



World Child Cancer
No child should suffer

PROJECT FACTSHEET: Malawi

Project Centre: Queen Elizabeth Central Hospital (QECH), Blantyre

Twinning Centres: VU University Medical Centre (VUMC), Amsterdam, The Netherlands
Victoria Royal Infirmary (VRI), Newcastle, UK

Other Charity Partners: None

Project Leader: Professor Elizabeth Molyneux, QECH

Project Mentors: Dr Trijn Israels, VUMC
Dr Simon Bailey & Dr Roderick Skinner, VRI

Start & End Date: January 2009 - December 2013



Oscar who has Wilms tumour

Background:

QECH is the main teaching hospital in southern Malawi providing tertiary healthcare in the region. The hospital diagnoses around 250 new cases of childhood cancer a year, mostly Burkitt lymphoma and Wilms tumour. QECH provides all health care free of charge but receives government funding which is insufficient to the needs of cancer patients.



Dr Trijn Israels with a patient

Key Problems:

- Lack of specially trained doctors and nurses in childhood cancer
- Not enough funding for drugs and improvements to facilities
- Slow diagnostic services for blood and other tests causes delays
- Poor follow-up of patients due to lack of a database or statistical information
- High rate of abandonment due to practical issues with lengthy hospital treatment
- Lack of awareness about child cancer, its symptoms and curability
- Late diagnosis and under diagnosis

Project Objectives:

- 1) Create centre of excellence in the treatment of childhood cancer at QECH
- 2) Increase and sustain survival rates to 50% for Burkitt Lymphoma and Wilms tumour
- 3) Develop locally appropriate protocols for other forms of childhood cancer
- 4) Increase access to treatment
- 5) Improve awareness of childhood cancer to encourage earlier diagnosis
- 6) Improve provision of palliative care for those children with incurable cancers
- 7) Develop long-term sustainability in quality cancer care for children

Key Project Outputs:

- Refurbish and extend the child cancer ward to provide access for more patients
- Implement training programme for healthcare professionals
- Establish a child cancer database to assess the problem, aid research and follow-up
- Provide reliable supply of chemotherapy and palliative care drugs
- Subsidise food and transport costs for patients to reduce abandonment
- Develop a community poster awareness campaign
- Increase speed of pathology results and more rapid diagnosis

Impact:

- Overall increase in survival rates and diagnosis rate now up to nearly 50%
- Local leader identified for succession and funded for training in South Africa
- Regular training and mentoring for staff
- Refurbishment of the ward and provision of equipment
- Costs of food and transport provided for patients
- Awareness poster campaign implemented
- Rapid test results using microscope camera and regular case discussions



Mother and patient at QECH



Professor Elizabeth Molyneux