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## Patterns of practice of radiation therapy and/or chemotherapy in Africa for gastrointestinal cancers - An audit

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**Purpose:** To provide data on the pattern of practice of radiation  $\pm$  chemotherapy for GIT cancers in African continent

**Methods and materials:** A questionnaire was distributed to participants in the Regional training course on Gastro-intestinal cancers of International Atomic Energy Agency under the project RAF6045. This course was held from 20-24th October 2014 at International atomic energy agency headquarters at Vienna, Austria and attended by 13 countries and 25 oncologists with 1-5 oncologists from each country. The course included lectures on management of various GIT cancers including interactive discussion sessions. Requested information included both infrastructure and human resource available and pattern of treatment (radiation therapy  $\pm$  chemotherapy) in gastrointestinal cancers.

**Results:**

The population catered by different centres varied from 1.5 –8 million and the number of staff inclusive of radiation oncologists, radiation therapists as well as medical physicists ranged from 2- 52. Seventeen (71%) of 24 oncologists attending the course practised chemotherapy and radiation for management of their cases with 8 having a separate medical oncology department. Thirteen centres had between 1-10 surgical oncologists or gastrointestinal surgeons. Twenty –three centres have between 1-7 machines with 10 centres having linear accelerators alone, 3 cobalt and linear accelerators and 10 cobalt alone. Eleven centres have conventional simulators and 14 CT simulators. Treatment planning systems are available at 19 departments with capability for 3D treatments in 14 centers. The number of GIT cancers seen ranged from 10-1000/ year in different centres. Gastrointestinal cancers seen at various departments included, oesophagus 5-67/year; stomach 5-26/year; rectum 10-60/year; colon 5-50/year and anal canal 4-27/year. In, 21 centres, >60 % cancers presented at a late stage. Seventeen/departments of the 24 institutions have multidisciplinary meetings and discussion for management of cancers. Chemo-radiation is used by 12 centres for management in 15-100% patients. Nineteen (79%) departments use treatment guidelines either developed locally or recommended internationally for treatment. The median waiting period for patients to start treatment is 60 days (14-240 days). The radiological investigations done at each centre include ultrasound in 12/24(50%); CT scan in 11/24(46%), MRI 5/24(21%). The follow up clinics are active in 20/24(83%) departments and rehabilitation services are present in 10/24 (42%) departments.

**Conclusion:** Majority of patients with GIT cancers present in late stages in African countries. Combination of Radiation therapy and chemotherapy is used in most of the centres for management of these cancers.

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South Africa

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