Title: Comprehensive Screening and Action for Women in Kerala

Funded by: Conferenza Episcopale Italiana, Committee for Charitable Action in the Third World

CANCare

Final Report



Submitted By:

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METROPOLITIAN ARCHBISHOP'S ACKNOWLEDGEMENT



ARCHDIOCESE OF TIRUVALLA

12 Oct. 2023

The President

His Em. Cardinal Matteo Maria ZUPPI Conferenza Episcopale Italiana (CEI) Committee for Charitable Action in the Third World Via Aurelia 796, 00165 ROMA



May it Please Your Eminence,

I am pleased to write this letter of deep appreciation for the support given by CEI for CANCare Project No 801/2019. We have been able to do an excellent work involving all peoples and leaders, especially local governments. It has been an excellent project and so many have profited out of this work. I can highlight the salient features of this project in this way:

- 1. The CANCare programme explicitly fulfilled the vision of screening the women (18-60 years) of Pathanamthitta, Kottayam and Alappuzha districts of Kerala.
- 2. The programme offered screening of four cancers (breast, thyroid, oral and cervical) at free of cost which facilitated the economically backward classes to come forward and receive the benefits of the screening programme
- CANCare facilitated to get benefitted not only from testing but also received training like self-breast examination protocols which is spreading to more public creating better awareness
- 4. The programme received accolades from eminent personalities as they joined and became the part of the programme by sharing their views and promoting CANCare through online platforms and social media posts.
- 5. According to the TI-RADS classification it was clearly evident that 78% (16.44% benign and 61.42% malignant) of the suspected patients had thyroid cancers
- 6. Amongst these suspected population, $\sim\!86\%$ (221 out of 256 patients) were diagnosed with benign (36.33%) and malignant (50%) breast cancer lesions making breast cancer as one of the most prevalent cancers screened through this CANCare programme following thyroid cancer.

Well, we have a long way to go further. I request your continued support. We are always at your disposal for any clarifications. I know this decision of supporting us meant a lot of financial burden from CEI and its benefactors. WE keep you all in our prayers. To be intelligently selfish means to involve in the lives of others and help, so said H.Ex. Dalai Lama. I appreciate once again your generosity for taking us into confidence to entrust us with this project so as to be at the service of people who are less fortunate and vulnerable.

With profound gratitude to Your Eminence, the Committee for Charitable Action in the Third World and all office Staff, and craving for Your Eminence's apostolic blessings, I remain,

◆ Thomas Mar Koorilos

Metropolitan Archbishop of Travalla

PRINCIPAL INVESTIGATOR'S ACKNOWLEDGEMENT



Isaiah 40:31 says "But those who hope in the Lord will renew their strength. They will soar on wings like eagles; they will run and not grow weary; they will run and not be faint".

India is faced with a sizeable cancer incidence burden, which continues to grow exponentially. The 2020 WHO ranking on cancer burden in terms of new yearly cases being reported had ranked India at the third position after China and US, respectively. And it remains same till date.

Real Cancer incidence level in India is estimated to be 1.5 - 3 times higher than reported incidence as 51% patients take more than a week to conclude diagnosis while 46% take second opinion due to lack of confidence in initial diagnosis and suggested treatment. In India, Kerala, Mizoram, Tamil Nadu, Karnataka, Punjab and Assam report the highest overall crude incidence rates of cancers.

For cancer prevention, early diagnosis and wide spread public awareness will be integral and will serve as a beacon of light to strengthen India's strategy for cancer care and other non-communicable diseases. And to address the dual challenge of rising incidence and sub optimal mortality to incidence ratio, it is imperative to drive mass awareness campaigns, focus on effective prevention and enable improved screening coverage as a primary response.

We have conducted 100 screening camps and awareness programme training sessions to tackle this issue in the three districts of Kerala viz Pathanamthitta, Alappuzha and Kottayam over a time span of two years. Huge response was seen from the part of patients, health workers, public, politicians and religious leaders. The local government systems were also very cooperative during the whole duration of the implementation of the project. The result of the study was very promising and truly an eye opener for all who work in the field of cancer.

I take this moment to thank the President of CEI for providing us such an excellent opportunity to serve the poor and the marginalised patients in our community through this project. We will be publishing this data in an international peer reviewed journal where the support and help from CEI will be duly acknowledged. From the study, it is also clearly evident that more screening and awareness are needed at an alarming rate to the rest of the unexplored regions of our state.

May the good God bless all your endeavours and be with you in all your philanthropic work which you are doing to alleviate the sufferings of God's people. May the maternal care of our Blessed Holy Mother protect you in all what you do.

Thanking you once again from the bottom of my heart.

Dat Helini

Rev. Dr. Mathew Mazhavancheril Principal Investigator, CANCare Project TRUVALIA 609101 KERALA

Rev. Dr. Mathew Mazhavancheril Director & Head Pushpagiri Research Centre Tiruvalla - 689 101, Kerala

PROJECT COORDINATOR'S ACKNOWLEDGEMENT



I hope this message finds you in good health and high spirits. On behalf of the entire Comprehensive Screening and Action for Women in Kerala: CANCare Project, (Reference: Project No. 801/2019) I would like to extend our heartfelt gratitude for your generous funding and unwavering support throughout our journey. Your trust in our vision played an instrumental role in the project's remarkable success.

The CANCare Project has been a tremendous achievement, especially given the challenging circumstances posed by the COVID-19 lockdown. It has not only met but surpassed its objectives, setting a shining example of how collaboration across various sectors can yield remarkable results, even in the face of adversity. The success of the project was made possible through seamless collaboration with multiple sectors, demonstrating the power of teamwork and determination. Together, we were able to organize and execute a series of health camps amidst the COVID-19 lockdown, providing crucial assistance to those in need. Your funding allowed us to mobilize resources and train volunteers, ensuring the safety and well-being of all participants.it was a great help to women from the underprivileged background. Through the CANCare Project, we were able to not only provide essential medical services but also offer much-needed emotional support and guidance during these trying times. It was heartening to witness the positive impact our efforts had on the communities we served. We could extend our services to 9434 women in Alappuzha, Kottayam & Pathanamthitta districts, it would seem like we have given services to 9434 individuals but I am very sure the project has made an impact in 9434 families rather than individuals.

Cancer is a leading cause of premature mortality globally. According to GLOBOCAN data 2020, Most common cancer among females in the world is Breast cancer, According to National Cancer Registry Programme of India, In India, one in nine people in India are likely to develop cancer in his/her lifetime and breast cancer is the most common cancer amongst women. According to District Cancer Registry of Trivandrum, breast cancer is the most prevalent cancer seen among women of Kerala. As per the study conducted in these three districts, we observed thyroid cancer being the most prevalent followed by breast cancer.

As we reflect on the success of the CANCare Project, we are eager to explore future collaborations and initiatives that can further our shared goals. Your continued support is invaluable, and we look forward to discussing how we can build upon this success and continue making a meaningful difference in the lives of those we serve. Once again, thank you for your trust, generosity, and unwavering commitment to our cause. We are profoundly grateful for the opportunity to work alongside CEI Italy and look forward to the exciting possibilities that lie ahead.

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BACKGROUND OF THE PROJECT

CANCare, the name given for this project by Pushpagiri Institute of Medical Sciences and Research Centre, is a robust cancer screening programme for screening breast, thyroid, oral and cervical cancers in women aged between 18-60 years residing in Pathanamthitta, Kottayam and Alappuzha districts of Kerala, India. It was launched at Pushpagiri Medical College in December 2020 after approval from CEI- Conferenza Episcopale Italiana, Committee and Service for Charitable Action in the Third World.

In order to deliver effective cancer screening, it requires the coordinated services of an enormous array of health care professionals including administrators, surgeons, oncologists, radiologists, pathologists, nurses, social workers and volunteers from multiple organizations in our community. The immense task of organizing and coordinating this diverse assemblage of individuals and services is accomplished through a group of selected leaders who have demonstrated curiosity, passion and the vision to create something better for our community.

The CANCare programme was devoted to improve the survival and quality of life of cancer patients through early diagnosis, by emphasizing prevention programs, and by coordinating education for patients.

OBJECTIVES

- 1. To design and implement a programme for screening breast, thyroid, oral and cervical cancers, mainly in women residing in Pathanamthitta, Alappuzha and Kottayam districts of Kerala, India.
- 2. To provide financial and medical assistance to those women found to have suspected malignancies during screening programme.
- 3. To provide guidance and medical advice in choosing the appropriate forms of treatment, among those women who are confirmed to have malignancy during the screening and diagnosis phase

ACTIVITIES CONDUCTED DURING

A. PLANNING PHASE:

Core Committee was formed including Rev. Dr. Mathew Mazhavancheril (Director & Head, Pushpagiri Research Centre and Former Director Academics), Dr. V. U
 Thankamma (Professor - Oncology), Dr. Jency Mathews (Associate Professor - Oncology), Dr. Robinson George (Professor - Surgery), Dr. Rachael Mathew (Associate

- Professor OBG), Dr. Vikram Gowda (Professor Physiology), Dr. Vinod Mathew (Assistant Professor Community Dentistry), Dr. Philip Mathew (Associate Professor Community Medicine), Dr. Betsy. A. Jose (Project Co-ordinator, Assistant Professor Community Medicine) & Dr. Sharon Raj Eliza (Assistant Professor, Community Medicine).
- ii. Role of the Core Committee was to give proper guidance, free consultations and treatment plans for the patients referred by the screening teams from camps.
- iii. Based on the planning Human Resources were appointed for smooth functioning and conduction of camps and awareness sessions, exhibitions and classes. Dr. Vipin. V was appointed as Project Manager (1/12/20) after interviewing 5 doctors at Director's office. Mrs. Aruna C.G was selected as staff nurse for the programme along with Mr. Manu and Mrs. Preethi who were interviewed and selected as community health nurses. Finally, training was given to all the selected Health educator and Community health nurses.
- iv. Thereafter, a 15 days training program with 3-day department posting as a part of CANCare program was conducted from 18th of February to 6th of March in the year 2021 for training the health educator and community health nurses. 3 community nurses and one health educator participated in the training program conducted at the community medicine department, Pushpagiri Medical College, Tiruvalla, under the guidance of Dr. Felix Johns, Head of the Department, Common Medicine.
- v. The training was organised and conducted by Dr. Philip Mathew, Dr. Betsy A Jose (Project Co-ordinator), Dr. Sharon Raj Eliza and Dr. Vinod Mathew. An extensive and elaborate training was provided by the team of doctors from the Department of Obstetrics and Gynaecology, Dr. Susan and Dr. Rachel, to the lady participants (Mrs. Aruna C G, Mrs. Preethi Rubi) regarding the use of colposcope, speculum, acetic acid, povidone iodine. Special training for thyroid examination was given by Dr. Rajeev Philip to Dr. Vipin V (Project Manager). Dr. Arjun Parameshwar and Dr. Vinod Mathew demonstrated and trained the usage of velscope and oral examination to Dr. Vipin V. Dr. Betsy A. Jose took session on breast examination using iBreastScan device and Dr. Sharon Raj Eliza took session on self-breast examination.
- vi. Multiple meetings with the Principal Investigator, core committee doctors, project manager and other supporting staffs were conducted on 3/12/20, 7/12/20, 10/12/20, and 15/12/20 at Director's office to decide on:

- a. Procuring instruments for screening oral, thyroid breast and cervical cancers
- b. Refurbishment of infrastructure and facilities for the CANCare screening programs
- c. To purchase vehicles for conducting screening camps (modified medical van) and transportation vehicle for doctors
- d. CANCare brochures/notices were designed by the core committee members and the logo was designed by Dr. Vipin V (Project Manager) which was finally approved by the Core committee
- e. Due to the excruciating pandemic condition, a massive setback was encountered to conduct public meetings and camps. Therefore, the core committee meeting was conducted to decide on strategies and solutions to mobilize the public to the screening camps upon adhering to the existing COVID protocols
- f. Meeting between District Panchayath President, Pathanamthitta, Sri. Omallor Shankaran and Dr. Philip Mathew, Dr. Vinod Mathew and Dr. Vipin. V was conducted on 17/12/20 at Collectorate in order to include CANCare screening programs in their LSGD projects.
- g. Meeting with Tiruvalla Municipal Chairperson, Bindhu Jayakumar was conducted at Municipality Office on 28/12/20 to conduct camps in their municipal wards.
- h. Meeting with Kottayam, Pathanamthitta, and Alappuzha District Medical Officers were conducted on 4/1/21, 5/1/21, and 8/1/21 respectively to conduct camps in their districts.
- i. Meeting with parishes and Tiruvalla Social Service Society was conducted on 12/1/21.
- j. Hoarding for CANCare promotion was placed at the entrance of Pushpagiri Institute of Medical Sciences and Research Centre advertising and encouraging the women to undergo tests for screening the breast, thyroid, cervix and oral cancers which were offered at free of cost
- k. The official inauguration of CANCare program was held on 8/3/21 on International Women's Day by Dr. AL Sheeja, District Medical Officer, Pathanamthitta. The programme was blessed by H. G. Most. Rev. Dr. Thomas Mar Koorilos, Metropolitan Archbishop of Tiruvalla, and Patron of Pushpagiri Group of Institutions. Publicity for the CANCare Program were achieved through

promotional videos by PB Nooh IAS, who was the previous District Collector of Pathanamthitta District

B. IMPLEMENTATION PHASE

- a. Cancer Screening programme: A cancer screening programme was conducted for the benefit of women residing in Pathanamthitta, Alappuzha and Kottayam districts of Kerala, India. The screening services were available for breast, thyroid, oral and cervical cancers.
 - ✓ Screening for Breast Malignancy: All the women attending the cancer screening fair were subjected to a thorough clinical examination by an oncology trained lady health worker. The health worker examined the breast by using iBreastExamTM (a portable breast scanner) and also looked for breast lumps, induration, lymphadenopathy or any other suspicious lesions. The examinations were done in a private area, after obtaining consent from the participant. Any participant with any suspicious lesion were referred for a breast ultrasound or mammogram, as per their age.
 - ✓ Screening for Thyroid malignancy: All women attending the cancer screening camp were subjected to a thorough clinical examination by an oncology trained health worker. The health worker checked for neck swelling, lymphadenopathy or any other suspicious lesions. The examinations were done after obtaining consent from the participant. Any participant with any suspicious lesion were referred for a neck ultrasound at Pushpagiri Medical College Hospital, Tiruvalla.
 - ✓ Screening for Cervical malignancy: All women attending the cancer screening camps were subjected to a VIA (Visual Inspection of Acetowhite Areas) examination using portable colposcope. The examination involves smearing the patient's uterine cervix with acetic acid and looking for a change in colour. Suspects were sent to Pushpagiri Medical College for Papanicolaou smear examination.
 - ✓ Screening for Oral malignancy: All women attending the cancer screening camps were subjected to an oral examination by a dentist using a portable velscope. The dentist will look for discolourations, swellings, lymphadenopathy and pre-cancerous lesions. Any participants with any suspicious lesion were referred for a punch biopsy at Pushpagiri medical college, Tiruvalla
 - i. 100 CANCare cancer screening camps were conducted across Kottayam, Alappuzha and Pathanamthitta districts from march 2021 to December 2022
 - ii. 9434 women participated in camps were screened for oral, thyroid, breast and cervical malignancy, from which about 896 suspects were identified
 - iii. Given free diagnostic tests for 896 suspects identified from camps

- b. Awareness Classes: At every cancer screening camp, awareness classes and personalised health education were provided about cancer, its prevention and warning signs. The classes were conducted by trained doctors and personalised health education was delivered by a trained nurse
 - i. 100 health awareness classes and self-breast examination training for the camp participants were conducted along with camps
 - Two cancer awareness exhibitions were conducted at Changanassery and Kaloor in collaboration with SB College, Changanassery and Aryad Block Panchayath respectively
 - iii. Along with the 100 CANCare camps, oral healthcare awareness classes, general health awareness classes and menstrual hygiene classes were taken for the camp participants
- c. **Referral services**: All the referral services were provided by Pushpagiri Medical College Hospital. Any participant, found to be positive on initial screening, were referred to the base hospital for more investigations. The following investigations were provided free of cost to the participants, if the initial screening is positive as tabulated in Table 1.
- d. Guidance and Advice: The community health nurses and health educators were in touch with the patient and offered healthcare advice as per latest medical norms. These personnel helped the patient to choose the right form of treatment and gave counselling services. The Public Relation Officers offered the patient to access the required financial resources from various schemes available to them.

e. Exhibitions conducted:

- One day cancer awareness exhibition was conducted in Kaloor in collaboration with Aryad Block Panchayath of Alappuzha district. 1000 people participated in the exhibition.
- ii. A seven-day cancer awareness exhibition (SAMVIT 2.0) was organized jointly by Pushpagiri Medical College CANCare and Changanassery SB College. More than 3 lakh students from more than 75 schools from different parts of the state participated in the exhibition held from September 19 to September 26, 2022. Apart from schools, people from Arts and Science Colleges, Special Schools and convents participated in the exhibition. As part of the exhibition held from 9 AM to 7 PM, cancer awareness classes, breast self-examination training and health awareness classes were conducted by Pushpagiri College of Dental sciences, Pushpagiri Physical Medicine and Rehabilitation Department, Pushpagiri

Community Medicine Department and Pushpagiri CANCare team. Conducted cancer detection camp, oral health class and brushing technique class. Those who showed symptoms of cancer who participated in the cancer detection camp were given a free disease confirmation test at Pushpagiri Medical College.

f. Community Advocacy with the self-help groups (We-CAN Programme):

As part of the CANCare cancer screening project conducted by the Pushpagiri Medical College Hospital and Research Centre, a self-breast examination training session for women was organized on October 22nd and 29th, 2022 at Pushpagiri Medical College Senate Hall. 80 people selected from Pathanamthitta district Kudumbashree units who represents district population and other social organizations were given special training in breast examination. The official inauguration of the program was held on Saturday morning 29/10/22 at Pushpagiri Medical College Senate Hall. Rev. Dr. Mathew Mazhavancheril, (Pushpagiri Research Director) welcomed the event. The Principal Investigator, Rev. Dr. Mathew Mazhavancheril delivered the keynote speech of the project. Rev. Fr. Jose Kallumalickal (CEO, Pushpagiri Group of Institution) addressed the audience. He said that the need for self-examination can be brought to other women through this training course called We-CAN. The Deputy District Medical Officer of Pathanamthitta, Dr. Rachana Chidambaram inaugurated the training program and encouraged the Kudumbashree personnel to spread the knowledge of self-breast examination to the general public.

Dr. Abraham Varghese (Medical Director, Pushpagiri Medical College Hospital), Mrs. Anupa P. R (Kudumbasree District Program Manager), Dr. Felix Johns (Professor and Head of Community Medicine), Dr. Betsy A. Jose (Project Co-ordinator, Assistant Professor, Department of Community Medicine) also highlighted the importance of self-breast examination and its advantages like predicted lumps in breasts prior to emergence of clinical signs. This can be an important factor in curbing down the morbidity associated with breast cancer.

Dr. Susan Mathew (Professor and HoD, Department of Gynaecology), Dr. Betsy A. Jose (Assistant Professor, Department of Community Medicine), Dr. Vandana Vijayan (Junior Resident, Department of Community Medicine) and Dr. Benny Bright (Assistant Professor, Department of Surgery) led the classes and training. The programme was a grand success as the training delivered reached to greater masses of Kerala. Some of the feedbacks received are depicted in Page 53-55.

We-CAN Community Level Training: 80 women selected from Kudumbashree and Social Service Organizations from various districts were given the We-CAN training program in

the first phase during the inspection program conducted on October 22 and 29, 2022. Community level training was conducted by these 80 members who participated in the self-breast examination training program for women conducted by the Pushpagiri CANCare team. More than 75 cancer awareness classes and breast self-examination training classes have been conducted in various parts of the district by the members trained in breast self-examination. Cancer diagnostic tests were made available at Pushpagiri Medical College Hospital for those who suspected symptoms of the disease.

- i. As part of the project, 2 days self-breast examination workshop (We-CAN) programme for selected volunteer women from Pathanamthitta district was conducted at Pushpagiri Medical College Senate Hall
- ii. 75 self-breast examination classes were conducted by the volunteer women across Pathanamthitta districts and free diagnostic tests were made available free for the suspects

Collaborations: Camps were conducted in collaboration with the existing health systems, Family Health Centres (FHC), Taluk Hospitals, General Hospitals, Primary Health Centres, Peripheral health Centres of Private Medical Colleges, NGOs, Parishes under all denominations, other religious institutions, Colleges, Universities, Local Self Government Departments, Self-help Groups (Kudumbasree, Accredited Social Health Activists (ASHA)) and Youth Movements for the conduct of camps.

RESULTS

Table 1: Screening Tests Offered Free of Costs Through CANCare

	Initial screening tests offered through CANCare	Free confirmatory tests done at PMCH, through CANCare
Thyroid	Systematic examination	Neck Ultrasound
Breast	iBreastExam	More than 40 years of age → Mammogram Less than 40 years of age → Breast Ultrasonogram
Cervix	VIA with Colposcopy	Pap Smear
Oral	Velscope Examination	Punch Biopsy

Table 2: Patient Statistics from 8 March 2021 to 31 December 2022

Sl. No.	Category	Number (n)	Percentage (%)
1	The total number of populations (18 - 60-year-old women) screened as on 31 st December 2022	9434	
2	Total number of camps conducted as on 31 December 2022	100	
3	Total number of suspects identified	896	9.5%
4	Total number of patients identified with any sort of clinical abnormality confirmed through CANCare	709	7.5%
5	Total number of patients confirmed with any sort of tumour lesions (Benign + Malignant)	577	6.1%
6	Total number of patients confirmed with malignant lesions	412	4.3%
7	Total number of patients confirmed with Benign lesions	165	1.7%

Table 3: Distribution of Patients Benefitted Through CANCare (n = 9434)

Confirmatory Tests	Number of patients underwent	(%)	Patients detected with any abnormality	(%)	Patients with Benign lesions detected	(%)	Patients with malignant lesions detected	(%)
Neck USG	473	5.0	438	4.3	72	0.8	269	2.85
Mammogram	333	3.5	227	2.3	76	0.8	126	1.3
Breast USG	49	0.5	29	0.3	17	0.18	2	0.02
Pap Smear	36	0.38	10	0.10	0	0	10	0.10
Punch Biopsy	5	0.06	5	0.06	0	0	5	0.06
Total	896	9.4	709	7.06	165	1.8	412	4.3

Table 4: Percentage of Benign and Malignant Lesions Amongst Suspected Patients

Confirmatory Tests	Patients with abnormalities	Patients with benign lesions	(%)	Patients with malignant lesions	(%)	Total Patients diagnosed with cancer	%
Neck USG	438	72	16.44	269	61.42	341	77.85
Mammogram and Breast USG	256	93	36.33	128	50	221	86.33
Pap Smear	10	0	0	10	100	10	100
Punch Biopsy	5	0	0	5	100	5	100

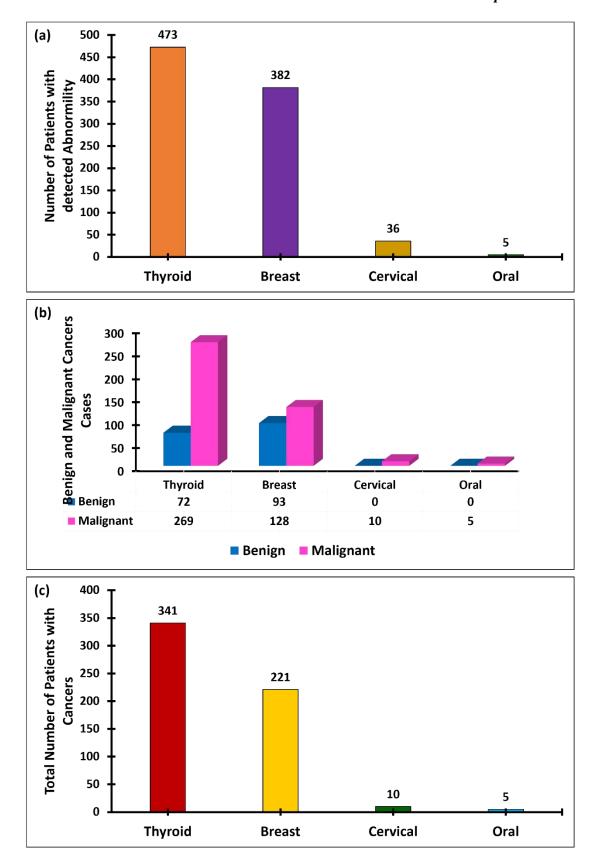


Figure 1: (a) Graph depicting number of patients with detected abnormality; (b) Graph depicting benign and malignant cancer cases; (c) Graph depicting total number of patients diagnosed with cancer

Prevalence and pathophysiological findings of CANCare project

A total of 9434 patients were screened in a period of 2 years (2020-2022) since the inception of the CANCare project though 100 camps concerning the three districts (Pathanamthitta, Kottayam and Alappuzha) in Kerala. Among the screened patients, 896 (~ 10%) of them were shortlisted as suspects based on the lesions detected in cervix and oral cavity, inflammations and nodules in thyroid glands and lumps in the breast. These ailments can arise not only because of cancers but from several other pathophysiological and clinical conditions like cervicitis (in cervix), submucosal fibrosis, leukoderma, erythroderma, Aphthous stomatitis (in oral) and thyroiditis, goitre (in thyroid). However, the present programme concentrated on screening the cancer status of the women residing in the three districts of Kerala.

Further, confirmatory tests were done to screen out the cancer suspects from the non-cancer ailments. High prevalence of cancers was evident as a total of 709 (~80%) patients amongst diseased suspects being detected with tumour lesions. This plays an important role concerning the patient's further treatment regimen and also the follow-up procedures. Patients detected with benign tumours possess high chances of recovery than in malignant cases which causes severe morbidity and mortality. Therefore, investigations were performed to screen the intensity and stages of cancer progression to elucidate the benign and malignant conditions in patients. However, when the complete datasets were analysed concerning the studied population, it was found that the prevalence of cancers were ~6% (577 out of 9434 patients) implying an alarming outrage of cancer pervasiveness in the studied districts.

Confirmatory test (Neck USG) for Thyroid Cancer Screening

The confirmatory test for thyroid cancer is performed through neck ultrasonogram and the imaging is done through Thyroid Imaging Reporting and Data System (TI-RADS). The technique refers to any of several risk stratification systems for thyroid lesions, usually based on ultrasound features. Based on the vascularisation, echogenicity, calcification and disruption of border integrity, six stages are classified to assess the cancer severity described as follows (1).

- TI-RADS 1: normal thyroid gland
- **TI-RADS 2**: benign conditions (0% risk of malignancy)
- **TI-RADS 3**: probably benign nodules (<5% malignancy)
- *TI-RADS 4*: suspicious nodules (5-80% malignancy)
 - ✓ **TI-RADS 4a**: undetermined (5-10% malignancy)

- ✓ **TI-RADS 4b**: suspicious (10-80% malignancy)
- *TI-RADS 5*: probably malignant nodules (>80% malignancy)
- TI-RADS 6: biopsy proven malignancy

Based on the results obtained from this classification, it was found that $\sim 3\%$ and $\sim 1\%$ of the populations were diagnosed with malignant and benign lesions respectively. Concerning the patients detected with clinical abnormality in thyroid gland, $\sim 93\%$ (438 out of 473 people) of people were diagnosed with thyroid associated diseases. According to the TI-RADS classification it was clearly evident that 78% (16.44% benign and 61.42% malignant) of the suspected patients had cancers. This data illustrates that the burden of malignant lesion in thyroid gland was higher when compared with the benign cases in these three districts.

Confirmatory test (Mammogram and Breast USG) for Breast Cancer Screening

The confirmatory test for breast cancer is performed through breast ultrasonogram and mammogram. Imaging done to confirm the cancer stages are derived from breast USG through Breast Imaging-Reporting and Data System (BI-RADS). The is the most commonly accepted technique for quality assurance and imaging of the breast thereby facilitating in the risk assessment (2). Based on lumps, architectural distortion or suspicious calcifications, BI-RADS is classified into seven assessment categories listed as follows:

- BI-RADS 0: incomplete
 - ✓ need additional imaging evaluation (additional mammographic views or ultrasound)
 - ✓ for mammography, obtaining previous images not available at the time of reading
- BI-RADS 1: negative
 - ✓ symmetrical and no masses, architectural distortion, or suspicious calcifications
- **BI-RADS 2:** benign (0% probability of malignancy)
- BI-RADS 3: probably benign
 - ✓ <2% probability of malignancy
 - ✓ short interval follow-up suggested
- BI-RADS 4: suspicious for malignancy
 - ✓ 2-94% probability of malignancy
 - ✓ for mammography and ultrasound, these can be further divided:
 - *BI-RADS 4A:* low suspicion for malignancy (2-9%)

- *BI-RADS 4B:* moderate suspicion for malignancy (10-49%)
- *BI-RADS 4C*: high suspicion for malignancy (50-94%)
- ✓ biopsy should be considered
- **BI-RADS 5:** highly suggestive of malignancy
 - ✓ >95% probability of malignancy
 - ✓ appropriate action should be taken
- **BI-RADS 6:** known biopsy-proven malignancy

From the population point of view, it can be inferred that 0.8% and 1.32% of the people were detected with benign and malignant breast lesions respectively. Further, from the BI-RADS classification of the suspected patients, it was observed that ~67% (256 out of 382 people) were diagnosed with clinical complications concerning breast mammogram and USG. Amongst these suspected population, ~86% (221 out of 256 patients) were diagnosed with benign (36.33%) and malignant (50%) breast cancer lesions making breast cancer as one of the most prevalent cancers screened through this CANCare programme following thyroid cancer. This data reveals the pervasiveness of malignant breast cancer to be much higher than that of benign lesions.

Confirmatory tests Pap Smear for Cervical and Punch Biopsy for Oral Cancer Screening

Outcome from cervical and oral cancer screening revealed that 0.1% and 0.06% of the population to have possessed cervical and oral cancers respectively. Though from bird's eye view the prevalence of cervical and oral cancers might seem low, on practical grounds it was observed that all the people with suspected abnormality were found to bore malignant cancerous lesions. This outcome drew clinical attention massively and further examinations concerning a larger study group. Our results are in correlation with the existing data revealing the low prevalence of oral and cervical cancers amongst women in Kerala, while higher prevalence is reported for breast and thyroid cancers respectively.

CONCLUSION

The CANCare programme explicitly fulfilled the vision of screening the women (18-60 years) of Pathanamthitta, Kottayam and Alappuzha districts of Kerala. The programme offered screening of four cancers (breast, thyroid, oral and cervical) at free of cost which facilitated the economically backward classes to come forward and receive the benefits of the screening programme. The advertisements made through social media posts, flyers, posters, hoardings

and newsletters had a greater impact facilitating in the outreach to almost 10,000 people who volunteered themselves for getting tested of these cancers. The programme created health awareness amongst the masses. CANCare facilitated to get benefitted not only from testing but also received training like self-breast examination protocols which is spreading to more public creating better awareness. The camps had huge response as evident from their verbal and written feedbacks and feedbacks received from the Kudumbasree workers who facilitated us immensely to make the programme a grand success. CANCare was successful in spreading the awareness and chances of complete recovery from cancers upon being diagnosed at an early or nascent stages through several exhibitions, training sessions in camps and colleges. The programme received accolades from eminent personalities (ministers, district collectors, gram panchayath heads and other local self-governments department members, volunteers, ASHA workers, government health institutions, NGOs, parishes, and youth movements) as they joined and became the part of the programme by sharing their views and promoting CANCare through online platforms and social media posts. Amidst loads of response from general public, we have been successful in reaching to only three districts out of fourteen districts of the state. Therefore, it becomes our moral obligation and ethical responsibility to extend this CANCare project throughout the state and country at large creating more awareness. Further, we aim to delve deeper into the determinacy of cancer and its causing mechanisms which could prove crucial for early detection and treatment besides framing strong health policies and equities. The current programme could be considered as the stepping stone as it can serve as the model for implementing future cancer screening programmes, thus facilitating in the detailed screening of other cancers as well. We as health care workers from Pushpagiri Group of Institutions wish to establish future collaborations with several other medical colleges and hospitals to create a far-reaching impact and consciousness on the general mass.

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- Pesce K, Orruma MB, Hadad C, Bermúdez Cano Y, Secco R, Cernadas A. BI-RADS Terminology for Mammography Reports: What Residents Need to Know. RadioGraphics [Internet]. 2019 Mar;39(2):319–20. Available from: http://pubs.rsna.org/doi/10.1148/rg.2019180068

STRENGTHS

- 1. The funding received from CEI, Italy proved a blessing for the people who are economically backward and vulnerable; as CANCare project offered free testing and cancer screening (thyroid, breast, oral and cervix) services benefitting them immensely
- 2. We were able to arrange 100 camps from (1st December 2020 to 31st December 2022) inspite of covid restrictions and regulations
- 3. We were successful in achieving intersectoral coordination with the existing health systems, Family Health Centres (FHC), Taluk Hospitals, General Hospitals, Primary Health Centres, Peripheral health Centres of Private Medical Colleges, NGOs, Parishes under all denominations, other religious institutions, Colleges, Universities, Local Self Government Departments, Self-help Groups (Kudumbasree, Accredited Social Health Activists (ASHA)) and Youth Movements through the conduction of camps
- 4. The CANCare Programme was highly successful in creating public awareness and necessity of undergoing these cancer screening tests in order to maintain their health regimen
- 5. Exhibition conducted through CANCare project received huge responses as more than 3 lakhs students participated and gained knowledge on cancer biology and advantages on early detection thereby increasing chances of survival
- 6. CANCare project facilitated not only in screening and testing cancers but also equipped the self-help groups (unskilled workers) to train other women in the community through community participation. As they trained other women, the acceptability of the programme gained new heights and publicity
- 7. The suspects with cancerous lesions were further counselled for future treatment regimens and follow-ups by providing monetary assistance
- 8. Those suspects identified in the community were prioritised through fast-track mode in Pushpagiri Medical College Hospital through the referral slips which facilitated prompt testing and counselling thereby bypassing the routine OPD queues

LIMITATIONS

- 1. Though thyroid cancers seemed prevalent in our study, further confirmatory tests through FNAC would have depicted a clearer picture thereby omitting the false positives upon profiling of thyroid-related cancers
- 2. COVID-19 pandemic retarded our screening spectrum to certain extent as containment regulations were strictly obliged

PHOTOGRAPHS

A. CANCare PLANNING PHASE







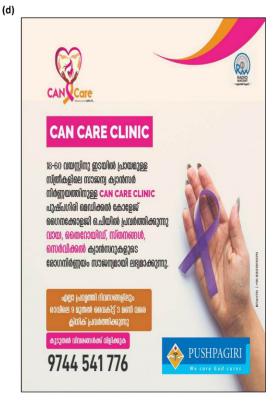
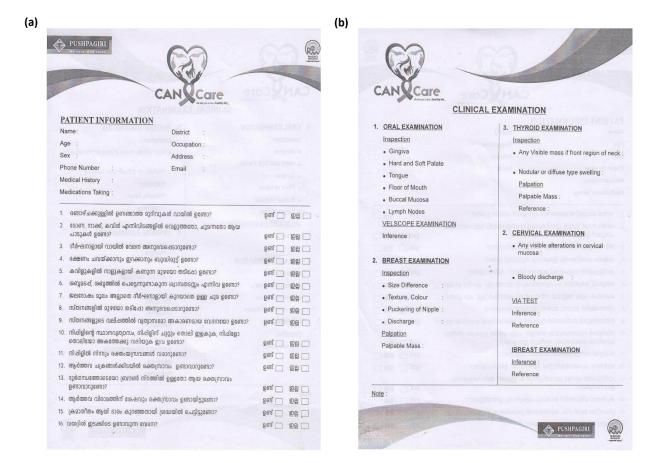


Figure 2(a-d): Flyers and Brochures of CANCare Project for the general public regarding the tests to be conducted and creating awareness pertaining to cancers

Questionnaire and Referral Slips



	PUSHP, MEDICAL COLLEGE	AGIRI CAN CORE	Date:
WE HE	LP YOU T	O LIVE HEAL	THY LIFE
Advised to do	O B/L Mammogram	OUnilateral Mammogram	OBreast Ultrasound
	O Neck Ultrasound	OPap Smear	O Punch Biopsy
I am referring Mr/M	Irs to	Department for consultat	ion with Dr

Figure 3(a-b): Questionnaire prepared by the core committee to screen the cancers in women; (c) Referral slip to fast track the CANCare patients screened from the community camps

Infrastructural Facilities

(a)









Figure 4(a-c): Infrastructural facilities allotted at Pushpagiri Medical College Hospital for conducting CANCare screening

Instruments Procured for Cancer Screening



Figure 5: (a) Colposcope for examination of cervix using visual inspection by acetic acid (VIA); (b) Velscope for screening oral cavity; (c) Breast light for screening lumps in breast; (d) iBreastScan for screening lumps in breast; (e) Speculum for examining the cervix

Training Given by Professors to the Project Managers and Community Nurses

(a)



(b)



Figure 6: (a) Dr. Betsy A Jose (Project Cordinator) training the usage of iBreastScan device used to screen breast lumps; **(b)** Dr Sharon Raj Eliza explaining the steps of self-breast examination

Hoardings and Promotional Videos Done for Advertising the CANCare Project





Figure 7: (a) Hoarding displayed at the entrance of Pushpagiri Medical College Hospital highlighting the screening and free confirmatory tests; (b) P B Nooh (IAS, Former District Collector, Pathanamthitta) posted about the project prospects and usefulness to the general public in his FB page; (c) Launch of the promotional video of P B Nooh (IAS) by Zilla Panchayath President, Pathanamthitta; (d) Dr. Divya S. Iyer (District Collector, Pathanamthitta) highlighted the importance of cancer screening programme and its far reached benefits on human health

Vehicles Procured from The CANCare Project

(a)



(b)



Figure 8: Vehicles procured for conduction of camps and trainings for CANCare Project:

(a) Mahindra Marazzo 7 STR M2 (Diesel); (b) Traveller BSVI 13+D HR PS AC ABS 3350

(Diesel)

Official Inauguration of CANCare Project





Figure 9: Official Inauguration of CANCare Project on 08th March, 2020 on International Women's Day (a) Dr. Sheeja AL (District Medical Officer, Pathanamthitta) and Mrs. Bindhu Jayakumar (Municipal Chairperson) along with His Grace Most. Rev. Dr. Thomas Mar Koorilos (Metropolitan Archbishop of Tiruvalla, and Patron of Pushpagiri Group of Institutions), Rev. Fr. Jose Kallumalickal (CEO, Pushpagiri Group of Institutions), Principal, Medical Director and other distinguished personnel inaugurating the CANCare Project; (b) Rev. Dr. Mathew Mazhavancheril (Principal Investigator, CANCare Project) delivering the welcome speech

B. CANCare IMPLEMENTATION PHASE

Letters from Principal Investigator to the District Medical Officers





Figure 10: (a-c) Letters from Principal Investigator to the District Medical Officers asking for permissions for conducting the CANCare camps in their districts; (d) Letter from the Administrative Medical Officer of Government Medical College, Kottayam Health Centre to the Kudumbasree Chairperson to permit the active participation of the Kudumbasree workers in CANCare camps which is conducted in collaboration with Pushpagiri Medical College Hospital

100 Camps and Awareness Sessions Conducted in Multiple Sites of the Alappuzha, Kottayam and Pathanamthitta Districts



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100 Camps and Awareness Sessions Conducted in Multiple Sites of the Alappuzha,
Kottayam and Pathanamthitta Districts



Flyers, Brochures and Notices of Cancer Screening Camps by Pushpagiri Medical College and Hospital and its Collaborators











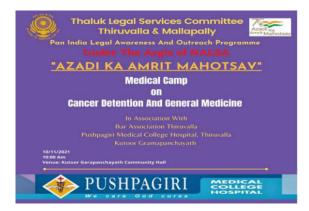








Flyers, Brochures and Notices of Cancer Screening Camps by Pushpagiri Medical College and Hospital and its Collaborators



















Newspaper Cutouts Advertising and Reporting About Cancer Camps and Awareness Sessions

അനുസ്മരിച്ചു

സ്കൂൾ മുൻ അധ്യാപകനും ഗാ ന്ധിയനുമായ സ്കറിയാ തൊമ്മി അനുസ്മരണം ഇരവിനല്ലൂർ പബ്ലിക് ലൈബറിയുടെ നേതൃത്വ ത്തിൽ നടത്തി. മാത്യൂ വി. ജോൺ, വി.ആർ. പ്രസന്നർ, സി.സി. കുഞ്ഞുകൊച്ച്, സ്കറി യാകുട്ടി, വി. ആർ.രവീന്ദ്രൻ, ഡോ. കുരുവിള വർക്കി, സുരേഷ് കുമാർ, മൗനം തോമസ്, പി.ടി. ഏലിയാസ് എന്നിവർ പ്രസംഗി

ക്യാംപ് ഇന്ന്

വാകത്താനം ● ഇന്നർ വിൽ ക്ലബ് ഓഫ് വാകത്താനം, പുഷ്പ ഗീരി മെഡിക്കൽ കോളജ് എന്നി വയുടെ നേതൃത്വത്തിൽ സ്ത്രീ

കൾക്കായി സൗജനു കാൻസർ ഇരവിനല്ലൂർ ● സെർ്റ് തോമസ് നിർണയ കുഠംപ് ഇന്നും എട്ടിനും സ്കൂൾ മൂൻ അധ്യാപകനും ഗാ ന്ധിയനുമായ സ്കറിയാ തൊമ്മി ളിൽ നടത്തും. ഫോൺ: 9495204278.

സംഗീതോത്സവം

കോട്ടയം • തപസൃ കലാസാഹി തൃവേദി 25 യൂണിറ്റുകളിൽ നവ തൃമ്പദ്ദ 25 യൂണ്യറ്റുകളുത നവ മാത്രി സംഗീതോതുപദം 7 മുതൽ 15 വരെ നടത്തും. 7ന് 9ന് തപ സ്യ ജില്ലാ പ്രസിഡന്റ് തിരുവിഴ ജയശങ്കർ ജില്ലാതല ഉദ്ഘാടനം നിർവഹിക്കും.15 ന് 9ന് തിരുന ക്കര ശ്രീകൃഷ്ണക്ഷേത്രത്തിൽ വിദ്യാരംഭത്തിന് സംഗീതജ്ഞ മാ തംഗി സത്യമുർത്തി, എൻ.ശ്രീനി വാസൻ, കുടമാളൂർ രാധാകൃ ഷ്ണൻ എന്നിവർ നേതൃത്വം

കാൻസർ ബോധവൽക്കരണ കാസ്

കോഴഞ്ചേരി • കാരുണ്യ ഹെൽ ത്ത് ഫൗണ്ടേഷൻ പുല്ലാട് സോ ണൽ കമ്മിറ്റി കാൻസർ ബോധ വൽക്കരണ ക്ലാസ് സംഘടിപ്പിച്ചു. ഗവ. ജില്ലാ ആശുപത്രി സീനിയർ കൺസൽറ്റന്റ് ഡോ.എസ്.പ്രതിഭ ഉദ്ഘാടനം നിർവഹിച്ചു. ഡോ. ബെറ്റ്സി എ.ജോസ് ക്ലാസ് എടു ത്തു. സ്കൂൾ പ്രഥമാധ്യാപകൻ എസ്. രമേശ്, കാരുണ്യ ഫൗണ്ടേ ഷൻ സോണൽ സെക്രട്ടറി ജിജു സാമുവൽ, പ്രസിഡന്റ് അജീഷ് കു മാർ എന്നിവർ നേതൃത്വം നൽകി.



പുഷ്പഗിരി മെഡിക്ക<mark>ൽ</mark> കോളജിൽ നടത്തിവരുന്ന സൗജന്യ കാൻസർ നി<mark>ർണയ</mark> പദ്ധതിയായ കാൻ കെയർ അമ്പതാമത് ക്യാമ്പ് ഡോ. സൂസൻ മാത്യു ഉദ്ഘാടനം ചെയ്യുന്നു.

കാൻ കെയർ പദ്ധതിയിൽ ക്വാമ്പ് നടന്നു

തിരുവല്ല: പുഷ്പഗിരി മെഡിക്കൽ കോളജിൽ 2020-2021 വർഷങ്ങളി നടത്തിവരുന്ന സൗജന്യ കാൻസർ നിർണയ പദ്ധതിയാ യ കാൻ കെയർ പദ്ധതിയുടെ അമ്പതാമത് ക്യാമ്പ് ലോക കാ ൻസർ ദിനത്തോടനുബന്ധിച്ചു

പുഷ്പഗിരി മെഡിക്കൽ കോ ഒജ് ഗൈനക്കോളജി വിഭാഗം അ ധ്യക്ഷ ഡോ. സൂസൻ മാത്യു ഉ ദ്ഘാടനം ചെയ്തു.

മെഡിക്കൽ കോളജ് ഡയറക

ർ ഫാ. തോമസ് പരിയാരത്തിന്റെ അധ്യക്ഷതയിൽ ചേർന്ന യോഗ ത്തിൽ കമ്യൂണിറ്റി മെഡിസിൻ അസിസ്റ്റന്റ് പ്രഫ[്]സർ ബെറ്റ്സി എ. ജോസ്, മെഡിക്കൽ ഡയറക്ട ർ ഡോ. ഏബ്രഹാം വർഗീസ്, പ്രിൻസിപ്പൽ ഡോ. ടോമി ഫിലി പ്പ്, കമ്യൂണിറ്റി മെഡിസിൻ വിഭാ ഗം മേധാവി ഡോ. ഫെലിക്സ് ജോൺസ്, ഡോ. വി. വിചിൻ എ ന്നിവർ പ്രസംഗിച്ചു.

ജില്ലാ കളകൂർ ഡോ. ദിവ്യ എ സ്. അയ്യരുടെ സന്ദേശമടങ്ങിയ വീഡിയോ പുഷ്പഗിരി മെഡി ക്കൽ കോളജ് പ്രിൻസിപ്പൽ ഡോ. ടോമി ഫിലിപ്പ് പ്രകാശനം ചെയ്തു.

പദ്ധതിയിലൂടെ മുന്നുറിൽപ രം സ്ത്രീകളിൽ രോഗത്തിന്റെ ആരംഭഘട്ടം കണ്ടുപിടിക്കാനും ചികിത്സകൾക്ക് നിർദേശം നൽ കാനും സാധിച്ചു. പദ്ധതി തുടർ ന്ന് ഒരു വർഷത്തേക്ക് പൊതു ജ നങ്ങൾക്ക് പ്രയോജനപ്പെടുത്താ നാകുമെന്ന് ഫാ. തോമസ് പരി യാരത്ത് അറിയിച്ചു.

ൻകുട്ടി ഉദ്ഘാടനം ചെയ്തു. ബ്ലോ

സാജന്യ വൈദ്യ പരിശോധന 9ന്

ലാണ് ക്യാമ്പ്.. ആദ്യം രജിസ്റ്റർ കാരുണ്യ ഹെൽത്ത് ഹൗണ്ടേ ചെയ്യുന്ന 40 പേരെ ക്യാമ്പിൽ ഷൻ പെയിൻ & പാലിയേറ്റീ പരിശോധിക്കും. ജില്ലാ പഞ്ചാ വും, തിരുവല്ല പുഷ്യഗിരി മെഡി യത്ത് അംഗം ജിജി മാത്യു ഉദ് കൺ കോളേജ്യം സംയുക്തമാ യി സൗജന്യ വൈദ്യപരിശോ ധന ക്യാമ്പ് ജൂൺ 9ന് നടത്തും. അധ്യക്ഷനാകും. പേര് രജിസ് രാവിലെ 9 മുതൽ വാലാങ്കര റ്റർ ചെയ്യാൻ ഫോൺ: ഹിദായത്തുൽ ഇസ്ലാം മദ്രസയി 9847482980, 7025555399

സ്തീകൾക്ക് സൗജന്വ കാൻസർ നിർണയ പദ്ധതിയുമായി പുഷ്പഗിരി മെഡിക്കൽ കോളജ്

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Fri, 27 August 2021 https://epaper.deepika.com/c/62723592

MEDICAL EXHIBITIONS FOR CANCER AWARENESS

Health Exhibitions Conducted as a Part of CANCare Programme (SAMVIT 2.0) at S.B. College, Changanacherry

















Health Exhibitions Conducted as a Part of CANCare Programme (SAMVIT 2.0) at S.B. College, Changanacherry



















Health Exhibitions Conducted as a Part of CANCare Programme (SAMVIT 2.0) at S.B. College, Changanacherry















"We-CAN" - SELF-BREAST EXAMINATION TRAINING

Flyers, Brochures and Certificates of "We-CAN"

Training Programme













Inauguration of We-CAN Training Programme











Training of Trainees (ToT) on Self-Breast Examination as A Part Of We-CAN Programme











Training of Trainees (ToT) on Self-Breast Examination as A Part Of We-CAN Programme











തിരുവല്ല പുഷ്പഗിരി ഡൈിക്കൽ കോളജ് ഹോസ് പിറ്റലും റിസേർച്ച് സെന്ററും ചേർ കാൻസർ നിർണയ പദ്ധതിയുടെ ഭാഗമായി സ്ത്രീകൾക്കായി സ്വയം സ്തന പരിശോ ഉദ്ഘാടനം ഡെപുൂട്ടി ഡിഎംഒ ഡോ. രചന ചിദംബരം നിർവഹിക്കുന്നു.

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കത ൺപ്ര ത്തി ക്ഷി

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പുഷ്പഗിരിയിൽ കാൻ കെയർ കാൻസർ നിർണയ പദ്ധതിക്കു തുടക്കമായി

തിരുവല്ല: പുഷ്പഗിരി മെഡിക്കൽ കോളജ് ഹോസ്പിറ്റലും റിസേർ ച്ച് സെന്റ്ററും ചേർന്ന് നടത്തുന്ന കാൻ - കെയർ കാൻസർ നിർണയ പദ്ധതിയുടെ ഭാഗമായി സ്ത്രീകൾക്കായി സ്വയം സ്തന പരിശോധ ന പരിശീലന കളരി പുഷ്പഗിരി മെഡിക്കൽ കോളജ് സെന്റ് ഹാ ന പത്യാല് ന കളൂരി പുഷ്പഗിരി മെഡിക്കൽ കോളജ് സെനറ്റ് ഹാ ളിൽ സംഘടിപ്പിച്ചു. പത്തനംതിട്ട ജില്ലാ കുടുംബ്യശി യുണിറ്റുകളി ൽനിന്നും മറ്റു സാമൂഹിക സംഘടനകളിൽനിന്നും തെരഞ്ഞെടുത്ത ദേ പേർക്ക് പ്രത്യേക പരിശിലനം സ്തന പരിശോധനയിൽ നൽകി. പരിശിലന പരിപാടിയുടെ ഉദ്ഘാടനം പത്തനംതിട്ട ഡെപ്യൂട്ടി ഡി എംഒ ഡോ. രചന ചിദാബരം നിർവഹിച്ചു. പുഷ്പഗിരി സിഇദ ഫാ. ജോസ് കല്ലുമാലിക്കൽ അധ്യക്ഷത വഹിച്ചു. പുഷ്പഗിരി റിസർ ച്ച് സെന്റർ ഡയറക്ടർ ഫാ. മാത്യു മഴുവഞ്ചേരി ൽ, മെഡിക്കൽ കോളജ് മെഡിക്കൽ ഡയറക്ടർ ഡോ. ഒളുബ്പഹാം വ ർഗീസ്, കുട്യാബ്യരി ഡിസ്ട്രിക്ക് പ്രോഗ്രാം മാനേജർ പി.ആർ, അനു പമ, കമ്യൂണിറ്റി മെഡിസിൻ മോവി ഡോ. ഫെലിക്സ് ജോൺസ്, കമ്യൂണിറ്റി മെഡിസിൻ അസിസ്റ്റർ ഡോ. ചൈറ്റ്സി എ. ജോസ് എ ന്നിവർ പ്രസംഗിച്ചു. ഡോ. സുസർ മാത്യു, ഡോ. വന്ദന വിജയൻ, ഡോ. ബെനിഫ്രൈറ്റ്, ഡോ. ബെറ്റ്സി എ. ജോസ് എന്നിവർ ക്ലാസുകൾക്കും പരിശീല നത്തിനും നേതൃത്വം നൽകി.



Kudumbasree Trainees Training Other Women from their Community on Self-Breast Examination as an Extension to We-CAN Programme



Kudumbasree Trainees Training Other Women from their Community on Self-Breast Examination as an Extension to We-CAN Programme















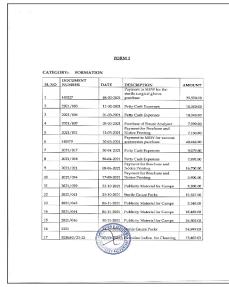


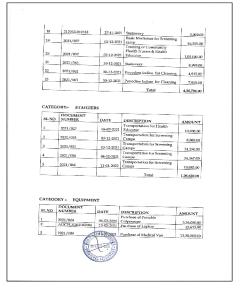
AUDIT REPORTS OF FUND UTILIZATION

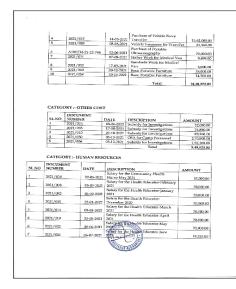
Fund Utilization Audit Reports from 1st Dec 2020 to 31st Dec 2021













Fund Utilization Audit Reports of Final CANCare Project





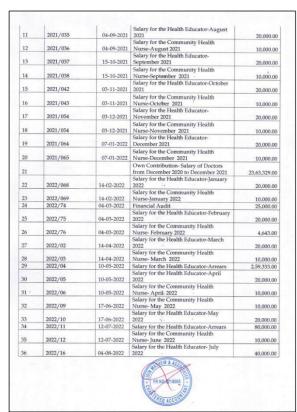




Fund Utilization Audit Reports of Final CANCare Project



	_			IUIAL	22,63,010.00
CATEC	ORY :- H	UMAN RES	OURCES		
		UMAN RES	OURCES		
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2021/00	2	06-02-2021 22-01-2021	Salary for 2021 Salary for December Salary for	the Health Educator-	20,000.00
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2021/00 2021/00 2021/01	2 1 4	06-02-2021 22-01-2021 09-04-2021	Salary for 2021 Salary for December Salary for 2021 Salary for 2021 Salary for 2021	the Health Educator- 2020 the Health Educator-March the Health Educator-April the Health Educator-May	20,000.00 20,000.00 20,000.00
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2021/00 2021/00 2021/01 2021/02 2021/02 2021/02	2 1 4 9 2 5	06-02-2021 22-01-2021 09-04-2021 20-05-2021 08-06-2021 06-07-2021	Salary for 2021 Salary for December Salary for 2021 Salary for 2021 Salary for 2021 Salary for 2021 Salary for Nurse-Jun	the Health Educator- 2020 the Health Educator-March thié Health Educator-April the Health Educator-May difie Health Educator-June the Community Health 2021	20,000.00 20,000.00 20,000.00 20,000.00 20,000.00 19,333.00 10,000.00
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	DOCUM	16 2022/51 17 2022/72 18 2022/53	16 2022/51 17 2022/72 18 2022/53 19 CATEGORY → HUMAN RES DOCUMENT NUMBER DATE	16 2022/51 30-01-2023 17 2022/72 17-07-2023 18 2022/53 16-02-2023 19	Attending Conference for present fundings Attending Conference for present fundings





TESTIMONIES AND FEEDBACKS

Collaborators, Beneficiaries and Doctors from CANCare Camps

✓ We would like to thank Pushpagiri hospital CANCare team for conducting CANCare cancer screening camp and awareness program at Pallickal on 19/1/22. The check-up provided by doctors found satisfactory to us. We wish them all success in all their future endeavours.

Sreeja

(CANCare Beneficiary, Pallickal)

✓ CANCare screening programme conducted at Aryad Gram Panchayath set a positive example for other organizations and communities to follow. It shows that together, we can make a significant impact in the fight against cancer and improve the overall health and well-being of women everywhere.

Annie

(CANCare Beneficiary, Aryad)

✓ Pushpagiri CANCare team conducted more than 6 cancer screening camps in association with Anugraha social service organisation in different areas of Pathanamthitta district.so many ladies underwent free diagnostic tests through the programme. I would like to thank the entire CANCare team for conducting such camps.

Fr. Varghese Chamakkala

(Anugraha Social Service Organization)

✓ The Changanacherry social service organisation wish to appreciates the efforts taken by Pushpagiri CANCare team for conducting 5 camps in different areas of Alappuzha district camps are really helpful to economically poor peoples in our area.

Fr. Thomas Kulathumkal

(Director, Chass)

✓ The CANCare project was proved crucial as it detected the prevalence of cancers especially oral cancers in women of Kerala in their primordial stages which will be highly beneficial and life-saving affair as prompt and quick action could be taken thus facilitating in their future treatment regimen.

Dr Vinod Mulamoottil

(Assistant Professor (Dentistry); CANCare Chief Project Manager)

✓ On behalf of Chunakkara panchayath and the entire team of panchayath members, I would like to thank you for the CANCare camp that we have conducted on 8/1/2022.its being a proud moment for us to serve the society along with such a great team of your doctors and staffs. I would also like to mention that the camp has media great impact in the locality and we have received many proposals from the local people to conduct more of such camps.

Vijayakumar

(Camp Coordinator)

✓ CANCare was an extensive programme which helped thousands of women and their families. As women were tends to prioritise their family members ahead of their own personal health profile, CANCare helped women to prioritise their health and well-being. The WE-CAN programme was incepted with the vision of advocating and uplifting the well-being of women (aged 18-60) with the help of the active participation of social workers from the same community. The programme had a huge awareness and positive impact on the mindset of women concerning their health.

Dr Betsy A Jose

(Assistant Professor (Community Medicine); CANCare Project Coordinator)

✓ The CANCare project provided a free cancer screening forum which proved to be a great boon for the women of socially deprived classes. Their satisfaction was evident from their verbal feedbacks which served as the testimony for the project.

Dr Vipin V.

(Dentist, CANCare Project Manager)

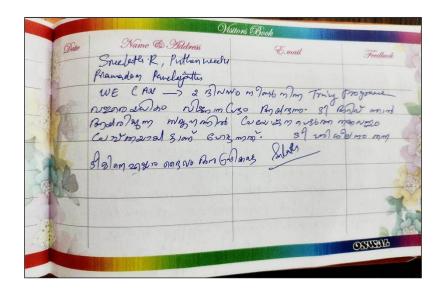
✓ The CANCare program offered free cancer screening for women, and it's a valuable initiative for several reasons. Firstly, regular screenings could detect cancer at an early and more treatable stage, potentially saving lives. Additionally, the program promoted awareness about the importance of preventive healthcare, empowering women to take control of their well-being. By providing these services free of charge, CANCare ensured that financial barriers don't prevent women from accessing critical healthcare.

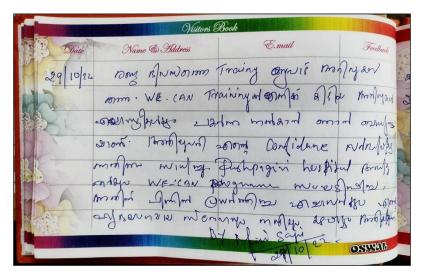
Dr Vipin K. Ravi

(Superintendent (Rural health Training Centre), Chettikad)

Kudumbasree Workers from We-Can Programme

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FINAL REPORT OF CANCare PROJECT

Publisher : Pushpagiri Research Centre

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