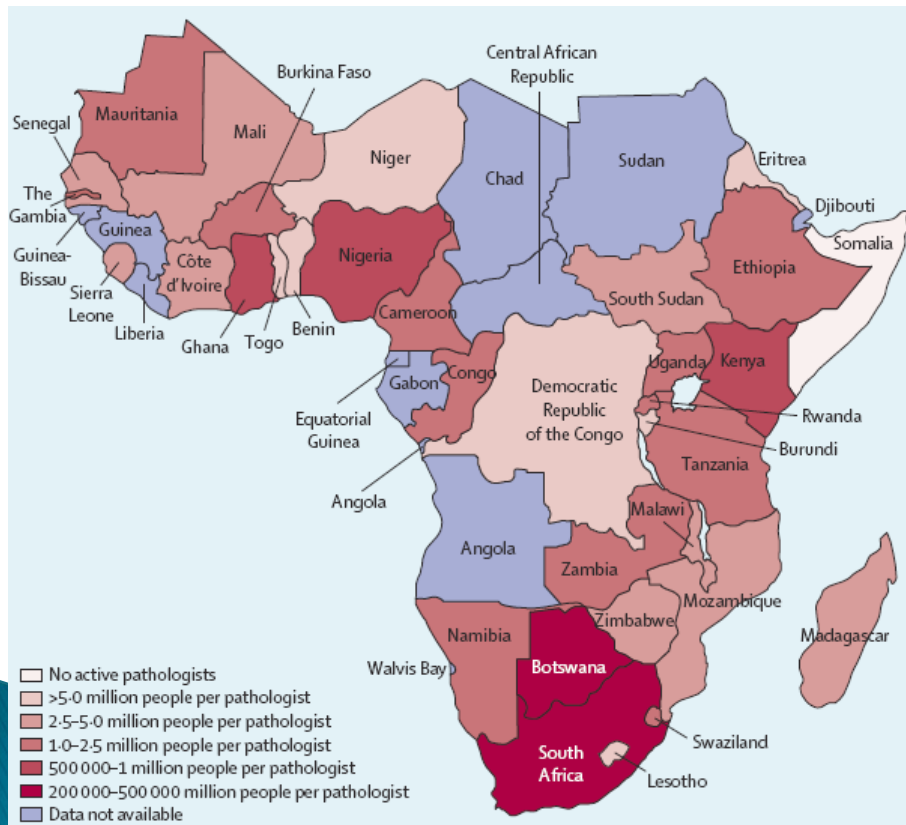
- ▶ Today we have 3 Pathologists,
 - ▶ TAT for histopathology 2 weeks
 - ▶ TAT for Cytopayhology 2 Days
 - ▶ Path–Hematology–on training and will be back july 2017.
 - ▶ We have 12 Technicians
 - ▶ Reagents–Supply from Italy.
 - ▶ IHC???
- 

Laboratory Technicians



Improvement of pathology in sub-Saharan Africa

Pathology

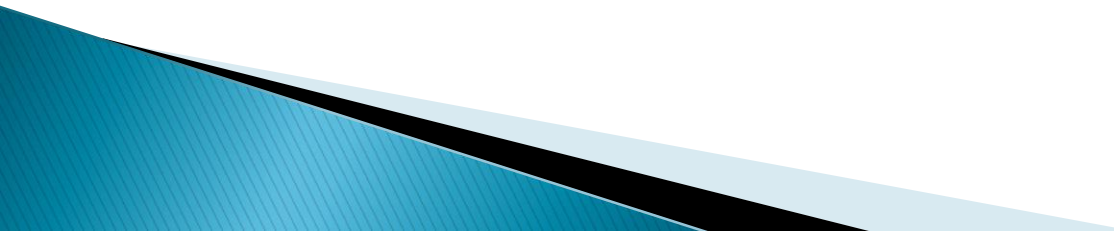


- ▶ This is fundamental prior to the establishment of the Oncology services.
- ▶ In Africa we lack human resources and Reagents and Materials for Pathology.
- ▶ In Tanzania we have less than 10 pathologists per the population estimated at 50Millions.
- ▶ Bugando Medical Centre we are Luck ----3 Pathologists.

Oncology Services

- ▶ 2000 Idea was there that after pathology department ,

Under the Collaboration

- ▶ In 2004 ,I arrived in Italy ,During winter.
 - ▶ In 2005 I joined the school of Oncology.
 - ▶ Collaborators paid for this
- 

Me

- ▶ In 2008,
- ▶ 3 Months after the handing over of the Laboratory.



To Task The Commitment of the Government



Bugando Oncology Services–2009

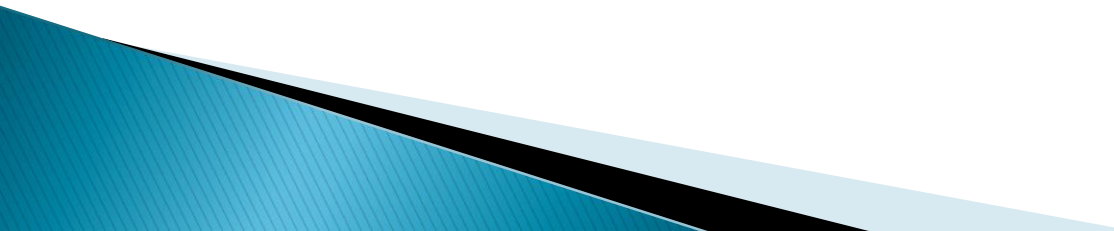


Growth of the oncology services

- ▶ In 2009 we saw 320 new cases.
- ▶ In 2010 we saw 3x the cases above.
- ▶ It was imperative that we could not handle that,
- ▶ Of these cases 60% were late and needed only palliative care—then not present.
- ▶ We discussed this
Collaboratively.....Palliative, Screening,
Visiting Italians oncologist, Training others.

Growth of the oncology services

In 2010 April,

- ▶ We met the Ministerial officials,
 - ▶ The power of Data–Played its Role.
 - ▶ Palliative careUse of Morphine June 2010.
 - ▶ Government commitment ...Build oncology Wing at Bugando.
 - ▶ Collaborators agreed to Train Others.
 - ▶ Rotation of Italian Drs started.
- 

Rotating Italian Oncologists, Pathologists, Technicians, Data managers and Nurses.



Construction of the Oncology Wing



In 2012

- ▶ Lucas was in Italy.–IOR
- ▶ Valerie and Heronima were in Italy–Perrugia.–IOR
- ▶ Edgar was in India for studying Gynae –Oncology–Duke
- ▶ Godfrey was in Padova for Surgical Oncology–IOV
- ▶ Beda was in india for Radiation oncology.–GOT
- ▶ Patrick and Bernard were in South Africa for Nuclear Medicine training.–GOT



Screening



BMC CECAP ACTIVITIES 2015-2016

Chato - Geita

Trained staff - 16

Screened ind - 1362

VIA + 4.19%, Cacx susp 0.37

Screened ind - 65

VIA + 1.5%, Cacx 1

Katoro - Geita

Screened ind - 2784

VIA + 2.16, Cacx su

Sumve - Kwimba

Trained staff 16

Screened ind - 425

VIA + 1.18%, Cacx sus

Tinde - Shinyanga

Trained staff 15

Screened ind 910

VIA + 1.65%, Cacx susp 0

Ukerewe - Mwanza

Trained staff - 16

Screened ind - 1007

VIA + 3.6%, Cacx su

Nyamongo - Mara

Screened ind - 12

VIA + 3.07%, Cac

Sengerema - Mwan

Trained staff - 16

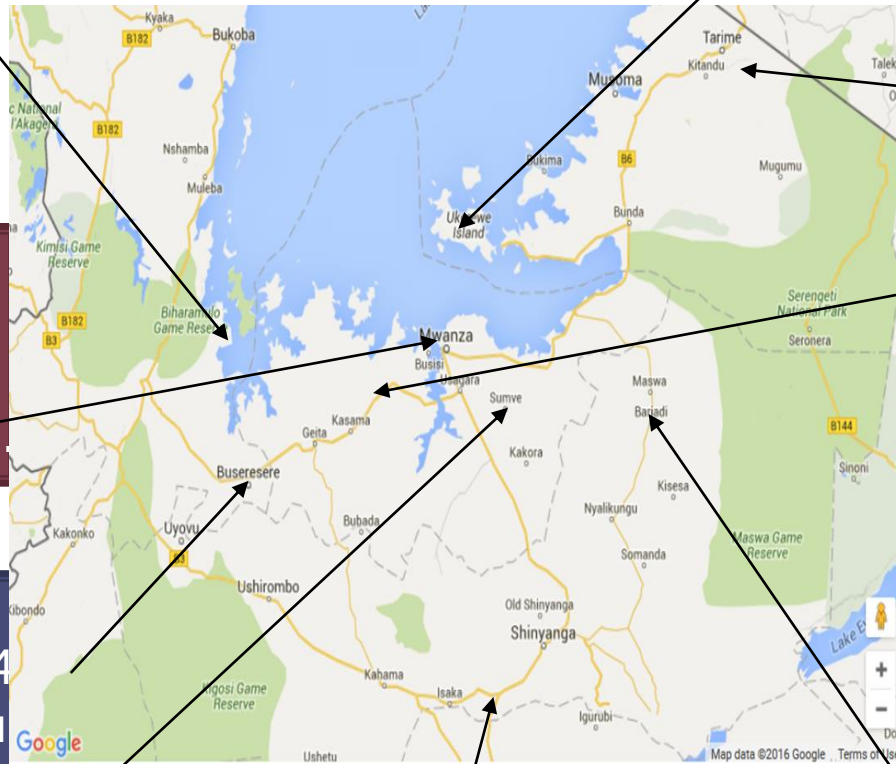
Screened ind - 574

VIA + 3.8%, Cacx s

Bariadi - Simiyu

Screened ind 1128

VIA + 4.88%, Cacx su



Drug Assistance

Pay for Life?



Treatment of cancer in sub-Saharan Africa

- Diagnosis –Difficulties
- Staging –Difficulties
- Absence of MDT
- Absence of Treatment options for all pathologies.
- Personalized treatment actually unimaginable.
- Bucket Treatment is the Rule.

Panel: Availability of anticancer drugs in sub-Saharan Africa, subject to ability of patients to pay

Often available

- Doxorubicin, cisplatin, fluorouracil, capecitabine, folinic acid, steroids, dactinomycin, vincristine, methotrexate, etoposide, hydroxyurea, melphalan, cytarabine, mercaptopurine, L-asparaginase, daunorubicin, and tioguanine

Available on request*

- Irinotecan, oxaliplatin, carboplatin, vinorelbine, gemcitabine, fludarabine, interferon alfa, epirubicin, topotecan, taxanes, dacarbazine, ifosfamide, bleomycin, pamidronic acid, zoledronic acid, metoclopramide†, dexamethasone†, ondansetron†, and lorazepam†

Rarely available

- Trastuzumab, bevacizumab, rituximab, erlotinib, sunitinib, imatinib, temozolomide, ibandronic acid, domperidone†, granisetron†, erythropoietin†, and granulocyte colony-stimulating factor†

*Available on request means that if a doctor orders a drug specifically and the patient is able to pay, it can often be procured. †Supportive drugs.

Improving access to analgesic drugs for patients with cancer in sub-Saharan Africa

Accesso all'uso di Morfina

Panel 1: Barriers to access to opioids in sub-Saharan Africa

Political

- Little political will within health ministries
- Outdated policies and legislation
- Dysfunctional national and international bureaucracies

Clinical

- Little knowledge of pain assessment and management
- Fear of opioids
- Poor training
- Little interest in palliative care
- No reimbursement for palliative care services by insurance schemes

Facilities

- Absence of secure storage capability
- Inadequate connection to drug distribution system
- Absence of skilled professionals



Inauguration of the Oncology Wing



Major Instrumentation-2015



Machines installation



Machine Installation



Machine Installation



Cancer Registry



GESTIONALE LOG80 – Oncology program

Management software for Oncology department (Oncology and antitubercular drugs laboratory)

0. Introduction

This document contains all the specifics about the digitalization of the clinical process of the pharmacological treatment, starting from the creation of treatment schemes to the administration of the treatment. The access of the operators (Doctor, Nurse, Pharmacist) to the programs takes place by inserting login and password. The informations that are in the program, clinical documents of the patient depends on the rights for the user who is logging in, these are defined during configuration. The operations on single events of treatment and on their grouping ("clinical chart") will be possible only after the authentication of the operator and the allowed changes will be tracked and therefore easily associated to the operator who has done them.

To access Log80 program first of all you have to login using a password. Once you logged in you get to a panel with one or more buttons, clicking on one of them you get to the desired program.

0.1 Search patient

1. Insert the surname in the short search field and click on the **Search** button, through the **View** link you enter into the personal data detail





PROGETTO SHARE&MEET



**PIATTAFORMA DI TELEMEDICINA, E-LEARNING E
TELEPATOLOGIA**

Meeting 2012

General information

Location

Gold Crest Hotel
PPF Plaza, Chenyatta Road Mwanza (Tanzania)
Phone: +255 250 6058
E mail: info@goldcresthotel.com
www.goldcresthotel.com

How to register

Registration is free and include: participation to the scientific session, attendante certificate, welcome cocktail, lunches, coffee breaks

To register: e mail the Organizing Committee:

p.serra@ist.emr.it

Providing the following information:

Name, Last Name, Country, Profession

Attendance certificate

A certificate will be given to all participants at the end of the Conference

Language

The Conference will be in English

With an unrestricted grant of:

Novartis Oncology
Istituto Oncologico Romagnolo



Presidents: D. Amadori, N. Masalu, C. Majinge

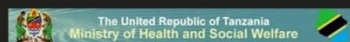
Scientific Committee: D. Amadori, A. Amadori, J. Chantalucha, L. Chieco Bianchi, L. Crinò, V. Franciosi, N. Masalu, F. Puglisi

Organizing Committee: V. Cicognani, H. J. Kashaigili, L. F. Kiyesi, O. Nanni, V. K. Ntunya, P. Serra

Under the Auspices of:



Associazione Italiana di Oncologia Medica




International Conference

“Infections & Cancer”



Sept. 17th - 18th - 19th 2012
Gold Crest Hotel
Mwanza - Tanzania

CANCER CONTROL PROJECT AND INTERVENTION MODEL IN THE MWANZA REGION– JUNE 2015



2016 Greater
Horn Oncology
Symposium



Join GHOS Today
June 4 - 9, 2016
Mwanza, Tanzania

The Mwanza Cancer Project



PRESIDENTS

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Ivana Barlati (Meldola, Italy)

Marina Bragani (Meldola, Italy)

Nestori Masalu (Mwanza, Tanzania)

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Istituto di Ricovero e Cura a Carattere Scientifico

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THEORETICAL AND PRACTICAL COURSE IN ONCOLOGY

for Nurses, Medical Doctors and
Pharmaceutical Technicians

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PER LO STUDIO
E LA CURA
DEI TUMORI

June 9th—11th 2014

Bugando Medical Center
Mwanza (Tanzania)





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istituto
oncologico
romagnolo
vicino a chi soffre,
insieme a chi cura



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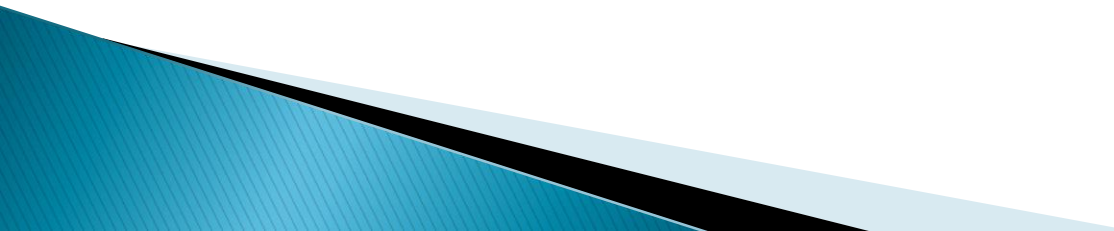
October 3-5, 2016



Under the auspices of

THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF HEALTH AND SOCIAL WELFARE

Research

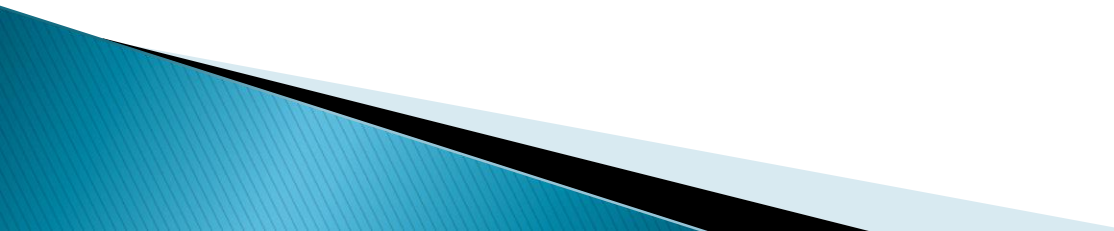
- ▶ Breast Cancer
 - ▶ Hepatic Cancer Different Pathways
 - ▶ Vitamin D –Role in Carcinogenesis
 - ▶ Toxicity study
 - ▶ Pharmacodynamic study
- 

Are there Other fruits of the IRST and Bugando?

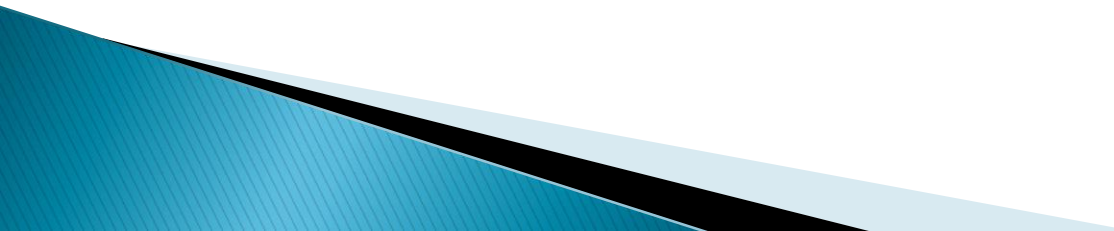
Yes....Yes.....Yes

- ▶ Duke University
- ▶ Radiation Hope
- ▶ Pink Ribbon Red Ribbon

Duke University

- ▶ Mentorship Program.
 - ▶ Co-Sponsor School of Heronima-Paed-Oncology.
 - ▶ Permanent Paed-Oncology-Dr Kristin
 - ▶ Pediatric Treatment protocols Development.
 - ▶ Research.
 - ▶ Instrumentation.
 - ▶ Together here today
- 

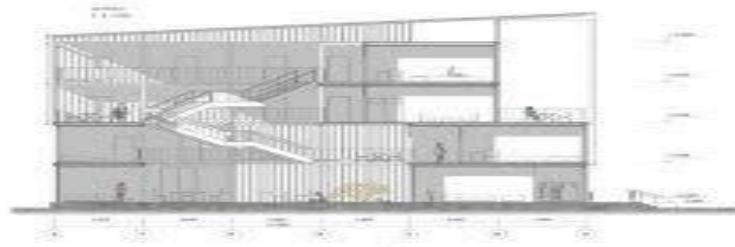
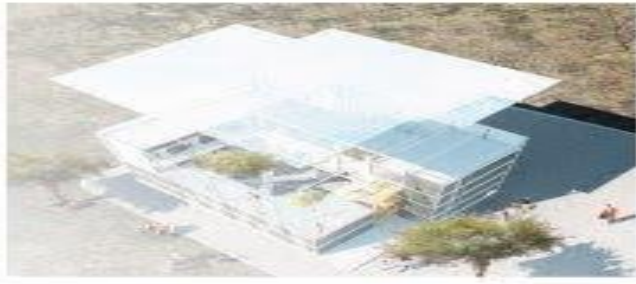
Radiation Hope

- ▶ 2nd linear Accelerator.
 - ▶ Brachytherapy Machine.
 - ▶ 3rd International meeting in Mwanza June 2016.
 - ▶ Together here today
- 

Pink Ribbon Red Ribbon

- ▶ Hostel for Patients with Cancer in Mwanza.

Cancer Hostel in Mwanza



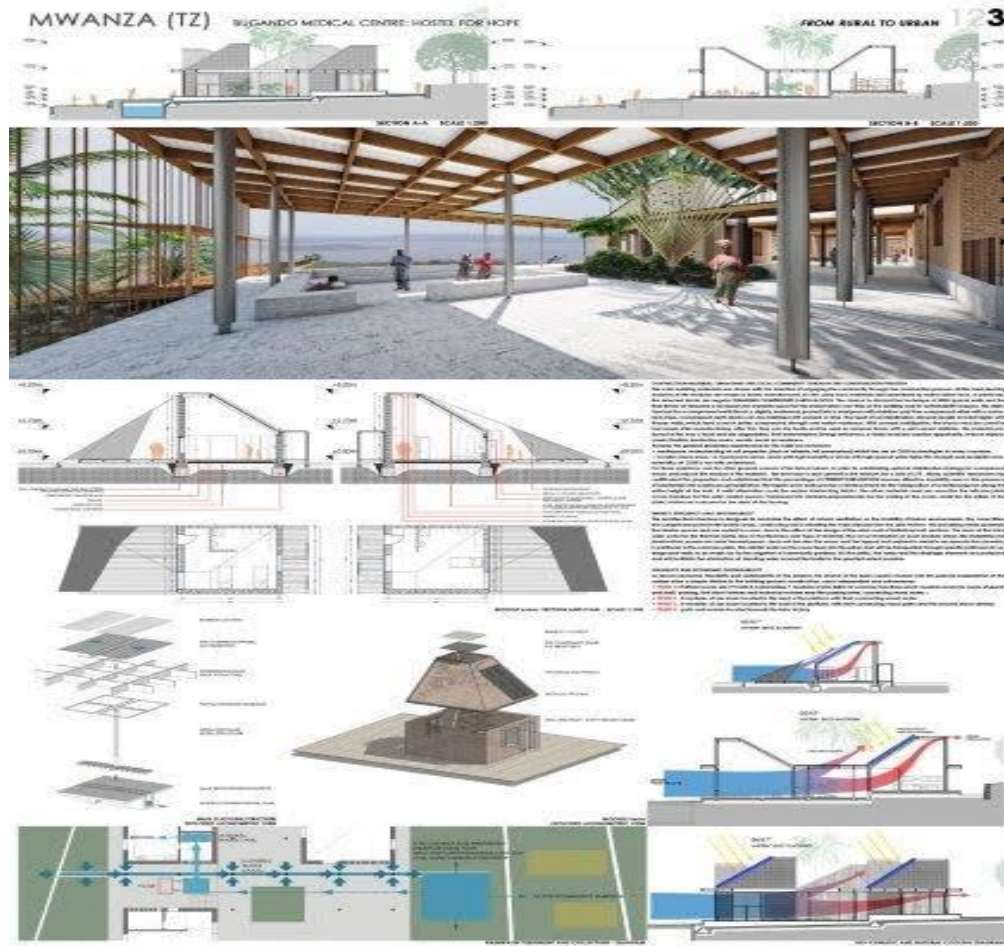
This building is a proposed design for a cancer hostel in Mwanza. It is a modern building with a large white roof and a blue-tinted glass facade. The building is situated near a body of water and has a paved area in front of it.



This building is a proposed design for a cancer hostel in Mwanza. It is a modern building with a large white roof and a blue-tinted glass facade. The building is situated near a body of water and has a paved area in front of it.



Cancer Hostel in Mwanza



A photograph of a large, rugged rock formation in the ocean. A tall, thin, pointed rock is balanced precariously on top of a larger, more rounded rock. The scene is set against a clear blue sky with a few small birds visible. The water is calm, reflecting the rocks and the sky. The text "Thank you for your Attention and Support" is overlaid in a large, dark, serif font across the center of the image.

Thank you for your
Attention and Support