

Ghanaian Child Cancer Project – Fact File



Project Location: Korle Bu Teaching Hospital, Accra, Ghana
Twinning Hospital: Royal Hospital for Sick Children, Edinburgh, UK
Project Leader: Dr Lorna Renner (Ghana)
Twinning Mentors: Professor Tim Eden and Dr Emma Johnston (UK)
Start Date: 2010
Stage: Stage 3 (creation of centre of excellence)
Support: \$100,000 USD p.a.
Expected no. of cases: 900 to 1,700 per year nationwide
Per Capita Income of Ghana: \$1,240 (2010 data/UNICEF)

Context

There are 900 to 1,700 expected cases of child cancer a year in Ghana (based on 80 to 150 cases per million children). The majority of cases are easily treatable child cancers such as Burkitts lymphoma, Wilms tumour (kidney cancer), retinoblastoma (eye cancer) and acute lymphoblastic leukaemia. With timely diagnosis, use of cheap (generic) drugs and good quality care about 60% of all children with cancer can be cured in Ghana at an affordable cost.

Challenges in 2010:

- Only 20% of all expected cases diagnosed nationwide.
- Survival rates were less than 20% for diagnosed children.
- There was a lack of trained paediatric oncology doctors and nurses.
- Late diagnosis was a major problem with 20% of children presenting too late for curative treatment.
- There was a lack of accurate statistical data on incidence and outcomes.
- Parents were often unable to afford chemotherapy drugs with the result that they abandoned treatment.

Strategic Objectives 2010 to 2014:

To increase access to treatment & increase survival rates for diagnosed children by achieving the following outcomes:

- Creating a centre of excellence at Korle Bu Teaching Hospital with improved facilities and trained staff.
- Developing a network of satellite diagnosis and treatment centres in four locations across Ghana.
- Developing and implementing locally appropriate treatment protocols.
- Improving access to chemotherapy drugs to reduce abandonment of treatment.
- Improving awareness about child cancer and its potential curability amongst parents and healthcare workers.
- Improving the collection of statistical data on child cancer.
- Developing a national model for the treatment and care of children with cancer in Ghana.

World Child Cancer Funded Activities:

- Training programme for doctors and nurses in diagnosis, treatment and care of children with cancer through bi-annual workshops.
- Public education poster awareness campaign to raise the profile of child cancer.
- Creation of new day-care unit to increase capacity at Korle Bu Teaching Hospital.
- Three month training fellowship in the UK for the project leader, Lorna Renner.
- Establishment of child cancer database.
- Development of reliable supply of curative and palliative drugs for the unit in Accra.

Impact of Funding (as of May 2013):

- Survival rates for diagnosed children are 60% (1 year event free survival) – an increase of 40%.
- 200 doctors and nurses have received training.
- Fewer children are presenting with advanced symptoms as a result of the public health education campaign.
- Abandonment of treatment has been reduced to 20% from 40%.
- All patients details and outcomes are now recorded on the child cancer database.
- Shared care protocols are now in place between Korle Bu Teaching Hospital in Accra and Komfo Anokye Hospital in Kumasi.

Future Development:

The project has received funding from World Child Cancer for almost four years and during that time there has been significant progress. However, there are still major challenges to overcome.

- Long-term (3-5 year event free) survival rates need to be assessed and increased.
- Access to treatment can be improved with further awareness campaigns and use of satellite centres.
- More trained doctors and nurses are required.
- A national child cancer care plan is needed to standardize care across Ghana.