Children with Cancer in Malawi

UK Registered charity no. 1111112

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Winter 2012-2013 Newsletter

That was 2012....

Another year has flown by but one in which the generosity of all of you has enabled further improvements in the treatment of children with cancer in Malawi. Firstly, a huge 'Thank You' to you all from Professor Molyneux and her team; the world remains in financial recession but there has been no let up in your contributions. Again, a special thank you to the St. Andrews parishoners for their amazing and sustained giving.

There have been many exciting developments this year. These have included the continuing improvement in treatment of children with acute leukaemia. The second Malawi protocol was introduced at the end of last year, which so far seems to have reduced the problems the children were having in the first week of treatment. We have continued to supply an increasing number of chemotherapy drugs, both in amount and type, as new treatments are introduced. We have also sent stronger anti–sickness drugs (ondansetron) as some children were being sick with their chemotherapy, and some not responding to the drugs they were being given.

We continue to fund some of the nurses, including Sister N' Gonga (the St Andrews nurse – see her article later in the Newsletter). The nurses have really enjoyed having Hannah (one of our Trustees and an oncology nurse – see article in our last Newsletter) in Malawi for a week, and Hannah has helped them enormously with suggested enhancements to theor practice. These include safer administration of chemotherapy and the development of a drug room to make up the drugs from their powdered form. She has also taken out special chemotherapy gowns and eyewear paid for by CCM.

For some time, Professor Molyneux has had trouble getting quick diagnostic answers on the samples she takes from the children to decide what tumour they have. In May, CCM purchased a special camera that fits on the top of the microscope in Malawi, that enables Professor Molyneux and the team to take photographs and send them instantaneously to Newcastle for opinions. Dr. Carey (our haematologist) and Dr. Wadhera (cytologist) look at the slides in Newcastle and we generate a report to help guide treatment. This is usually done within 24 hours. Since May, we have looked at slides from over 70 children and ths has been a major help to the Malawi team.

Another new piece of equipment which has been a big help is the analyser that looks at blood salt levels. These results are needed very quickly as the children are often very sick and the results help give the right amount of fluid and treatment. Until recently, the team in Malawi have had to wait up to a week for these results, instead of the 10-30 minutes now achieved. Professor Molyneux found a machine in Blantyre that was brand new, but unused because it needed very expensive cartridges. Luckily, we managed to convince the company that makes the self-contained cartridges (that each last 3 weeks) to provide them to us at 10% of the cost price, which has enabled CCM to afford to buy them. Since they have

arrived, the instant results that the team get have revolutionised the ability to give the right treatment and have helped save childrens lives.

For those that have followed the exploits of Mr. Banda, the travelling nurse of the motorbike fame, he continues to do the same wonderful job but is also studying for his Masters degree in palliative care, which will help him manage the children around the country for whom no further treatment is possible.

Finally, we have also sent out the annual box of toys to Malawi, carefully chosen by our Chairman, Ian Sharkey and his wife, Joan. The children will be very excited when they arrive, and ich Betty the play therapist will use them to keep the children occupied.

We wish you all a Happy Christmas and thank you making 2012 a better year for the children in Malawi.

Zikomo Nduthi.

The Children with Cancer in Malawi Trustees.

Highlights of my year

By Sister Emily Ng'onga, St. Andrews Nurse.

The ward has been very busy all year through with so many activities, extension of the ward, decoration of the ward, decoration of the walls which looks so beautiful and paintings etc. We have a special room for constitution of chemotherapy drugs and we received protective wear against cytoxic drugs e.g. gowns (long) gloves goggles.

On 15th February, Children's Cancer Day, some of the children visited southern bottlers company where our squash is made. Children were very happy and it was a good day. The visit by Hannah, was very helpful because she was the one who brought us some protective wear and we nurses had a short training within the ward as a continuity of how we can take care of ourselves and how to give the chemotherapy. Dr. Simon and Dr. Trijn, we had a good time since they promised to continue assisting the cancer patients.

Number of nurses is still the same (5) its very tiresome, if possible we would like to have two additional nurses so that our work can be a bit easier.

Some children are cured completely, but some end on palliative care. For pain control palliative care and oncology nurses work hand in hand. We have a more extensive range of drugs to treat with and some make children more sick and they require extra anti-emetics and nursing care.

We thank you all for your help and care for the children on our ward. Your toys gave them fun your drugs treat them, your support of us nurses provides for their care.

May God bless you.

Sister Ng'onga.

Dr. George Chagaluka

We had some really good news a few months ago, Dr. George Chagaluka, a wonderful Malawian doctor who is training to be a paediatric oncologist, passed his specialist exams and is going to Cape Town for some additional oncology training. It is really exciting for the future of paediatric oncology in Malawi, that a young Malawi-trained oncologist will be joining the team on permanent basis. We asked George to tell us a little about himself…..

INTRODUCTION: I am Dr. George Chagaluka and am currently working as a Paediatrician at Queen Elizabeth Central Hospital. I am married to Angella and we have two children, Jerome and Hazel. My original home is in the Northern part of Malawi while my wife comes from the Southern part. I like gardening when am not in the hospital.

WHY DID I BECOME A DOCTOR?: My Dad was the biggest inspiration to what I am today. He trained as a Medical Assistant and worked in South African mine as a Paramedic for seven years. Upon his return to Malawi, he emphasized the fact that he would see to it that I became a doctor. I never took his statement seriously until I reached my turning point. While in secondary school, I developed chicken pox (varicella zoster). I developed fever and itchy rash. The itching became so bad that I decided to seek treatment at the nearest District Hospital. Upon arrival at the hospital, the outpatients was deserted. There were no signs of medics and yet it was during working hours. I spent the whole afternoon scratching itchy varicella. At this stage it became very clear to me that I would become a doctor.

Having seen it all, becoming a mere doctor was not enough. The passion expressed by Paediatricians during the care of patients always fascinated me. With help of the Head of Paediatrics Department, the Molyneuxs and my colleagues, God guided me to become one.

MY JOURNEY: The journey is still on. I have embarked on an Oncological Journey to help countless Malawian Children who are suffering in silence due to the lack of a Paediatric Oncologist in the country. The Malawian children who are suffering due to a lack of awareness of Paediatric malignancy. Yes, this is my journey.

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