

STUDY WARNS OF GROWING CANCER BURDEN ACROSS INDIA

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

A study tracing the growing burden of cancer in India states that most of the increase in cancer incidences are attributable to its epidemiological transition and improvement in the use of cancer diagnostics.

The country's cancer burden will continue to increase as a result of the ongoing ageing of India and improving access to cancer diagnostics in rural India, said Mohandas K. Mallath of the Tata Medical Centre, Kolkata, and Robert Smith from Kings College, London, in a recent paper: *History of Growing burden of Cancer in India: From Antiquity to 21st century*.

The paper was published in the *Journal of Global Oncology* which is promoted by the American Society of Clinical Oncology. The study has stated that while cancer-like diseases were documented since antiquity, recording of cancer in India began in the 19th century when the Western practices of biopsy and pathological examination came to India during the colonial British regime.

Cancer is primarily a disease of older people, hence, as life expectancy went up, cancer incidences too went up, said Dr. Mallath, a senior consultant of Digestive Oncology. Maximum increases will occur in the most populous and least developed States, where the facilities for cancer diagnostics and treatment are inadequate.

According to Dr. Mallath, the present study offers lessons for planning cancer care in States as well as other countries experiencing epidemiological transition. In India the fastest epidemiological transition happened in Kerala, whereas Uttar Pradesh remained in the slowest group, he said.

Kerala vs U.P.

A direct comparison of the demographic and social variables, available health care facilities and leading causes of mortality in these two States shows how the low incidences of infectious diseases in Kerala has given rise to more cancer compared to U.P., which is still battling high mortality from communicable diseases.

The types of cancers in India are also undergoing a transition, similar to a report from Japan five decades ago. There has been a decline of cancers caused by infections, such as cervical, stomach, and penile cancer, and an increase in cancers associated with energy intake, physical activity imbalance and ageing, such as breast, colorectal and prostate cancers.

Cancer transitions can influence the requirements for site-specialized cancer surgeons, the study says. For example Kerala will need more breast oncologists and U.P. will need more gynecological oncologists, said Dr. Mallath.

The association of tobacco chewing with cancer were published over a century ago. But the habit is now estimated to cause a fifth of all cancers in India, the study says.

Out-of-pocket expenditure is three times higher for private inpatient cancer care in India. Approximately 40% of cancer costs are met through borrowing and contributions from friends

and relatives.

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