

FINAL AND CONDENSED REPORT ON THE HOSPITAL BASE

CANCER CONTROL PROGRAMME FOR

PREVENTION AND CONTROL OF CERVICAL CANCER

BY PAP SMEAR

A W.H.O.PROJECT

NO.SE 06227414.

IMPLEMENTING AGENCY: STATE CANCER SOCIETY OF MEGHALAYA.

PRINCIPAL INVESTIGATOR: DR.JUDITA SYIEMLIH.

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CONCEPTION OF THE PROJECT-

The project was conceived following the WHO- ICMR, a Regional Workshop on Prevention and Control of Non Communicable Diseases at Shillong on September 2005. During the Workshop the State Cancer Society of Meghalaya realized that Cervical Screening by Pap smear for Prevention and Control of Cervical Cancer is a very new concept for this area. The matter was brought to the Governing Body of the State Cancer Society of Meghalaya and directed the Member Secretary to make necessary communication to the consultant WHO.

A first communication was made to the Co- coordinator NCD, Dr. Cherian Varghese regarding the Society's interest to carry the particular project. On the advice and guidance of Dr. Kavita Venkataraman, Coordinator Non Communicable Disease and Mental Health W.H.O for submission of Performa for submitting APW proposal to WHO for undertaking Cervical Screening. The proposal was sent on May 3, 2006 with an approximate budget.

As stated above, for the State of Meghalaya this particular screening project is quite new and we expect that it will yield result and benefiting for the general public. Early marriage, multiparty and multiple sexual partners are very common in Meghalaya. Since this will be an intensive, time consuming, it was decided (with advice from WHO) to concentrate the project in and around Shillong city with a population of 3, 41,168 female (all ages). More so, because all the major Hospitals are within the city limits and all the NGO's are operating in the city itself.

On July 25, 2006- A Governing Body Meeting of the State Cancer Society of Meghalaya was held in the presence of the Principal secretary H & FW and the Chairman of the State Cancer Society of Meghalaya and all the Executive Members of the Society with special invitation to the Medical Superintendent of Ganesh Das Hospital, Shillong and Pathologists. The members of the Governing Body of the Society whole-heartedly welcome the project and directed the Medical Superintendent of Ganesh Das Hospital,

Shillong to co ordinate with the Member Secretary of State Cancer Society of Meghalaya, Gynecologists and Pathologists to chalk out the detailed programme and to set up two Pap smear center at Ganesh Das Hospital, Shillong and Civil Hospital, Shillong.

August 1, 2006- a meeting was held with the Member Secretary of the State Cancer Society of Meghalaya, Gynecologists and Pathologists under the leadership of Medical Superintendent of Ganesh Das Hospital, Shillong. It was unanimously agreed to start the project at the earliest, after obtaining of funds from WHO. The following decisions were taken:-

- a. Training of Personnel: The members felt that Clinical training should be stressed upon and modification of the prescribe format was suggested as follows:
 - a. Most of the ANM's and MHO's have theoretical knowledge on Cervical Cancer and some Clinical experience from the previous Training programmes. It was decided to train ten (10) Doctors and ten (10) ANM's per day on separate days as well as training on Palliative Care.
 - b. Scientific Committee was formed consisting of the Member Secretary of State Cancer Society of Meghalaya and Gynecologists of Ganesh Das Hospital, Shillong.
 - c. Awareness Programme: The Society and the members of the Scientific Committee will jointly hold awareness programme in Doordashan Kendra (DDK), All India Radio (AIR), Local Print and Electronic media.
 - d. The Medical Superintendent of Ganesh Das Hospital, Shillong request financial support for Pathological materials including Cytobrush and Vagina Speculum.

RECRUITMENT OF MAN POWER:

After the direction of the Governing Body to start implementing the project, Man Power was recruited. (Annexure 1)

The first DD was received on August 8, 2006 as a first installment.

TRAINING.

Module of Training:

- a. One day Programme per batch.
- b. Time: 9 AM-5 PM.
- c. Venue: Ganesh Das Hospital, Shillong.
- d. Schedule:
 - 9 AM-1 PM- Clinical and hands on experience on PAP smear taking, fixation, drying and depositing of the slides to the Laboratory.
 - 1PM-2PM- Lunch break.
 - 2PM-5PM-Includes Theoretical lecture on PAP smear and Cervical Cancer, ask question and answers and discussion in general and how to organize Pap smear Camp in particular. Experts are the Gynecologist, Oncologist and Pathologist.
- e. Number of batches:
 - ANM's- 3 batches.
 - Medical Officers- 2 batches.
- f. Training on Palliative Care- One (1) day in the presence of the District Commissioner of Jaintia Hills.

(Annexure – 2)

IEC ACTIVITIES:

Pamphlets, signboard was prepared by the Member Secretary of the State Cancer Society of Meghalaya and approval was taken from the Scientific Committee. Following the approval of the Scientific Committee, mass production of the pamphlets was done and printing materials was received by the Society in October 2006.

Sign boards in English and local language were displayed in many prominent places of the city, Hospitals campus etc.

AIR programmes like live phone in, script reading and discussion were held. From live phone in we could gather that the people are quite curious to know regarding the Pap smear programmes and good feedback was received.

A DDK programme in the form of panel discussion was held on one occasion only. Health write up in local newspaper was contributed from the Scientific Committee.

There was good coverage by DDK, local media (electronic and print media) during the inauguration programme and Pap smear Camps.

METHODS OF DISTRIBUTION OF IEC MATERIALS.

- A. Due permission was sought from all the heads of Government Hospitals and Private Hospitals to keep and distribute pamphlets to attending patients. Pamphlets were kept in the reception counter of Hospitals. In Government Hospitals pamphlets are available in doctor's room.
- B. Pamphlets were distributed from the main reception i.e. one pamphlets were given to each adult female patient. Pamphlets were also displayed in the main reception in Government and Private Hospitals.

- C. From time to time pamphlets were distributed to indoor patients and sensitization was done at the same time. Posters were displayed in prominent areas of the hospitals.
- D. Pamphlets are available in all the CHC's, Dispensaries and Health Centers in the jurisdiction of the DMHO of East Khasi Hills. From time to time indent request was received from the DMHO East Khasi Hills.
- E. Regular Health talk by Health nurse was done in Hospital through the establish PA system.
- F. Permission was granted by the Heads of the institution of Civil Hospital, Shillong and Ganesh Das Hospital, Shillong to sensitize indoor female patients and attendants for Pap smear.
- G. NGO's collected pamphlets on a regular basis.
- H. Pamphlets and Booklets were gifted to doctor working in rural areas, prominent personality, media houses, and public representative. Some schools had come to collected pamphlets to be kept in the School's library.

OUT REACH ACTIVITIES.

CAMPS:

Inauguration camp, September 5, 2006
at Civil Hospital, Shillong.

Purpose of the Camp:

As stated, this programme is new and unheard of in our State. To create awareness and sensitization the public the Society decided to have an inauguration of the first camp.

Activities before the camp:

Due permission was seek from the Governing Body of the Society. Since the allotted fund from WHO is insufficient for inauguration of the camp sponsor for the same was obtained from one company. Through this combine fund, hands out in large

numbers were printed and distributed in all the hospitals of the city, general public in and around the city and announcement through All India Radio for three (3) consecutive days.

Outcome of the Camp:

Comparing the activities taken prior to the inauguration of the Camp the turn out of patient for PAP smear is dismal.

REMAINING CAMPS.

ACTIVITIES BEFORE THE CAMPS. (Photo page no.11)

Different organizers undertook activities differently.

1 DMHO's EAST KHASI HILLS.

First of all a date for pap smear camp was fixed with the Society 4-6 weeks in advanced and they start their camping as follows:-

- A. Under the jurisdiction of the DMHO's East Khasi Hills, the doctors sensitized their health workers, ANM, GNM, ASHA, regarding the purpose of the camp. The doctors in turn ask them to sensitize the public and distributed the pamphlets to each and every household under their jurisdiction.
- B. To get an agreement how many are willing to come for the Pap smear camp.
- C. Target groups were encouraged to come forward.
- D. Camps were usually fixed on local market days.
- E. Estimated number of patients was intimated to the Society, sometimes over estimated and sometimes under estimated.

2. NGO'S, VILLAGE DURBARS, MISSION.

- A. Fixation of the date to hold the Pap smear camp.
- B. Office bearers of those NGO's will hold discussion with any of the Scientific Committee members regarding the purpose of the camp and its importance.
- C. Pamphlets were given after their willingness to conduct the camps.

- D. The NGO's will hold a meeting with the women and sensitize them. Some NGO's are so effective that all ladies came, allowed to be tested and seek permission if they could leave, that's it, as easy as that.

3. VILLAGE DURBARS.

- A) Village durbars are usually run by men folk. Though they involve the women organization of the village.
- B) After fixing the date for camps, the Durbar will make it as a Durbar's order for all targeted women to attend the camp with out fail. It did work.
- C) Distribution of pamphlets is done during the camp only.
- D) In this case arranging of the selected venue is difficult and consumed a lot of time. Our team reached the areas 1hour before the appointed time.

MISSION.

- A) The date for camp will be fixed much in advanced.
- B) The Missionaries organizing the camp will have expert like Nurses, Doctors and Health workers. In some areas, their system of health care deliveries is better than of the state government.
- C) The society did not face much problems and resistance whenever camp was held with the Missionaries.
- D) They will announce in their various churches regarding the camps and request the people to come and take advantage of the service offered by the W.H.O. through the state government.
- E) Camps organized by the Mission have the highest turn out.
- F) Pamphlets, booklets were distributed on the day of the camp only.
- G) Health education during the camps is excellent, with proper seating arrangement, PA system etc.

PREPARATION BY THE SOCIETY BEFORE EACH CAMP.

The following activities are being under taken by the Society before each camp.

- A) Even if request come from the organizers, the society will write to them officially, stating the requirement for the camps, target group, venue for Pap smear, availability for sterilization facility, reception area, counter for distributing medicine etc.
 - B) Depending on the request of the organizers pamphlets, booklets, banners were sent to them before hand.
 - C) Again depending on the request of the organizers meeting with them were held to clarify points, to alley fears and to discuss in details what is Pap smear; as they in turn will talk to the people.
 - D) One day before the camp there was always a flurry of activities in our office, staffs packing in big cloth shopping bags instruments, medical representatives dropping in samples, packing of pamphlets, booklets, pillows, bed sheets, bed covers, buckets, mugs, gas burner etc.
 - E) Last minute coordination with NGO's, Hospital, transports authorities for the same.
 - F) We leave for the camps early in the morning so as to reach the camp 1-hour before the camp's time.

DURING THE CAMPS

- A) After preparation was completed, registration starts, with filling up of Pap smear forms, distribution of pamphlets, booklets.
- B) Eligible women were directed to the Testing room. In the testing room, a trained nurse, laboratory technician and a doctor will be present. The organizers will be always around, so that the people will feel more comfortable.

- C) Medicine including were distributed by the Pharmacists of those Institutions or Pharmacists on request. Medicines for Pediatric were distributed as well, as many women will come along with their kids and babies, seeking medical attention.
- D) There is no tea or lunch break. Since our staffs take their own Tiffin. The staffs take their Tiffin in turn so as not to disturb the Pap smear testing and flow of patients.
- E) Health talks – in all the camps we take the opportunity to create awareness about cancer in general and prevention of cervical cancer by Pap smear in particular. Some organizers organized Official functions and some organizers organized it differently. On one occasion cancer awareness were given to all the schools students as well.
- G) All patients were tested and queries were answered. The patients and organizers expressed satisfaction and sometimes surprise at the good patient's attendance and their cooperation.

FACILITIES DURING THE CAMP: (Photo page no.24-27)

All the organizers will try to make every thing ready. But our staffs have to organized every thing, carrying beds and bed sheets from room to room, hanging curtain here and there. The arrangements is very frustrating sometimes and very hilarious at times. On one occasion the Health center is much closed to the graveyard, banners were hung adjacent to the tomb and in Umsning and Kynroh's camps there was so much of preparation from the organizers side; where sterilization of Instruments was done on an Aluminum pot of more than 50liters.

Nurses, Pharmacists, Receptionist were provided as when asked for by the Society.

Number of Camps organized: (Annexure – 3)

AREAS COVERED:

Much more areas and districts were covered than indicated in the APW proposal. Camps were held as far as 60 to 70 Kilometers away.

Other Districts: Camps were held under the jurisdiction of the DMHO of Jowai and DMHO of Ri Bhoi District.

Target groups: By 30 yrs of age, married for the last 3 years and women with c/o persistent white discharge.

OUTCOME.

Overall satisfactory to very satisfactory: There is always exception to the rule, for e.g. the Camp held at Nongkrem Health Center, where the women organization was brought in. There are about eighteen (18) volunteers (ANM's, Asha's, Health Workers, Members of NGO's etc.) working and sensitized people in their own areas and all of them were present during the Official function. Whereas less than ten (10) patients turn up for the Pap smear test.

Results and Reports:

- a. Number of attendees: - Pap smear Center

Total	Refused	Pap done	Pap not done
244 nos.	NIL	240 nos.	4 nos.

- b. Number of attendees: - Camps

Total	Refused	Pap done	Pap not done
1831 nos.	22 nos.	1614 nos.	146 nos.

- c. Number of attendees from the target group: - Pap smear center

30 years of age	Married for the last 3 years	C/o persistent white discharge.
174 nos.	223 nos.	183 nos.

- d. Number of attendees from the target group: - Camps

30 years of age	Married for the last 3 years	C/o persistent white discharge.
1189 nos.	1549 nos.	1265 nos.

MODALITIES FOR REFERRAL, FOLLOW UP AND TREATMENT.

1. During the Camp: Highly suspected cases, punch biopsy was taken wherever feasible. Those unfeasible cases (bleeding, infection, unwillingness of patient) were referred to one of the Pap smear Center. Unsuspected cases with infection were given anti biotic and ask to report at a given date to the Pap smear Center. Menstruating women, post natal women were ask to report to the Pap smear Center at a specific time frame.
2. All reports were sent to the organizers with an advice. Patients in and around the city were asked to personally come and get their own report. Any treatment, repeat Pap smear etc. were done at the same time. The organizers were asked to keep the address of those patients with CIN of any grade. This is done to maintain contact with the patient and not to lose patient on follow up.
3. Non- CIN cases were asked to come and repeat Pap smear after one year.

4. CIN I, II, & III:

All CIN I, II & III were ask to get a repeat Pap smear without fail. During the examination on the 2nd Pap smear test if the Cervix looks suspicious punch biopsy was taken along with Pap smear Test. If the Test turns out to be CIN of any grade the patient was referred for Colposcopy directed biopsy (in private institution). In CIN high-grade lesion no repeat Pap smear was done, instead a Colposcopy directed biopsy was performed.

5. There are 379 cases, which are suspicious lesion. Total numbers of confirm Carcinoma Cervix is fifteen (15). Thirteen (13) cases positive by Pap smear and HPE and 2 cases positive by HPE taken during the camp. Out of fifteen (15) cases thirteen (13) cases were successfully treated at Civil Hospital, Shillong and one (1) case wished to be treated at AIIMS where surgery was done in that Hospital, and Post Operative Radio Therapy was done at Civil Hospital, Shillong. One (1) case refused treatment (from Jaintia Hills)

ACTIVITIES FOR PALLIATIVE CARE:

- Palliative care given without morphine.
- Intimated the concerned authority for the same. Request the WHO to write to the Chief Secretary, Govt. of Meghalaya for the need of full fledged Palliative Care, they will take immediate action. Request from our side tend to be ignored always.

STATUS AS OF TODAY.

The two Pap smear centers are running smoothly. The whole service has been merging to the routine activities of the hospital. Patients are coming and some days it is quite a busy pap smear OPD.

CONSTRAINTS:

1) Camps:

As informed earlier camps were completed with great difficult. In spite of those difficulties we had managed to perform more camps than prescribed. We are slow in sending report due to the sudden paucity of staffs. I hope that you will consider for us again for any future programme.

2) Man Power:

As per your direction all staffs were discontinued from June 2007, which has caused the delay in sending this report.

COMMENTS AND REQUEST AND REWARD.

- The public is well aware of Pap smear and its importance. In the Pap smear center ladies are coming forward on a daily basis for Pap smear.
- The State Cancer Society of Meghalaya receives request for Pap smear Camps on a regular basis, which we cannot oblique for all due to financial constrain. We have completed 25 camps.
- The State cancer Society of Meghalaya decided to use the balance amount of Rs. 43, 321.00 (Rupees Forty Three thousand Three Hundred Twenty one) only for Pap smear Camps and request the W.H.O to grant permission at the earliest.
- The State Cancer society of Meghalaya received a Certificate of Appreciation from the Rotary Club of Orchid International, Dist. 3240 'for the dedicated service to the people of Meghalaya in conducting free screening and test for married women'.

OPINION:

Ideally the project should be implemented in the whole state of Meghalaya. But this is easier said than done, because with out help and guidance from Interest organization like the W.H.O. the state government will not be able to do. It is a very intensive, time consuming and need a lot of dedication. If we could carry on this project for 5 years the number of cervical cancer of the cervix will be diagnosed in a very large scale and the number of cancer cervix will come down automatically.

ANNEXURE-1

MAN POWER UPTO 31ST MAY, 2007.

Sl.no	Staffs	No.of staff	W.E.F
1.	Medical Officer	1(one)	November,2006.
2.	Staff Nurse	2(two)	September, 2006.
3.	Lab Technician	1(one)	September, 2006.
4.	Computer operator cum LDA cum Receptionist	1(one)	August, 2006.

ANNEXURE-2.

S. No	Nature of training programme	No of such programmes held	Category of staff	No of staff in total
1	Slide/tissue preservation and Pap smear procedure.	2 programmes of one day duration each (proposal for one day programme)	Medical officers of DMHO's, East Khasi hills, Ganesh Das hospital.	15.
2	Pap smear	3 programmes of one day duration (proposal for one day programme)	ANM's	19
3	Palliative care	One day programme.	DC of Jaintia Hills, DMHO's, Jaintia hills, doctor i/c of Three districts, Mission Hospital M.O, M.O. of Jainria hills and NGO's.	40 M.O. and 5 NGO's

ANNEXURE-3

NUMBER OF CAMPS.

1. **Civil Hospital Shillong – 5th Sept. 2006.**
2. **Umroi Dispensary – 14.02.07.**
3. **Umktieh Village – 20.02.07.**
4. **Sohiong CHC – 14.03.07.**
5. **Jowai Dispensary – 16.03.07**
6. **Smit Dispensary – 20.03.07**
7. **Madanriting hall – 23.03.07.**
8. **Mawiong CHC – 28.03.07.**
9. **Nongkrem CHC – 03.04.07.**
10. **Mawsynram PHC – 10.04.07.**
11. **Mawlai Dispensary – 12.04.07.**
12. **Umroi Dispensary (2nd Camp) – 14.04.07.**
13. **Umsning Dorbar Hall – 21.04.07.**
14. **Mawpdang – 24.04.07.**
15. **Nongspung PHC – 26.04.07.**
16. **Kynroh – 03.05.07.**
17. **Sohryngkham Dorbar Hall – 09.05.07.**
18. **Mawkyrwat Dispensary – 12.05.07.**
19. **Mawphlang PHC – 16.05.07.**
20. **Nongmynsong Hall – 17.05.07.**
21. **Wahlang Hall – 23.05.07- sponsored**
22. **Garikhana – 26.05.07- sponsored.**