

REPUBLIC OF KENYA
NATIONAL ASSEMBLY

## POLICY BRIEF ON THE SITUATIONAL ANALYSIS OF CANCER IN KENYA

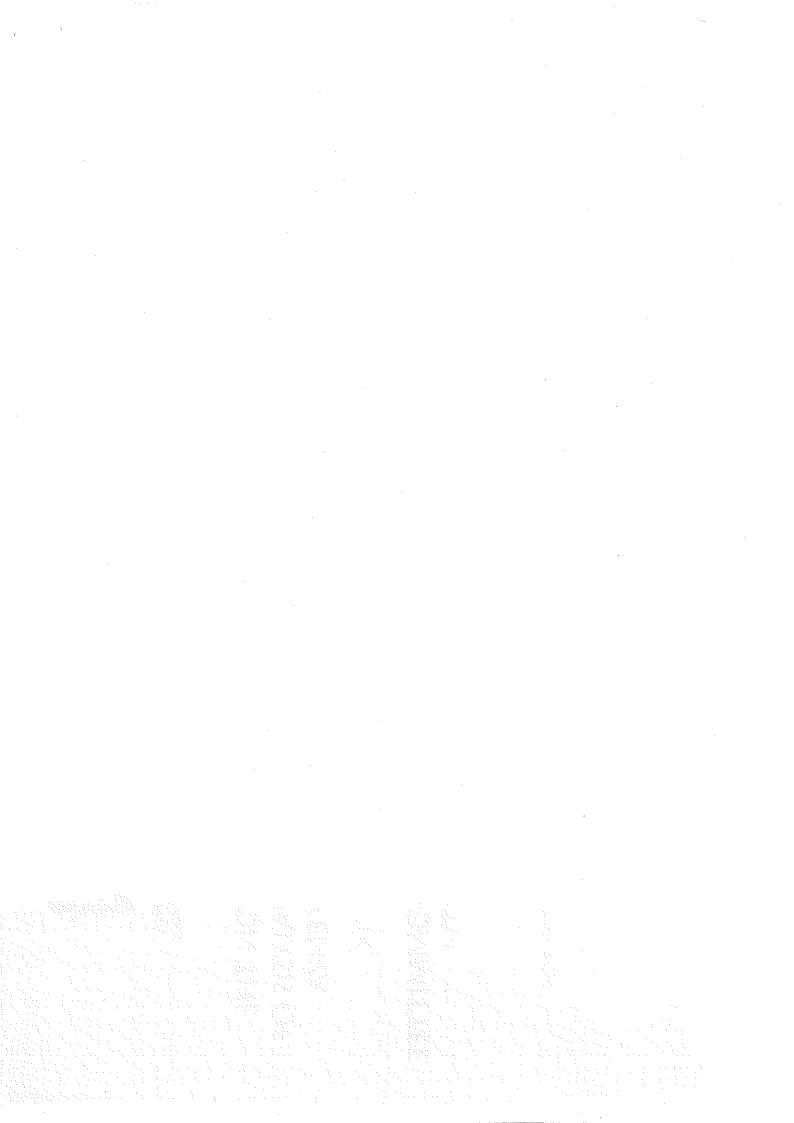
PREPARED FOR THE

# DEPARTMENTAL COMMITTEE ON HEALTH

BY THE

DEPARTMENT OF RESEARCH

March, 2011



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#### Table of Contents

1. Preface
<ol> <li>Preface</li> <li>Disclaimer</li> <li>Situational Analysis of Cancer in Kenya</li> <li>Government Interventions in fighting Cancer in Kenya</li> <li>Conclusion</li> </ol>
reface
reface
reface
reface

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#### DISCLAIMER

This policy brief on cancer is amongst a number of technical briefing papers that the Department of Research pro actively engages in on a regular basis focusing on select issues and matters of public/parliamentary interest. The Cancer situation in Kenya brief is a collection of compilations of articles and speeches from various speakers, associations and authors, some of whom are experts in the medical field meant to elicit discussion and debate on the ever rising cases on cancer in Kenya in order to trigger the necessary policy and administrative actions to address the silent killer-cancer. The issues, views and opinions covered here are not necessarily the view and position of the Parliamentary Service Commission.

Thanks go to the Clerk of the National Assembly, Mr. Patrick Gichohi and Director of Information and Research Services, Mr. Clement Nyandiere for the encouragement and inspiration.

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The format, conclusions and options given here as well as any errors belongs to the compilers/authors.

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## SITUATIONAL ANALYSIS OF CANCER IN KENYA

#### Overview

Every 4<sup>th</sup> February, the World marks the World cancer day. Cancer is the generic term for a large group of diseases in which cells grow out of control and can spread to other parts of the body. Cancer involves a series of mutations or changes in the genetic makeup of a cell, causing it to look and function differently from normal cells. Thus, Cancer is actually a disease of the cell.

Normal body cells can reproduce themselves exactly, stop reproducing at the right time, stick together in the right place, self-destruct if they are damaged, and become specialized or 'mature'.

Cancer cells are different. They carry on reproducing. They don't obey signals from other neighboring cells. They don't stick together. They don't become specialized, but stay immature. They don't die if they move to another part of the body. Cancer is thus a multifaceted disease known to be caused by both Internal and external risk factors including Tobacco, alcohol, numerous chemical substances, radiation, and some infectious organisms.

According to the Kenya Medical Research Institute (KEMRI) Cancer Incidence Report (2006), internal factors which may predispose one to cancer include inherited genetic mutations, hormone imbalances, Immune disorder conditions and some metabolic disorders. These Causative Factors may act together and/or in sequence to trigger or promote the development of cancer after varying periods of time for different types of Cancers.

Statistics in Kenya has shown that about 50 Kenyans die daily from various forms of cancers. According Pact Kenya Cancer Assessment in Africa and Asia (2010), About 80,000 cases of Cancer are diagnosed each year. According to International Atomic Energy Agency (2010), the Cancer situation in Kenya is dire with a severe lack of Medical Practitioners and a large number of new Cancer cases being diagnosed annually.

The major policy concern however is that the CoK (Ministry of Public Health and Sanitation) has never had any designated programme or budget line for addressing cancer among other non communicable diseases that are silent killers.

A study by KEMRI (2010), found that of the 2,292 Cancer-related deaths recorded in Nairobi during a two-year period, Oral tumours claimed the biggest percentage of victims. This report also indicates that people who develop a Liver condition called Cirrhosis, in many cases caused by too much alcohol and Hepatitis B and C viruses can develop liver cancer.

The study also states that women who take more than three alcoholic drinks a day increase their risk of Breast Cancer. In addition in the Kenya Medical Research Institute Study (2008), further found out that Cancer Treatment is improving in the developed world. Metastatic Testicular Cancer—virtually lethal a few decades ago—can now be cured.

Unfortunately in Kenya, these advances are yet to be realized. This is due to deficiency of Resources, Infrastructure, and Trained personnel; the entire Lack or prohibitive Cost of Chemotherapy Drugs; and the advanced stage of the majority of Cancers at the time of Presentation. There are more Cancer cases being reported in Kenya now than 10 years ago, but Studies to

and incidence are not being conducted. Sadly, most of the reported Cancers are diagnosed at late stages, when very little can be achieved with Therapeutic intervention. Increasingly, younger Kenyans seem to be more affected by Cancer, unlike in the past, when it was considered a disease of the old. Pesticides have been suspected to cause certain forms of childhood Cancer.

Available cancer data is wanting, as there is currently no National Cancer Registry. The only available data are from Nairobi and its Environs through the Nairobi Cancer Registry (NCR), and even this scant information only dates back to 2000. The Registry was established at the Kenya Medical Research Institute (KEMRI) with the sponsorship of the International Agency for Research on Cancer, the National Cancer Institute of the United States, and the World Health Organization, among other Stakeholders. Data is collected from the City's main Hospitals (public and private), Laboratories, and Hospices. The figures are taken to be representative of the Country, considering that the majority of Cancer management Services are available at Kenyatta Nairobi.

The Kenya Cancer Association (KenCASA) claims that the government has continually neglected allocating sufficient funds for treatment of cancer patients. It's directing all its efforts on combating HIV/AIDS and that one-third of Cancer deaths could be avoided through Prevention and another third through early Detection and Treatment.

An article published in Global Medicine (2011), States that the incidence of Cancer in Kenya is on the rise, with over

determine the reason for the increased prevalence and

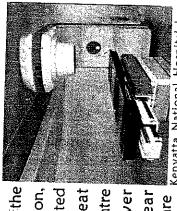
82,000 new cases reported annually. Kenyatta National Hospital, the only Public institution that hosts most of the Cancer Experts and Technology in Kenya, is currently overwhelmed with Inpatient and Outpatient Cases and simply cannot cope. Cancer ranks third among the main causes of death in Kenya after infections and Cardiovascular or Heart related diseases. Cancer accounts for up to 18,000 deaths annually in Kenya; up to 60 per cent of those who die are in the most productive years of their life. Among men, Prostate Cancer has assumed unbearable proportions.

The factors that are back tracking the fight against cancer in Kenya are;

#### Inadequate Facilities

Kenya is faced by inadequate and outdated equipments to mitigate cancer. The Cobalt 60

machines used by KNH are the remnants of an old generation, and are equipped with limited capability to optimally treat complex cases. The only Centre in the country with newer technology, called Linear Acceleration, is the Cancer Care Ke in Nairobi. While this Unit at prothe MP Shah Hospital technol.



Kenyatta National Hospital has procured a Cobalt 60 Teletherapy Machine for the treatment of cancer from Canada.

ogy is more accurate and handles a higher load than Cobalt 60, it is much more expensive and has very high maintenance demands this is according to the Kenya Medical Research

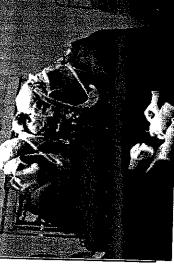
Institute (2011). The Kenya Cancer Association argues that there is no equipment like Mammograms, while very few members of the public know of Pap smear and that treatment is unavailable.

In addition, according to Kenyatta National Hospital Cancer Treatment Centre, Four to Six Radiotherapy Machines are needed to cater for Cancer cases. Kenyatta National Hospital has only one Paedriatic oncology unit (with only 28 beds) that caters for only 25% of paedriatic Cancer Cases-the rest are accommodated in other wards. The worst thing is that Cancer Drugs are not always available at many Public hospitals.

## 2 Few Specialists' Cancer Surgeons in Kenya

According to International Atomic Energy Agency, Kenya lacks enough trained personnel to handle Cancer cases. According to the Kenya Cancer Association, there are only

three (3) oncologists;



I for every 12 million people. There are only four Radiation Oncologists and the Artisans are rare. According to the Minister for Medical Services Anyang'

Doctors attend to a cancer patient Nairobi hospital. Services Anyang' Nyong'o, more Pathologists and Oncologists are needed in District, Sub-district and Provincial Hospitals

to facilitate early detection and prompt Treatment of Cancer. In addition, Government, public and private Teaching Hospitals should commit themselves to widening the scope of learning about Cancer in basic Medical and Nursing Training programmes.

There are only five Oncologists in the Public sector working at the KNH. Supporting personnel are lacking. In addition according to Kenyatta National Hospital Cancer Treatment Centre, 15 to 20 Clinical Oncologists are needed in the Cancer Unit.

### 3 High Cost of Treating Cancer

Most people Infected with Cancer are not in a position to meet Medical Expenses of Cancer. According to Report by Global Medicine (2011), Cancer treatment is protracted and expensive, especially due to the intensive procedures requiredfor the advanced Cancer cases. According to the Cancer Treatment Centre, Kenya National Hospital Patients pay \$h300 per session, translating to KSh1, 500 a Week. The entire six-week session costs Ksh 9,000. By contrast the Private Hospital charges \$h80,000 per Week. For solid tumours, the tests may include but not limited to CT Scans or magnetic Resonance imaging (MRI) and biopsy which costs between ksh10,000 to 30,000/-

Although KNH and the Private Hospital have an agreement to have Poor Patients access the radiation services at



A Cancer patient

subsidised cost, the k\$h35, 0000 a-week bill is still too high. Other costs incurred in Cancer Treatment include \$h6, 000- \$h10, 000 spent in preliminary investigation and Drugs that cost up to \$h30, 000 per Course. At least six Courses are required in the Eight weeks.

### Lack of Accessibility to Treatment

According to Kenya Cancer Association (KenCASA) the Devolution of Cancer Treating facilities at Country level is wanting. Many Patients do not have access to these facilities. Inequity denies most of the Population their right.

#### 5 Sedentary Lifestyle

This is lifestyle characterized by unhealthy eating habits, unbalanced food diet and lack of regular physical exercises. According to World Health Organization Report (2011), physical exercise can prevent up to 25% of breast and Colon Cancers. It can also reduce the risk for other types of Cancers and keeps one Healthy and Vibrant. According to the World Health Organization, presence of harmful Chemicals such as Pesticides and Asbestos in the working and general Environments are also causing Cancer.

## Lack of Cancer Awareness in Kenya

According to medical experts at the Nairobi Women's Hospital, too many of the Cancer cases are not detected early. This is due to Poor awareness or lack of it which is what should be dealt with. For example cervical cancer which affects quite a large number of women is treatable if detected early enough.

#### ? Social inequity

According to Kenya Cancer Association (KenCASA), Kenya's high level of socio-economic inequalities where majority of the poor are poor and deprived of their basic needs, a vast majority of the Population do not have access to basic decent reging condition as human beings, nor do they know their rights. This is in spite of the fact that the new Constitution of Kenya has an enshrined Bill of Rights which guarantees citizens' right of access to quality healthcare.

### 8 Unreliable Cancer Registry

Kenya lacks a comprehensive national cancer registry. According to Kenya Medical Research Institute Report (2008), the available Cancer data are wanting, as there is currently no National Cancer Registry. The only available data are from Nairobi and its environs through the Nairobi Cancer Registry (NCR), and even this scant information onlydates back to 2000. The Registry was established at the Kenya Medical Research Institute (KEMRI) with the sponsorship of

the International Agency for Research on Cancer, the National Cancer Institute of the United States, and the World Health Organization, among other stakeholders.

# GOVERNMENT INTERVENTIONS IN FIGHTING CANCER IN KENYA

### . Acquisition of Modern facilities

Kenya National Hospital (KNH) has already received the main component of the Cobalt Machine "the radioactive source". The source emits high energy gamma rays which are used in the treatment of various types of Cancers. Other components of the main Cobalt Unit are on their way. It is anticipated that the machine will be ready for use from March 2011. The machine has been procured with funding from costsharing fees paid by patients. This is an effort by KNH to mitigate the challenges experienced by patients waiting for Cancer Treatment.

Furthermore, KNH has already undertaken installations of a simulator and a gamma camera at the Cancer Treatment Centre in partnership with the International Atomic Energy Agency (I.A.E.A.). This is according to Medical Kenya Report, 2011.

## . Improving Accessibility to Cancer Treatment

Kenyatta National Hospital has come up with a Comprehensive Project Proposal on Expansion and Establishment of Cancer Services in Kenya and is spearheading establishment of these Cancer Centers in the Country. According to Medical Services Minister Anyang' Nyong'o plans are underway to Decentralize Health care in line with the Constitution and Devolved Government.

### Promotion of Cancer Education and awareness in Schools.

According to Kenya Cancer Association (KenCASA), the Ministry of Health is in discussion with the Ministry of Education to start a Cancer Education Program in Primary and Secondary schools to create awareness at the grassroots to help reduce Cancer cases.

### 4. Establishment of Cancer Desk

As Revealed in the Kenyatta National Hospital Cancer Unit Report (2011), Cancer Desk has been established at the Ministry of Health.

### 5. Partnership with private sector

The government is pursuing Partnership between the Public and Private Sectors to meet some Cost and make Cancer Management more affordable. Kenya National Hospital has partnered with Private Pharmaceutical Companies that enable the Hospitals to offer affordable Cancer Treatment to Poor Kenyans-Kenyatta National Hospital Cancer Unit Report (2011).

### Need to enact a Cancer Legal framework-Passing of proposed Cancer Bill

According to Ministry of Health Report "Cancer Burden in the Country"2010, The Government has put in place a National Task Force for Cancer, while at the same time work on a National Cancer Policy and Strategic Plan is at advanced stage. A Cancer Bill is due to be tabled in parliament after cabinet approval. In addition a comprehensive Tobacco control act and National alcohol control act are now

operational. This is will enable fight against Cancer as Excessive smoking and Alcoholism causes Cancer.

#### CONCLUSION

In Kenya, Cancer ranks third as one of the most common disease causing death in the country. The common types of Cancer are Breast and Cervix Cancer for Women. On the other hand men are affected by the following types of Cancer:Oesophagus, Neck and Prostate cancers. In children the commonest Cancers are Blood cancer (Leukemia) and Lymphomas.

The government through parliament must fast track legal and budgetary policy measures to address the rising incidences of cancer and ensure there are proper strategies for prevention and treatment of cancer. Among others, at least one hospital in each county if not constituency should be equipped with facilities and specialists to handle cancer cases.

#### POLICY OPTIONS

Promote Cancer Awareness and declare cancer a national disaster.

The government should facilitate wider public knowledge and awareness on Cancer through Civic Education. In addition start Cancer Education Program in Primary and Secondary Schools to create awareness at the Grassroots to help reduce Cancer Cases. Indeed the government ought to treat cancer with the same weight it gives malaria and HIV

control, as over 70 percent of cancer cases are preventable through healthy lifestyle.

## Establishment of Cancer Registry and Surveillance

The development of a cancer registry is a priority in determining the cancer burden. The Government should establish a Cancer Register in all medical facilities. This will enable to document the frequency, Type, and Geographical Location of different types of Cancer Nationwide.

# The Government should Strengthen Research interventions on Cancer.

The government should facilitate the establishment of a Government Medical Centre (incorporating a cancer Institute) in Nairobi which could be an autonomous centre of excellence for research, diagnosis and treatment of some key medical conditions in Kenya that require highly specialised personnel and equipment. It could also consider entering into joint funding of Research on Cancer with the Private Sector research institutes by strengthening of private-public partnership in development of Cancer Programmes. This will also improve on Prevention Strategy.

Provision of diagnostic equipment such as CT scans, MRI, ultrasound, radio-isotopes scans as well as setting up cancer diagnostic laboratories in at least one hospital in each of county or constituency based hospitals in Kenya.

Ensure Equity in access to Cancer Treatment by insurance and credit institutions.

Insurance and Credit Company directors have the years compelled clients to declare their cancer status before

accessing services. The Government should address the discrimination of Cancer Patients. Any discrimination to Cancer Patients should be heavily penalized.

# The Government should institute a budget line or programme for Cancer

There is urgent need for the Ministry to seek adequate budget line for cancer prevention, control and treatment, to facilitate subsidized cancer treatment for patients. This will allow many Kenyans to access affordable treatment for Cancer patients. Indeed more budgetary allocation is necessary for early detection and treatment of Cancer.

## The Government should invest in manpower training

Kenya needs to train more specialized Manpower to meet demands of rising incidences of cancer in rural areas and other urban areas. The Kenyatta National Hospital Cancer Unit Report (2011) states that there are only Five (5) Clinical Oncologists, Four (4) Medical Oncologists and about Eight (8) Haematology Oncologists, in Kenya, 95% of who practice in Nairobi. Training one clinical oncologist is estimated to cost at least Ksh 8 million.

### Address environmental pollution

Experts have blamed the sudden rise of cancer to proliferation of pollutants, carcinogen, and lack of information, consumption of roasted meat and consumption of tobacco products. As such, Institutions such as National Environmental Management Authority (NEMA) and parliament need to put stringent measures on firms that produce substance that pollute the air, in line with provisions of the new constitution.

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