

**A Bridge to Better Cancer Care:
Assam Foundation Inc. and Cachar Cancer Hospital and Research Centre, Silchar**

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The Cachar Cancer Hospital and Research Centre (CCHRC), which caters roughly to a population of 10 million, is a 63 bed rural centre located on the outskirts of Silchar town in southern Assam. It was established by members of the local community several of whom had family members with cancer with whom they had to travel to distant places for treatment. It is one of the two comprehensive cancer centers in the North-Eastern region of India.

CCHRC caters to patients from the Barak valley districts of Assam and from the states of Tripura, Manipur and Mizoram. More than 4,000 new and 10,000 follow-up patients are treated annually at CCHRC. Most of the patients are daily-wage laborers and agricultural workers. CCHRC has facilities for chemotherapy, radiation and surgery. It has divisions of pathology, preventive oncology, and pain and palliative care.

A recent Memorandum of Understanding (MoU) with the Assam Foundation Inc. (ASAF) has provided CCHRC a much-needed footing in the United States. The MoU facilitates U.S. based philanthropic fund raising for cancer care in North-East India. Under the auspices of ASAF, a federal income tax exempt organization according to Section 501 (c) (3) of the Internal Revenue Code, contributions to CCHRC by individuals, corporations and other entities are tax-deductible.

In the words of Dr. Chinmoy Choudhury, General Secretary of the Cachar Cancer Hospital Society which administers CCHRC, "Our Hospital offers treatment to many patients who cannot afford

treatment or travel outside the Barak Valley and its surrounding areas for treatment. We aim to improve awareness, create a state-of-the-art facility and establish a research centre."

Cancer Incidence in North-East India

- The incidence of cancer in the North-East is the highest in India, well over the national cancer incidence of approximately 100 to 130 individuals per 100,000 population (Indian Council of Medical Research, New Delhi).
- Assam alone adds roughly 26,000 new cancer patients every year.
- One of the primary reasons for the high incidence of cancer in the North-East is high usage of smoking and non-smoking types of tobacco. Other factors could be dietary habits and environmental factors.
- The average cancer patient approaching a treatment centre in the North-East has low awareness and meager income; faces transportation, communication, and accessibility hurdles; and tends to wait until an advanced stage to see a physician.
- With high incidence and low incomes, the North-East requires more facilities and resources (finances, infrastructure, human resources) to improve cancer care.

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A Palliative Care unit was set up recently at CCHRC with the support of the Indo-American Cancer Association (Houston, Texas). Quoting Dr. H.M. Iqbal Bahar, Head of the Palliative Care unit, "Our program is for a human cause.....What is more important than that.....That you feel the hearts of the people who toss in pain at the dead of the night, who don't have money to have a square meal a day. You feel that a dedicated care like palliative care is required so that patients remain free of pain and other symptoms, live a life with dignity and when they die, they die healed. Many programs come into action and vanish with time. A program that sustains help incessantly for the years to come is the program which will be most needed."

Nearly 60 percent of the patients visiting the hospital earn Rs. 2000 (\$45) or less per month. Recently, CCHRC provided care to an 18 year old young man from Hafflong, an insurgency hit area. He used to drive an auto to support his widowed mother until developing an osteosarcoma (bone tumor) of the lower end of the left femur. He received 6 cycles of chemotherapy and underwent surgery. Through the surgery, we resected the tumor and put in a custom made prosthesis. Sanctuary, a cancer support NGO in Chennai, paid for the titanium alloy based prosthesis. The patient paid part of the cost of chemotherapy and CCHRC supported the rest along with the cost of the surgery. He is driving an autorickshaw again and confident of supporting himself and his mother.



Quoting the father of a 30 year old divorcee, diagnosed with breast cancer, earning Rs. 500 (\$12) per month, "We are glad that the hospital supported the treatment of my daughter. I now have hope that she will be a long-term survivor."

CCHRC believes that offering subsidized or free cancer care does not imply a lower standard of treatment. To continue to provide high quality care to the needy and underprivileged population of North-East India, CCHRC requires your support to improve facilities and expertise.

Current CCHRC Fund Raising Projects

- General Fund: For training and retaining human resources including doctors, technicians, certified nurses and workers
- Infrastructure Fund: For improving infrastructure – both building and equipment (PET-CT, linear accelerator, nuclear medicine, ICU, blood bank and operating rooms)
- Food Corpus Fund: For improving access to quality/safe food and drinking water to both in- and out-patients and families
- Cancer Education Fund: For organizing satellite clinics and home visits for patients lacking access; formalizing a system of phone-based consultation; acquiring an ambulance



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