

2013 Operations Report

December 2013

We have made great progress within our operational projects in 2013, with 7 twinning partnerships currently running in 13 developing countries. This report is a summary of the achievements this year.

2655	820	5500
Children helped annually at our projects	Healthcare professionals received training in 2013	Children helped so far since WCC was founded in 2007

Current Projects



Bangladesh

Location: Bangabandhu Sheikh Mujib Medical University (BSMMU), Dhaka

Project Leader: Professor Afiquel Islam

Twinning Partner Hospitals: UCLH & BCCH Vancouver

Project Dates: June 2012 – May 2017

- Annual twinning workshops were held with over 250 healthcare professionals attending
- Drug subsidies are provided for families who cannot afford treatment – drugs have been subsidised over 2000 times since the start of the project
- A program to enhance infection control has begun
- Several rallies have been held at the hospital, involving staff and parents, in an attempt to raise the awareness of childhood cancer in Bangladesh



Malawi

Location: Queen Elizabeth Central Hospital (QECH), Blantyre

Project Leader: Professor Elizabeth Molyneux

Twinning Partner Hospitals: VRI Newcastle & VUMC Amsterdam

Project Dates: January 2009 – December 2013

- Survival rates for easily treatable cancer have been significantly increased
- Decrease in abandonment/refusal of treatment, good palliative care service now in place
- Provision of drugs, supportive care and active follow-up of patients
- Dr George Chagaluka started specialist training in South Africa
- New Phase 2 project applied for 2 year initial funding phase to concentrate on leukemia protocol, increase in nursing capacity, development of outpatient facility and improved shared care/referral within Malawi
- Malawi has been our first project and has demonstrated the importance, and challenges in creating sustainability. This is unlikely to be solved through support groups but through succession planning and building capacity of healthcare professionals in the country



Colombia

Location: Instituto Nacional de Cancerlogia, Bogota

Project Leaders: Dr Martha Pina and Dr John Lopera

Twinning Partner Hospital: Dana Farber / Children's Hospital Boston, USA

Project Dates: May 2009 – April 2014

- Since the start of the project the INC has seen a significant decrease in abandonment rates due to the amazing work of the social workers. Follow-up has also improved
- Toxic death rates have also been reduced through a multi-disciplinary team effort
- The major challenge remains the Colombian healthcare system and its failure in delivering healthcare without delays to the poor population
- Major efforts are planned to lobby the government, and to the hospital to help them understand the value of investments made in the pediatric oncology service



Ghana

Location: Korle Bu Teaching Hospital (KBTH), Accra

Project Leader: Dr Lorna Renner

Twinning Partner Hospital: Royal Hospital for Sick Children, Edinburgh

Project Dates: November 2010 – October 2015

- Bi-annual training workshops are being held at the project center in Accra and now also at the first satellite centre in Kumasi, with more than 40 professionals attending each time
- Country-wide awareness, including talks on TV, radio, newspaper articles, rallies and celebrity advocates. These are led by Lorna and the active parent support group
- Collaboration with the pathology lab for improved diagnostic techniques
- Local fundraising continues to go well with support from companies, individuals, churches
- Plans for improving the shared care and referral network within Ghana, satellite centre establishment in 4 locations and local fundraising training planned for 2014



Philippines

Location: South Philippines Medical Centre (SPMC), Davao City, Mindanao

Project Leader: Dr Mae Dolendo

Twinning Partner Hospitals: St Jude, USA & University Hospital Singapore

Project Dates: November 2009 – October 2014

- All 5 satellite centers originally planned now up and running, with training and capacity building taking place in each hospital in the network
- Continuing awareness campaigns for Retinoblastoma with several press conferences held
- Local support sought through funding partners and sponsors especially Ford Philippines
- Ongoing successful training and mentoring for staff with regular updates
- Needs assessment carried out by WCC and St Jude and plans to apply for a Phase 2 project will be discussed in early 2014



Cameroon

Location: Mutengene Baptist Hospital, Bansa Baptist Hospital, Mbingo Baptist Hospital

Project Leader: Dr Francine Kouya / Professor Peter Hesselring

Twinning Partner Hospital: Stellenbosch University / Tygerberg Children's Hospital

Project Dates: January 2012 – December 2016

- Survival rates improved for easily treatable cancers and protocols introduced for the treatment of other malignancies
- Long-term training secured for project lead in South Africa
- 3 Parent support groups established and local fundraising initiatives in development
- Training through twinning partners on a bi-annual basis and ongoing mentoring
- Consistent drug supply through regular checks and measurement of throughput
- Challenge for this project in the future will be succession and sustainability



AHOPCA

With around 1000 new cases annually, this 7-country network in Central America has received funding in 2013. The support is to achieve improved data management systems, staff and processes. In turn this will improve the efficiency and understanding of paediatric oncology services and the evaluation of psycho-social support interventions for those undergoing treatment in participating centers.

Potential/New Projects for 2014

As well as making great progress in our current projects, there are several potential opportunities for new World Child Cancer projects. We aim to expand our work in the current countries we work in, and explore the potential of working in further low/middle income countries.



Zambia

This project will receive seed-funding in 2014 to initiate an database so that the project can start accurately recording the number of patients, abandonment rate, toxic deaths/deaths from infection and survival rate. The project is estimated to diagnose around 200 new cases every year.

Myanmar

A needs assessment was carried out in 2013, with a positive view on the impact that WCC funding could help the center in Yangon achieve. A formal project application form is now in development focusing on decreasing abandonment, increasing access/capacity, training for staff and an improvement in pathology services. The hospital diagnoses 185 new patients every year.

SIOP Africa Wilms' Tumour Initiative

This collaborative project aims to extend the use of a standardized treatment protocol to children with WT in 7 African countries, including Malawi, Ghana and Cameroon where WCC projects already exist. Pathology review meetings and ultrasound training will benefit children with other diagnoses too, and collaboration between countries is expected to raise standards in many aspects of cancer care.

