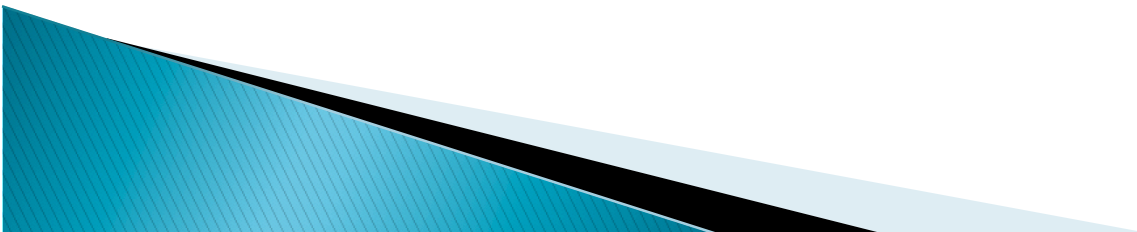


# Breast Cancer Survivorship in Asia: a tale of two cities

Ophira Ginsburg MSc MD FRCPC  
Women's College Research Institute  
Faculty of Medicine, School of Public Health  
University of Toronto



# Breast Health Global Initiative

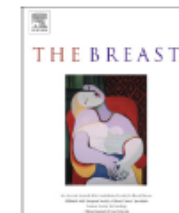
The Breast 22 (2013) 606–615



Contents lists available at ScienceDirect

The Breast

journal homepage: [www.elsevier.com/brst](http://www.elsevier.com/brst)

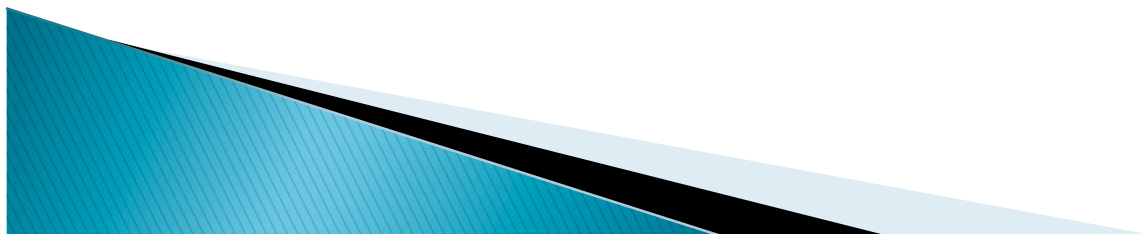


## Review

Supportive care after curative treatment for breast cancer (survivorship care): Resource allocations in low- and middle-income countries. A Breast Health Global Initiative 2013 consensus statement<sup>☆</sup>



Patricia A. Ganz<sup>a</sup>, Cheng Har Yip<sup>b</sup>, Julie R. Gralow<sup>c,d</sup>, Sandra R. Distelhorst<sup>d</sup>, Kathy S. Albain<sup>e</sup>, Barbara L. Andersen<sup>f</sup>, Jose Luiz B. Bevilacqua<sup>g</sup>, Evandro de Azambuja<sup>h</sup>, Nagi S. El Saghir<sup>i</sup>, Ranjit Kaur<sup>j</sup>, Anne McTiernan<sup>d</sup>, Ann H. Partridge<sup>k</sup>, Julia H. Rowland<sup>l</sup>, Savitri Singh-Carlson<sup>m</sup>, Mary M. Vargo<sup>n</sup>, Beti Thompson<sup>d</sup>, Benjamin O. Anderson<sup>c,d,\*</sup>



# Vietnam

Pop 92 million

Lower-MIC

Median age ~ 29

Recent: public  
health insurance  
Includes most BC  
Rx



Chemotherapy Unit: National Cancer Hospital, Hanoi Vietnam

# Prevalence of pain and barriers to pain management in breast cancer survivors in Vietnam

Johnny Nguyen<sup>1</sup>, Tran Thi Tuoi<sup>4</sup>, Ta Va To<sup>4</sup>, Ophira Ginsburg<sup>1,2,3</sup>

<sup>1</sup> Department of Medicine, University of Toronto, Toronto, ON, Canada

<sup>2</sup> Women's College Research Institute, Toronto, ON, Canada

<sup>3</sup> Dalla Lana School of Public Health, University of Toronto, Toronto, ON, Canada

<sup>4</sup> Department of Pathology, National Cancer Institute, Hanoi Vietnam





# Background

- ▶ Breast cancer-related pain
  - Affects quality of life
  - WHO: 80% of world inadequately treated
- ▶ Causes:
  - Tumour invasion
  - Metastasis
  - Iatrogenic (chemo, surgery, radiation)
- ▶ Vietnam
  - Prevalence of pain and management in breast cancer survivors is unclear



# Methods



- ▶ National Cancer Institute (“Benh Vien K”)
  - Vietnam (population: 90 million)
  - 2500+ breast cancer surgeries per year
- ▶ Study
  - 160 breast cancer survivors (40 analyzed)
  - Modified radical mastectomies in 2007
- ▶ Tools
  - Brief Pain Inventory
  - MD Anderson Symptom Inventory
  - Questionnaire

# Results

## Self-reported symptoms 5 years after treatment

	Vietnam	Developed Countries
Pain	62.5%	24–42%
Paresthesia	50%	47%
Memory Impairment	50%	40–69%
Sleep Disturbance	45%	51%
Decreased Appetite	32.5%	40–60%



# Results

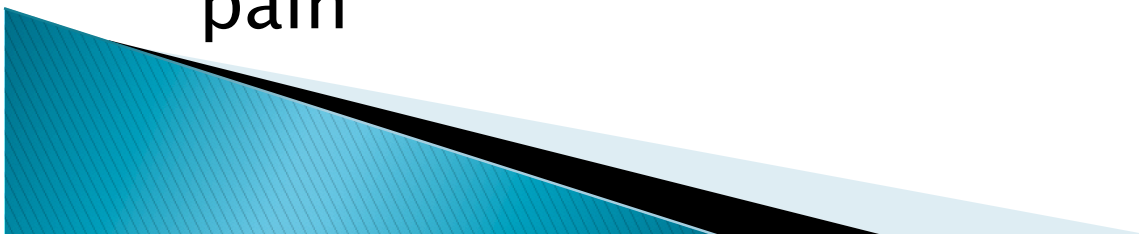
## Barriers to pain management

- ▶ Inadequate pain management (self-reported)
  - Vietnam: 52.5%
  - USA (literature): 47%
- ▶ Reasons:
  - “Pain medications unaffordable”
  - “This type of pain can’t be treated”



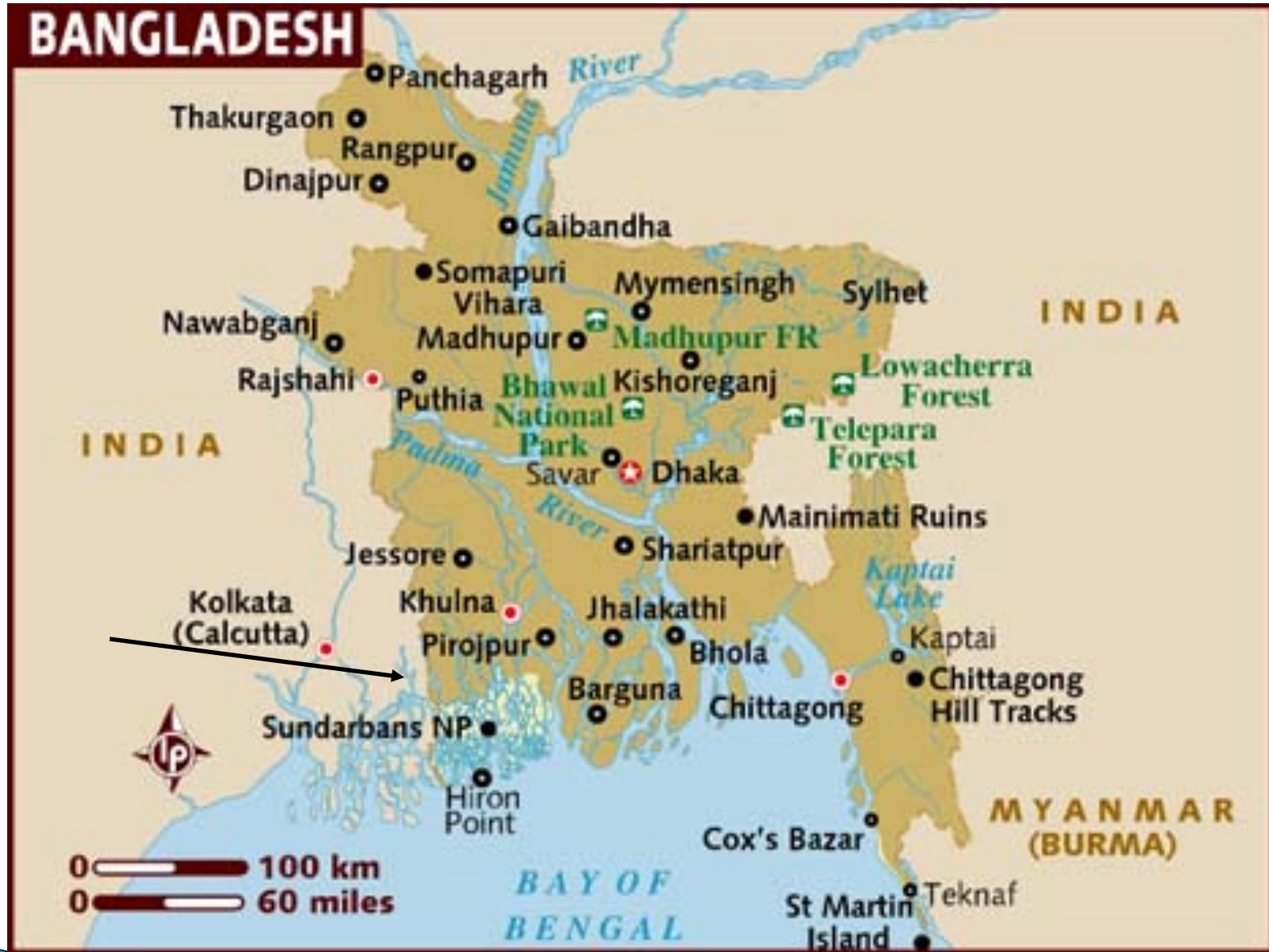
# Conclusion

- ▶ Pain is highly prevalent in breast cancer survivors in Vietnam
  - ▶ Inadequately treated
  - ▶ Barriers: cost, misconceptions regarding pain
- 
- ▶ More research needed on how to improve pain management
  - ▶ Patient education regarding cancer-related pain





# BANGLADESH



# Breast Cancer in Bangladesh

- ▶ Khulna Division:
- ▶ pop 15 000 000
- ▶ 2,000 new cases each year
- ▶ NO cancer centre, NO radiation machines
- ▶ 80% + die of their disease
- ▶ poor quality, unneeded tests, and treatments are ineffective, incomplete

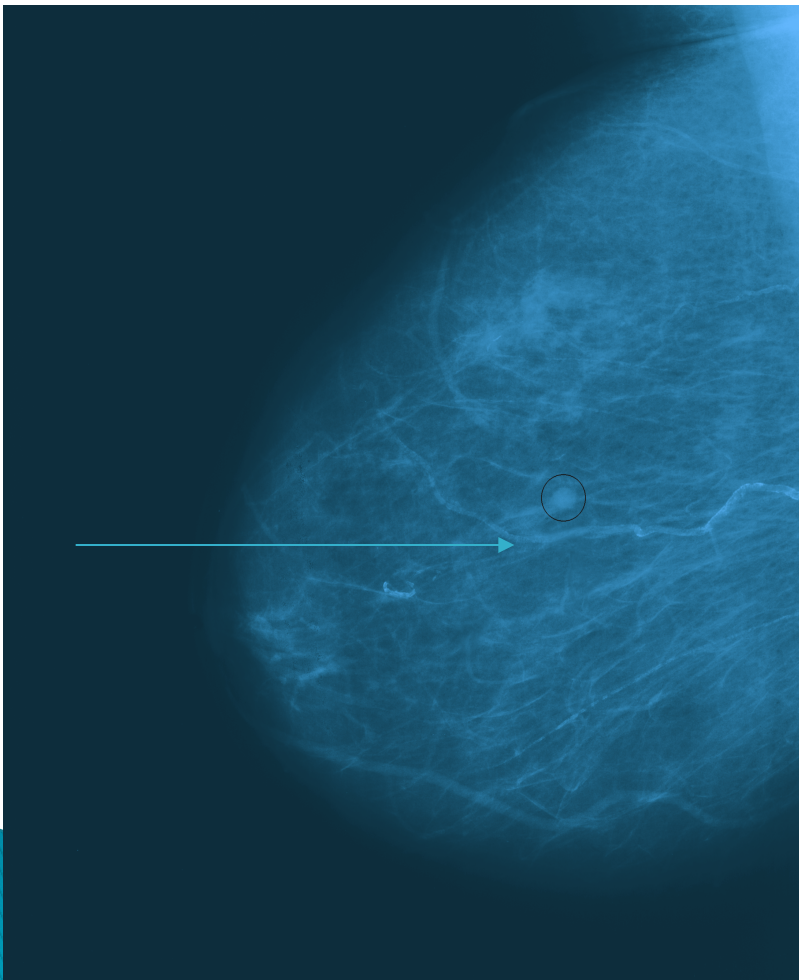


INTERNATIONAL  
BREAST CANCER  
RESEARCH FOUNDATION  
*INNOVATING BEYOND BOUNDARIES*



# Breast Cancer in 2 countries:

Canada



Bangladesh







If you  
build it...

Will they  
come?

# A Learning Lab

*Review Article*

## **Improving Outcomes from Breast Cancer in a Low-Income Country: Lessons from Bangladesh**

**H. L. Story,<sup>1,2</sup> R. R. Love,<sup>1</sup> R. Salim,<sup>3</sup> A. J. Roberto,<sup>4</sup> J. L. Krieger,<sup>5</sup> and O. M. Ginsburg<sup>1,6</sup>**

International Journal of Breast Cancer 2012



“When I told my husband I had breast cancer, he said, ‘I don’t want anything to do with you. You can go die.’”

“breast cancer is a curse” ...a “death sentence”

*If you have never met anyone who has survived breast cancer, why would you believe anything else?*

<http://www.youtube.com/watch?v=76NIVrxPsD8>



# Amader Gram “Our Village” Breast Centre



- Access to care for all, regardless of ability to pay
- Centralized & coordinated care
- Electronic medical records (EMR)
- International telemedicine consultation
- Care based on evidence-based guidelines \*
- <http://agbreastcare.org/>



Weekly breast  
cancer “case  
conference”

Khulna, Madison,  
Seattle, Toronto!

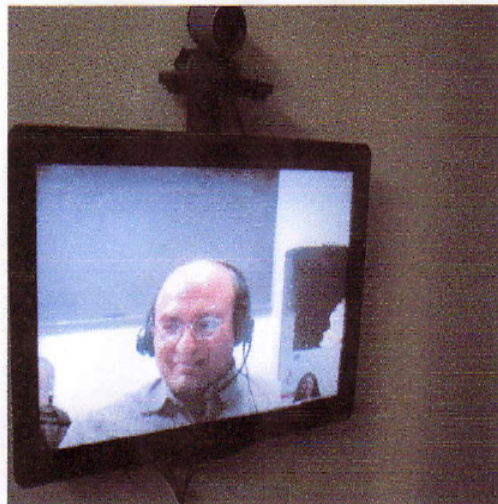


INTERNATIONAL  
BREAST CANCER  
RESEARCH FOUNDATION  
INNOVATING BEYOND BOUNDARIES



The  
country's 1<sup>st</sup>  
web-based  
EMR

\*National  
eHealth  
Award



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# mHealth Solutions for Breast Cancer Case-finding, Referral and Navigation in Rural Bangladesh

Pilot work funded by the  
IBCRF



WOMEN'S COLLEGE HOSPITAL  
Health care for women | REVOLUTIONIZED



*This project funded by:*

Grand Challenges Canada™  
Grands Défis Canada<sup>MC</sup>

BOLD IDEAS FOR HUMANITY.™



# Community Health Workers

## 3-day Training Course (*Khulna, June 2012*)







Women's  
empowerment  
through *social*  
innovation

# Acknowledgements

our study participants!

Reza Salim & Amader Gram

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Imran Chowdhury

Chameli Ahkter

Dr Farah Ahmad

Dr AKM Alamgir

Dr Dali Dutta

Tahmina Ferdousy

Rahela Dipi

Mohammad Golam Mostafa

Yasmin Ashraf

Dr Donald Cole

Dr Paula Rochon

Maureen Kennedy Boelter



## **Public Health And Palliative Care-Why The Link?**

- public health approach is most cost effective –proven
- public health approach ensures equity of access to effective care and prevention of suffering





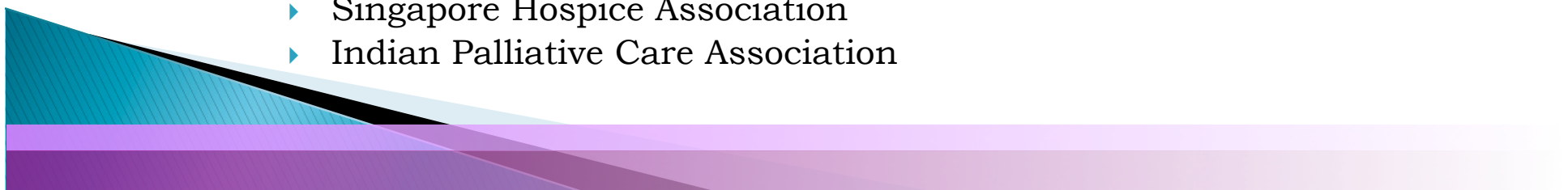
# Palliative and Supportive Care Networks

## **Bangladesh**

- ▶ ASHIC Foundation
- ▶ Afzalunnessa Foundation
- ▶ NICRH (National Institute Of Cancer Research Hospital)
- ▶ BSMMU (BangaBandhu Sheikh Mujib Hospital)
- ▶ **Bangladesh Palliative And Supportive Care Foundation**

## **International**

- ▶ International Association of Hospice and Palliative CareAsso.
- ▶ World Wide Palliative Care Alliance
- ▶ Asia Pacific Hospice Network
- ▶ Australian Palliative Care Association
- ▶ Singapore Hospice Association
- ▶ Indian Palliative Care Association



Dr Rumana Dowla 1<sup>st</sup> palliative care specialist in Bangladesh

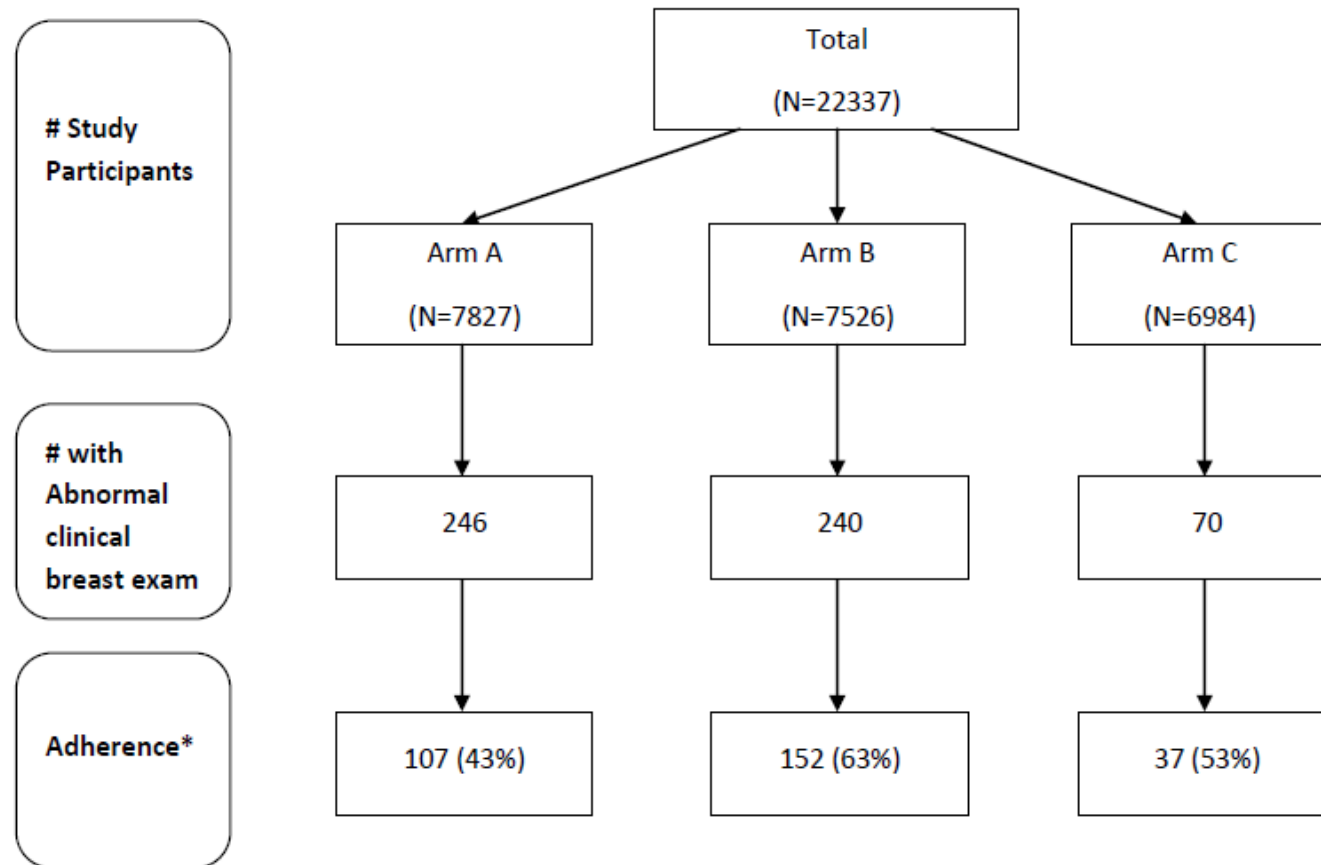




## Study Progress:

- 30 CHWs (all female)
  - 3 CHW supervisors
  - 20 000 women from 30 villages were interviewed in 4 months (July-Oct 2012)
- < 1% declined interview

# RESULTS



Note: \* Adherence = % participants with abnormal clinical breast exam who attended clinic for assessment (include AGBC/Bagerhat and local clinic/government hospital).

(submitted)

# Randomized Trial

- **Arm A:** CHW with mobile phone, apps, video
- **Arm B:** same as Arm A + CHW “navigators”
- **Arm C:** “control” non-mobile arm  
CHWs carry pen & paper; no phone, no video

[http://www.youtube.com/watch?v=hwmyclLK\\_eQ](http://www.youtube.com/watch?v=hwmyclLK_eQ)