

## **ESTABLISHING A CANCER CONTROL PROGRAM IN A RESOURCE-LIMITED SETTING; EXPERIENCE FROM AMPATH LUNG CANCER CONTROL PROGRAM.**

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### **Background:**

Like many low- and middle-income countries (LMIC), Kenya lacks the information regarding the epidemiology and actual burden of lung cancer within its catchment. Besides the low level of awareness on lung cancer, the country is compounded with the burden of co-morbidities such as HIV and TB. Implementing a program unique and specific to lung cancer in such a region confers additional challenges, opportunities and experiences that when presented will be key in guiding the implementation of similar programs in the future.

### **Method:**

Through the implementation of the program, direct observation, program based cross-sectional review and retrospective analysis of the program impact were employed. All the stipulated objectives were reviewed to determine the approach used in carrying out the goals and to identify the impact, lessons learnt and therefore the best way to implement a similar program related to lung cancer or otherwise other cancers in similar settings.

### **Results:**

Increased awareness and index of suspicion on suspected lung cancer cases at community and facility levels was realized through sensitization initiatives. Reported incidences and trends on lung cancer increased from an average of 12 per year (2012 - 2016) to 50 per year (2018-2020). Barriers to lung cancer diagnosis, treatment and care were identified and congruent mitigation measures availed. Other risk factors to lung cancer within the region were identified and documented. Estimation of the true burden of lung cancer and the epidemiology of the disease in the region was made possible. A regional population-based cancer registry with reliable sources of mortality data was established.

### **Conclusion:**

Working with communities and other stakeholders while leveraging on existing resources to mitigate barriers and improve access to cancer care is not an option to succeeding. A robust, seamless, coordinated community referral system and awareness will transform health seeking behavior. Besides lack of awareness, socio-economic challenges are among the most outstanding barriers to seeking, reaching and receiving lung health interventions. Enhanced networking and partnership, identification of priority needs

and development of actionable objectives by a program is key to turning proposals into reality and ensuring investments are integrated to achieve the intended objectives.