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Experiences in organization of breast cancer facilities in rural India

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India has a population of almost 1.2 billion. Nearly 70% reside in rural and semi-urban areas. Multidisciplinary therapeutic approach is a challenge in these areas because of lack of facilities and socioeconomic constraints. The objective was to initiate facilities for early diagnosis and treatment of breast cancer in these areas. We started our project in a rural area, Barshi in Maharashtra. Mobile vans were designed to reach remote areas with facilities for clinical examination, imaging, lab studies and cytology. Education was imparted for early detection and treatment of breast cancer through charts, one to one talks and videos in their native language. Most women presented in stage III–IV (70%). Nearly all women opted for a mastectomy when indicated. Patients requiring multidisciplinary therapeutic approach were referred to a comprehensive cancer center, in Mumbai. 75% had socioeconomic issues (finances, family issues, distances to travel, stay in metropolitan cities and social taboo of hair loss, post chemotherapy treatment). 20% had disease and therapy related physiologic disability. 43% could not complete therapy. Long term follow-up was feasible only in 1/3rd of patients. Over the years, diagnostic and treatment facilities have significantly improved. The rural center from a humble effort of a simple outpatient has grown into a sprawling community cancer center. Breast cancer patients can now be managed in their local environment. Training and education at all levels has been at the core by manual and technology transfers through the comprehensive cancer center to these rural areas. Women with breast cancer now report early and most complete therapy in their own environment. This effort is easily replicable and can be created in similar terrains for not only breast cancer but also many other diseases in India and other countries. The final culmination and success of this effort is proven by the actual images and success in the rural area where such a transformation has been achieved.



Figure 1: Mobile vans used for the stated objective for breast cancer, in a rural area, Barshi in Maharashtra.



Figure 2: Initial development – availability of only an OPD complex.



Figure 3: A gentle start to a robust end. A fully-equipped cancer center is now available in Barshi.

Biography

Ratna Parikh has completed her Postgraduation in General Surgery from Grant Medical College, Mumbai, India in the year 1994. She worked at BYL Nair Charitable Hospital for 6 years and has trained undergraduate as well as postgraduate students. She worked with Dr. Praful B Desai, Cancer Surgeon and ex Director of the renowned Tata Memorial Cancer Centre, Mumbai. She visited MD Anderson and Memorial Sloan Kettering Cancer Centre's to train in breast cancer. She was bestowed the Fellow of the American College of surgeons in 2012. She has presented national and international papers and published articles and case studies in Indian journals. She is a Coordinating Editor of the book Practical Clinical Oncology by Dr. Desai. She contributed four chapters in the book including on breast cancer. Currently, she is attached to Breach Candy Hospital in Mumbai.

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