Children with Cancer in Malawi

UK Registered charity no. 1111112

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Summer 2020 Newsletter

A Summer of Uncertainty in Malawi...

We would like to thank you for your amazing continued support to the children with cancer in Malawi. These are worrying times for everyone, with the future uncertain for all of us. We are thinking of all of you and your families and hope they are safe.

It is safe to say that high income countries are struggling, but the effects are potentially much more devastating in low income countries such as Malawi. The medical facilities will struggle to cope with COVID-19 as they operate on the limit all of the time. For example, there are 11 intensive care beds in the whole of the country for 18 million people (and not at UK specifications either). Most of the charities that have workers in Malawi have withdrawn their teams and the extra support so vital in the health service has diminished further. Personal protective equipment (PPE) will also be in short supply and the difficulties in getting essential medicines in to the country is even more difficult, with many countries' borders closed. In addition, locking down such as we have done in the UK will result in widespread starvation as most people rely on casual employment to gain money to buy food. There is no social care system to supply essential money to feed families. Our thoughts are very much with the people of Malawi.

However, with the levels still relatively low, the hope is that the outbreak will be contained. Dr Chagaluka and his team are continuing to offer the same level of care and are taking extra precautions against infection. Our support of them is even more vital at this time. The remote pathology service supplied by CCM remains very much in use. CCM has also agreed to pay for a half-time oncology pharmacist, who will improve the safety of delivering chemotherapy drugs and ensure that adequate supplies of chemotherapy agents are available. Rachael has worked in Oncology before and was previously volunteering short-term in the unit. Despite all the uncertainty, the team are motivated to provide the best possible care for children with cancer.

Thank you once again to all of you, especially to our friends at St. Andrews. Your support makes a big difference to the children and staff in Malawi.

Zikomo Kwambiri.

The CCM Trustees

COVID-19 in Malawi: Impact on Paediatric Oncology

by Dr George Chagaluka

COVID-19 has affected all aspects of life in high income countries but this is even more so in resource challenged countries. Dr Chagaluka outlines some of the issues relating to health care in Malawi. It is now that our support is more vital than ever.

Malawi has not been spared from the global pandemic. The country has a population of 18 million people. Since the onset of the pandemic, Malawi has registered 57 cases. Three of the cases have died representing a case fatality rate of 5%. 24 cases have been cleared of disease.

The government response: Social distancing measures have been enforced to reduce disease spread within the communities. Hospital visits have been restricted to only one guardian and visitors are not allowed in the wards.

The government planned lockdown met fierce resistance from opposition political parties and Civil Society Organisations. It was seen as a tool for a crackdown campaign launched for the coming presidential elections.

There is active screening at the entrance of the hospital and temporary shelters have been put up to hold suspected cases before transferring to quarantine centres. PPEs have been procured and liberally distributed in the wards following a health workers' strike. Risk allowance has also been introduced to all health workers.

Effects on oncology services: Although patient treatment has continued, transport costs for most families have doubled. This follows the social distance measures the government introduced on public transport.

Malawi imports most of its cancer drugs from India. Lockdown in India has caused scarcity of cancer drugs in the country. The available drugs are very expensive in both Government and Private stores.

The government introduced risk allowance to all health workers employed primarily by Government. Health workers employed by non-governmental organisations (NGOs) demanded a similar allowance. However, most NGOs cannot afford additional costs such as risk allowance and compensation for COVID-19 related deaths. This has led to mass retrenchment of most workers employed by NGOs.

A final word: Paediatric oncology appreciates the support that it receives from CCM. This support has ensured that our cancer service is uninterrupted in the midst of the ongoing global pandemic.

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First Impressions of Malawi

By Emily Parsons

Emily is one of the nursing team in Newcastle and made her first trip to Malawi as part of CCM in March. Here, she shares some of the key experiences from her visit.

2020 marks the fifteenth year of the CCM charity and for my travelling companions (colleagues and friends), Professor Simon Bailey and Sister Hannah Di Lullo, one of many returns to Malawi for the continuation of great work. For me however, it was not only my first trip to Malawi but also my first trip to Africa. I am so grateful for having been given the opportunity to be able to visit an amazing country, and an inspiring unit, with the most friendly population of people I've ever met.

My background in the UK is as a staff nurse on an paediatric oncology day unit. It is a rewarding and challenging job which I love. I was very keen to discover the ways in which the unit at Queen Elizabeth Central Hospital look after the paediatric oncology patients and how the support from CCM is helping them.

On the Sunday morning, Dr Chagaluka proved himself to be not only be a fantastic consultant, but also a wonderful guide and exceptionally great animal spotter, showing us some of the wonderful sites Malawi has to offer with a visit to Majeti game reserve. I didn't manage to contain any bit of excitement at seeing my very first elephant (or 4) and in the wild!

The paediatric oncology unit was exceptionally welcoming to us when we arrived on Monday morning after observing paediatric

hospital handover. George smiled his way through team introductions, or reacquainting as it was for many, and the business of the day began.

The patients on ward round demonstrated the wide variety of diagnoses, ages and acuities that the ward manages: from new diagnoses, pre- and post-surgical, ongoing treatment and palliative care patients - all are cared for together. Visiting each child one by one, there were wide smiles from some and a one-eyed peeps from behind Mum from others, and everything in between. It was a pleasure to observe Dr Chagaluka and the rest of the team responding to win them over and planning their care as one big team.

The nursing team, managed by the fantastic Sister Anizia Kamwendo, were a pleasure to observe and learn from. I really appreciated being shown around the hospital and its grounds to give me greater sense of healthcare system in Malawi as a whole. Sister Kamwendo demonstrated the key managing skill of leading by example, working alongside the other members of the team and demonstrating when required.

I was particularly amazed by the sense of community demonstrated amongst the patients and their parents, from the shared communal washing and cooking outside, to the support with language barriers of the parents. And the sharing of toys and space was demonstrated so beautifully by the patients.

Hannah had prepared teaching materials and PowerPoint presentations which we delivered to the fantastic new members of nursing team and new pharmacist, Rachael. Everyone was engaged and grateful to learn, with open questions and active learning. I know I gained a lot insight into the unit and its team members through these sessions. Moving forward, we're using the increased access to video calls and interactive learning to

deliver some more teaching by PowerPoint. The support and guidance from Sister Kamwendo helps to ensure her staff are all taking part in the ongoing education we have offered.

Meet the New Staff...

Recently the Unit has been very lucky to employ some new team members to further build capacity and provide essential skills

Rachael C. Magawa: Pharmacist. Rachael obtained her Bachelor's Degree in Pharmacy in 2015 from University of Malawi, the College of Medicine. She joined QECH Oncology Pediatric ward as an Oncology Pharmacist in March, 2020. Ever since her graduation, she has been working as a Clinical/Hospital Pharmacist and hence has excellent knowledge in Clinical Pharmacy. Rachael developed her passion for pediatric Oncology pharmacy after noticing the knowledge gap in Pediatric Oncology Pharmacy practice and that very few Pharmacists in Malawi are interested in Oncology Pharmacy practice. One of her major roles is reconstituting chemotherapy medicines while adhering to the aseptic technique guidelines as well as teaching staff about chemotherapy. Her research interest in is Clinical Pharmacology with specialty in Cancer Pharmacology. Her career goal is to be a Consultant in Oncology Pharmacy practice. **Rachael's salary is paid for by Children with Cancer in Malawi.**

Veronica Mnelemba: Laboratory technician. Veronica Mnalemba obtained a Diploma in Laboratory Technology from Malamulo College of Health Sciences. She worked at Shifa Private Hospital before joining Paediatric oncology. Her Dad, being a veteran laboratory technologist, is her main mentor. She joined Paediatric oncology in April 2020. Working in Paediatric oncology has shown her how sick kids can be passionate about producing results that make them better. Veronica prepares the samples for the remote pathology service, runs the full blood count machine (purchased by Children with Cancer in Malawi) as well as ensuring that samples are stored appropriately for more detailed testing.

Gloria Chathima: Data Officer. Gloria joined Paediatric oncology at QECH in February 2020. She studied at Soche Technical College and obtained an Advanced Diploma in HIV and AIDS management. She brings vast experience after working at Partners in Health as an ART Clerk, and at Lighthouse as a field tracer. Gloria enjoys field trips, especially going on patient follow-ups.

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Every penny raised will come directly to us.