

Sande's immune system remains weak, making him vulnerable

HOW ACCIDENT EXPOSED SANDE'S CANCER STATUS

A bodaboda accident that Steven Sande dismissed as minor would unravel a hidden battle with blood cancer, setting him on a bumpy journey that culminated in Uganda's first-ever locally performed bone marrow transplant, writes **John Musenze**

On April 24, Uganda discharged its first-ever bone marrow transplant patient, 45-year-old Steven Sande. A resident of Nalya hailing from Namayingo district and an employee of Uganda Revenue Authority (URA), Sande's journey to recovery had begun not in a hospital ward, but with a constant mild backache he chose to ignore.

For months, the pain continued and, like many, he treated it with painkillers and carried on with life, unaware that something far more serious was growing inside his body.

"You wake up, you feel some pain, you take a painkiller and go to work. That is how it was," he told *The Weekend Vision*.

It was only after a bodaboda accident at Kisaasi on his way to work that doctors would uncover the truth — a blood cancer known as multiple myeloma had already begun eating into his backbone.

"I had had backache for months and when I got into a bodaboda accident, I hit my back on a paver. I thought it was just normal back pain from the accident. I never imagined it was something serious," Sande said.

After the accident, the pain in Sande's back intensified, forcing him to seek treatment at a nearby clinic, where an X-ray pointed to a possible bone injury linked to the

crash. He was prescribed medication and sent home, but instead of improving, his condition rapidly deteriorated. Within days, the pain became unbearable, leaving him unable to walk and eventually bedridden.

Sande said a Magnetic Resonance Imaging scan revealed something alarming — a crack in one of the bones in his spine — and doctors initially prepared for surgery to fix the fracture.

"The doctors discovered a crack in the backbone. They thought it was from the accident and advised that we proceed with surgery, but our URA staff doctor asked me to first undergo a second test at Mulago and connected me to Dr Fred Okuku, who examined my scan reports and advised that all tests be redone. I was not walking at the time and I went to the cancer institute in an ambulance," he said.

When *The Weekend Vision* asked Okuku why he had conducted the extra scan, he said: "We needed to know whether the injury was purely from the accident or whether there was something underlying, and the results revealed a far more complex picture."

THE BAD, GOOD NEWS

By April 2025, after weeks of tests including a bone marrow examination, Sande was called in for a conversation he would never forget. Doctors told him he had cancer.

Not a typical tumour, but a blood cancer known as multiple myeloma — a disease that originates in the bone marrow and gradually weakens bones from within.

"The accident did not cause the cancer. It only revealed what was already there. My bones were already eaten

up; that is the pain I felt even before the accident," Sande said.

"The day they told me, I thought that was the end. In my mind, I had perhaps one month to live. I had it in mind that cancer cannot be cured, so my question to them was: how long do I have to live?" he added.

By the time treatment began, Sande's condition had deteriorated significantly. The cancer had already weakened his spine, affecting his ability to walk.

"At one point, I was completely confined to bed. From the bed, I moved to a wheelchair," he said.

What followed was a slow and demanding recovery process under Okuku's care. Treatment came in cycles — monthly visits, medication, and constant monitoring — and the progress was gradual but visible.

"Treating cancer is costly. Every week, I had to pay sh520,000 for just seven tablets, but the good thing

THE DISEASE

Dr Okuku said Sande's case is not unique in its symptoms, but it is rare in its outcome. He said by the time Sande was diagnosed, he was at stage three.

"We see between 50 and 100 patients with this kind of cancer every year, but many go undiagnosed for a long time and we believe many people do not know their status," Okuku said.

The disease, he added, often disguises itself as ordinary back pain, leading patients to seek treatment from orthopaedic clinics or physiotherapists before cancer is ever suspected.

"The most common cause of back pain is not cancer. But when it does not respond to treatment, it must be investigated further," Okuku said.

Blood cancer, Okuku said, affects how the body produces and regulates blood cells.

was that I was seeing progress and the pain was slowly disappearing. From the wheelchair, I started walking slowly," he said.

Sande said by August 2025, he had regained enough strength to return to work.

CANCER MIRACLE

By October 2025, tests showed that Sande's cancer was no longer detectable — a state doctors refer to as remission. He recalled that it felt like the end of the journey.

"I was walking again, I was not feeling any pain, the disease seemed to have been suppressed, and I even went back to work. I thought I was done," he said.

However, his doctor, Okuku, called him and told him about a procedure that could offer relief for a significant number of years — a far more complex intervention called a bone marrow transplant.

"This type of cancer has a high chance of returning. We, therefore, needed to consolidate the treatment," Okuku said.

Sande was referred to Dr Clement Okello, a key bone marrow transplant specialist. When he met Okello, he was told that not every cancer patient qualifies for such a procedure.

"The disease has to first be controlled. The patient must be in remission, physically stable, and able to withstand the process," Okello said.

Sande recalled undergoing numerous tests to confirm



The first bone marrow transplant patient, Sande (centre) accompanied by his carers; Sande Wilson (left) and Andrew Ayazika, making his remarks upon his discharge at Uganda Cancer Institute Mulago on April 24



Dr Okello said not every cancer patient qualifies for such a bone marrow transplant

that he met all the criteria from organ function to overall physical strength by early 2026, everything was in place.

On April 2, 2026, Sande was admitted for the transplant, becoming the first patient in Uganda to undergo the procedure locally. He remained in hospital for more than three weeks.

"It was not easy. I stayed in the same room for 22 days without going out or seeing anyone apart from my brother, who was admitted with me to provide company and serve as my carer. This is a great deal the body goes through," he said.

Sande said although the procedures were specialised, he at times felt some pain, but this was managed accordingly.

Okello told *The Weekend Vision* that the bone marrow transplant did not cure the cancer, but it significantly reduced the risk of it returning.

"It helps push the disease much further away — perhaps 20 to 50 years. In some cases, it may never come back," Okello said.

Although Sande was discharged on April 24, he said life has not returned to normal. His immune system remains weak, making him vulnerable to infections.

"I hardly go out these days, and whenever I have to go to the hospital, I make sure to wear a mask. Visits are limited, and I only eat hot, freshly prepared meals," he said.