INCIDENCES AND TRENDS OF LUNG CANCER IN WESTERN KENYA FOR THE PERIOD BETWEEN 2012-2016.

Lawrence Atundo, AMPATH-MTRH Moi School of Health Sciences.

BACKGROUND:

Lung cancer diagnosis has been a challenge in western Kenya due to the technicalities related to screening and diagnostic procedures. The burden in the adult population is largely unknown as most patients are managed for Pulmonary Tuberculosis, since both have similar clinical manifestations. The Eldoret Cancer Registry (ECR) provides statistics and epidemiological profile across western Kenya. The aim of this study was to establish lung cancer incidences in relation to year of diagnosis, age, gender and stage at diagnosis across the Western Kenya region.

Methods:

In this study, a retrospective review of all cases of lung cancer diagnosed at Moi Teaching and Referral Hospital (MTRH) from 2012 to 2016 were identified from the ECR. Census method was used and data on year of incidence, age, gender, stage at diagnosis and county of origin was analysed.

Results:

Out of the 60 patients diagnosed with Lung cancer, there were 11 cases in 2012 representing 18.3%, 2013 10 cases (16.7%), 2014, 12cases (20%), 2015 12cases (20%) and 2016, 15cases (25%). Incidences by age were in the following cohorts; 0-27years 1case representing 1.7%, 30-39years (4) 6.7%, 40-49years (8) 13.3%, 50-59years (17) 28.3%, 60-69years (12)20%, 70-79years (15)25%, above 80years (3) 5%. Incidences by gender: Male had 38cases at 63.3% and Female had 22cases at 36.7%. Incidence by stage at diagnosis; Stage iv (6) 10%, Unknown Stage (54) 90%.

Conclusion:

2016 had the highest incidence and may be associated with the increased awareness on screening services at MTRH. Most cases were between 50-79 years and could be attributed to the slow disease progression and delays in early diagnosis. Higher incidences were in males and may be related to susceptibility to risk factors such as smoking and occupational exposure. There's need for creating awareness and further screening of clients presenting with associated signs and symptoms to enable early diagnosis of lung cancer. Disease staging is essential as most cases were of unknown stage. The findings are key in evaluating the impact of a lung cancer program within the region.