

**Capacity.** Masaka Regional Referral Hospital has capacity to refer only 100 patients to attend to cancer patients in early stages, urging the public to visit for early screening.

BY MURIEL MUYIYETA

**MASAKA** Health authorities at Masaka Regional Referral Hospital have attributed the increasing number of cervical cancer cases at the facility to late screening.

Statistics from the hospital's maternity department indicate that in cervical cancer cases are registered monthly with majority at advanced stages and can only be referred to Uganda Cancer Institute in Mulago hospital, Kampala.

Cervical cancer screening is offered at Masaka hospital's department of antenatal, child health and gynaecology and other HIV/Aids healthcare services.

According to Dr Gonzaga Ssenyondo, the head of gynaecology department, about 50 mothers are screened monthly, but majority emerge with cancers at advanced stages.

"Out of 16 cancer patients registered monthly, about 10 of the patients have advanced cancers, while many others, especially those between 25 and 30 years, present a pre-cancerous cervical lesion," Dr Ssenyondo told *Daily Monitor* in an interview last weekend.

A pre-cancerous cervical lesion is an abnormality in the cells of a woman's cervix that can develop into cervical cancer if not treated in time.

Dr Ssenyondo says the facility only has the capacity to effectively attend to cancer patients in early stages and those with pre-cancerous lesions.

"Screening people who cannot get treatment appears as wastage of time because even when we refer them to Mulago for radiotherapy, many do not go due to financial hardships and end up dying silently in villages," Dr Ssenyondo says.

He says some cancer patients go back to the facility and resort to palliative care.

Palliative care is an approach that improves the quality of a patient's life facing problems associated with life threatening illnesses through physical, psychosocial and spiritual treatment.

Dr Ssenyondo says the trend of cases is closely linked to HIV/Aids since infected mothers are more prone to cervical cancer and its progression is high among people with compromised immunity.

"That is the reason why we always advise HIV-positive women to embrace early screening so as to detect and contain the disease in case they present pre-cancerous lesions before it spreads fast due to their suppressed immunity," he says.

A research study by Dr Noleb Mugisha, an oncologist specialising in cervical cancer at Uganda Cancer Institute, indicates that despite being on ARVs and having regular care in HIV clinics, HIV positive women usually present cancer at a late stage.

Dr Mugisha says most women who were contacted during their study had been on HIV treatment



**Prevention.** Ms Zaina Nakku Muyanja, a health worker at Wakiso Health Centre IV (left), immunises girls against cervical cancer during a health campaign in the district in December last year.

# Rising cervical cancer cases attributed to late diagnosis

**80%**

**Advanced cases.** At the Uganda Cancer Institute, 80 per cent of women present cervical cancer in advanced stage.

but late diagnosis compounds the low survival rate," he says. Dr Ssenyondo advises youth to abstain from sex and discourages adults from having multiple sexual partners.

In an effort to fight the disease, the government rolled out a vaccination campaign in October

2015 targeting 850,000 girls ranging from the ages of nine to 12 to be immunised against cervical cancer.

By June last year, statistics at Uganda National Expanded Programme on Immunisation indicated that about 381,054 girls (48 per cent) out of the 850,000 national set target, had received the first dose of the vaccine.

Mr Emmanuel Kaggwa, the Masaka District disease surveillance focal person, says by March last year, only 1,627 girls had completed their dose, which is 40 per cent of the targeted 4,056 girls in the area.

## CERVICAL CANCER AT A GLANCE

**Cause:** Cervical cancer occurs is caused by a sexually-transmitted Human Papillomavirus (HPV). As the infection spreads, it causes abnormal tissue growth and other changes to cells within the patient's cervix.

**Symptoms:** Dr Herbert Kalema, a gynaecologist at Masaka hospital, says the signs one should get suspicious of are: foul vaginal discharge, constant bleeding that occurs during sex or bathing and after some time, the bleeding becomes spontaneous. However, he says, many victims tend to ignore the signs until the late stages when

they start feeling abdominal pain, difficulty in passing urine or when they experience weight loss and general body weakness.

**Deaths:** The World Health Organisation (WHO) estimates that in 2014, approximately 3,915 Ugandan women were diagnosed with cervical cancer and 2,160 died from the disease.

The prevalence of cervical cancer in Uganda is at 34 per cent and low screening uptake has resulted in the country having one of the highest cervical cancer incidence rates in the world with 47.5 per 100,000 women every year.

Infections including those from HIV/Aids and Hepatitis contribute about 50 per cent of cancer deaths with 300,000 new cases annually, according to the statistics from Kampala Cancer registry.

**Gaps:** Due to the absence of a national cervical cancer prevention and control programme, the cases and deaths are more likely to increase.

According to WHO project by 2025, about 6,400 new cervical cancer cases and deaths will occur annually unless an attempt is accorded to the scourge.

## briefly

### Leaders decry tree cutting

**IGANDA** leaders in Busoga region have expressed concern over the large-scale cutting of trees in the region. The leaders, including the district council chairperson, have urged the government to take measures to protect the environment and prevent the loss of biodiversity.

### Two held over

**BUKEDEA** Police have arrested two suspects in the killing of a woman in the district. The police are holding the suspects over charges of murder and are conducting further investigations into the case.

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