

Uganda Cancer Institute marks 50 years



Dr. Jackson Orem
Executive Director, Uganda Cancer Institute.

In October, the Uganda Cancer Institute will resume offering Radiotherapy services. This comes after the machine became non functional in April last year, thereafter, patients who needed radiotherapy were referred to AgahKhan hospital in Nairobi.

The Government recently procured a new machine worth sh2.9b from the Czech Republic and the Institute has completed renovation of the bunker where the machine will be installed. The machine recently arrived in Uganda and its installation has started.

At the same time, the Institute is celebrating 50 years of existence at a time when it is set to be developed as the Oncology Centre of Excellence in the East African region.

Lillian N. Magezi caught up with the Executive Director of the Institute Dr. Jackson Orem to ask him what they have in store for Ugandans.

When are you expecting to be through with the assembling of the machine?

By the end of September 2017, we will be through with assembling and installing the machine.

When will it be commissioned for use? When will patients start accessing radiotherapy services?

Commissioning will be done immediately installation is finished and treatment will begin in October 2017.

How will this machine improve the capacity at the Institute?

The machine will enable patients receive tele-therapy treatment both for cure and palliation, thus reducing on the need to refer our patients to other countries for radiation.

Are services free to patients since this is a Government Institution? If not what will the cost for accessing the services be?

Services will be for free, just like any other services within UCI.

There were reports that you bought a second-hand machine

Do not believe rumours that the machine is junk. The entire

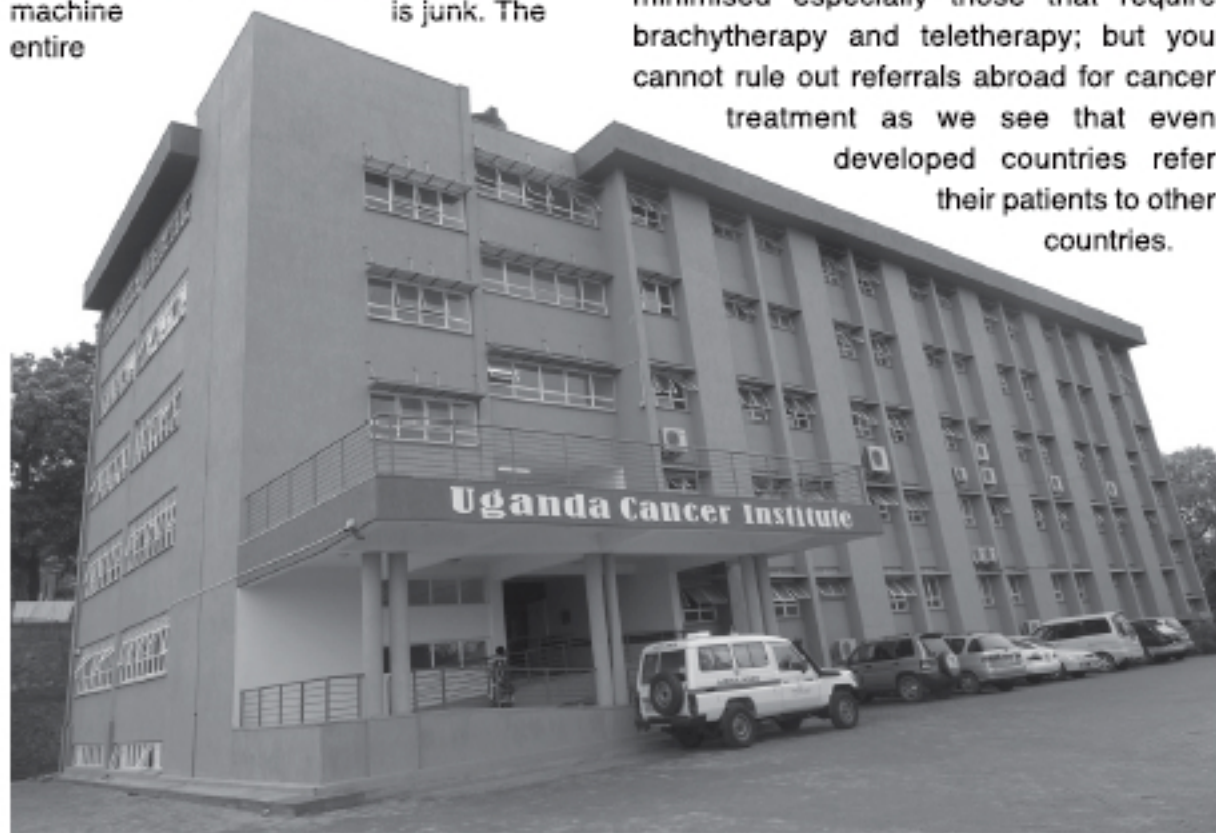
procurement process was done by the International Atomic Energy Agency (IAEA), which is an agency of the UN. It doesn't procure second-hand or used equipment.

Since this is a new machine, does it mean services will differ from how they were with the old machine? How?

Services will differ but not so much, this is a modern machine, with modern technology and the users will be trained on this particular machine. It should be emphasized that this is a new machine not an old one. It was manufactured on request. So the public should be aware that this machine is new not old as some critics are saying.

Will this mean referrals abroad for radiotherapy will be stopped?

Referrals abroad for radiotherapy will be minimised especially those that require brachytherapy and teletherapy; but you cannot rule out referrals abroad for cancer treatment as we see that even developed countries refer their patients to other countries.



Group photo of UCI staff at the Celebrations.

The Uganda Cancer Institute recently marked 50 years of existence; What has been your greatest achievement since you started?

Well, we have had enormous achievements, First, Signing of the UCI ACT; making us an autonomous body is a great achievement. We have had ground breaking achievements in research such as discovering that liver cancer can be treated with drugs, discovering the use of combination chemotherapy and also we were the first to describe infection related cancers in the entire world. We have been able to treat patients from all over Africa.

What is the outcome of the cases you have treated? What is the recovery rate? What accounts for it?

We have 20% survival for adults and 60% for children. This is so because many come for treatment when the disease is advanced. This, therefore, creates the need for regular checkups. We should emphasize that cancer is curable if treated properly and one has presented early enough.

Apart from breast, cervical or prostate cancers; are there other cancers for which people need to do routine tests?

Definitely, those are the commonest though people should check for other cancers like liver cancer and leukemia.

How do those who want to carry-out routine tests access the services? What process do they go through? Do they need a referral from a lower unit?

For routine tests, people come to the screening clinic, which runs every day of the week. They don't necessarily need referral.

Are the tests free to members of the general public?

Yes, although there are some that require a little payment and they are properly stipulated.

How good is the people's uptake of screening services?

People have taken up screening seriously these days, we operate screening clinics on a daily basis, though men are reluctant to screen.

What is your future strategy on how to reduce cancers and death from cancers among Ugandans?

Our strategy will be on awareness. It will help to reduce on the cancer and deaths which occur due to late presentation.