

## *Welcome to Project of Cancer Care Hospital & Research Center*

Some 162,000 patients are added to the existing number of cancer patients in Punjab each year. Only a small minority are able to get treatment. There is therefore, a critical need to expand medical care to these patients in the province and the 300,000 patients that are added to the national pool each year.

**WHY A CANCER HOSPITAL?** The limited cancer treatment facilities in the country can help only about 40,000 patients annually. The statistics are sobering: a total of 591 beds and 55 oncologists are available for 162,000 patients in Punjab. Limited capacities for palliative care, cancer emergencies and bone marrow transplants leave the majority of patients without access to proper treatment or care. In Punjab itself, no centre offers bone marrow transplants except for an Armed Forces Institute. There is therefore, an immediate need for a large cancer hospital or a network of cancer hospitals which offer palliative care, where bone marrow transplants are available and cancer emergencies are addressed.

**OUR VISION:** The establishment of a cancer hospital where comprehensive, professional and affordable care is provided with compassion and commitment. A hospital where no patient is denied treatment on the basis of advanced stage of disease or expense involved. A hospital which conducts research into the promise of winning the war against cancer; while educating health care professionals and the public.

**OUR MISSION:** To provide a standard of care to cancer patients especially the poor and marginalized without discrimination. To teach and train doctors, nursing and para medical staff in the field of oncology. To organize and conduct research in the field of cancer and related fields with a special focus on biomedical research to promote indigenous drug development utilizing local resources. To promote awareness among the public/ high risk groups for prevention of and early detection of cancer.

**CANCER CARE HOSPITAL & RESEARCH CENTRE, LAHORE  
PHASE 1**

**PALLIATIVE CARE:** Establishment of a 60 beds indoor palliative care facility supported by diagnostic labs, radiology unit and transfusion facility; with separate general wards for men and women and a private wing comprising of rooms for individualized care. CCHRC to provide palliative care focusing on relieving suffering and ensuring support for the best quality of life. It will provide sophisticated management of pain, while offering psychosocial, spiritual and bereavement support.

**HOSPICE SERVICES:** A special model for delivery of palliative care at home will be provided. Functionally dependant and cognitively impaired patients will be admitted indoors while others will be given care at home through a network of trained family physicians.

**OUTPATIENT TREATMENT:** Outpatient treatment will provide consultation to 200 patients daily with an anticipated visit load of 60,000 or more. A team of oncology consultants will provide consultation and treatment; chemotherapy will be administered in specially designated rooms; a state of the art blood transfusion service will provide safe blood transfusions and component therapy while best international practices and screening guidelines will be pursued.

**President.**

**Prof Dr. Shaharyar.**

**Cancer Research & Treatment Foundation.**

## **Phase 1:**

### **Palliative Care/Hospice Care.**

#### **Cancer is on the rise in Pakistan, as is else where in the world.**

**80 % of the cancer patients in Pakistan present in very late stages, with terminal disease, because of lack of awareness and poor health facilities in the rural areas where the majority population lives. These unfortunate terminal cancer patients die a painful miserable death. These poor patients are at the mercy of the, either traditional care givers, or of the medical physicians, who exploit and cash on their disease , by giving them false hopes and giving them very expensive chemotherapy even in stage 4 terminal disease, it is not uncommon to see a cancer patient with Lung, Bones liver, and brain secondries getting expensive chemotherapy, purchased by the patients. What these patients need is Palliative Care. There should be some legislation to control the multinationals, pharmaceuticals who are promoting unethical business, by giving incentives, to doctors, using these expensive medications to terminally ill dying patients, who may not benefit, from these drugs, Palliative Care is not against research and development of new drugs, but advocate the judicious use of these drugs, especially in a country like Pakistan where there is no health insurance system, We need to set up Hospice and Palliative care units in all the tertiary hospitals in the government sector, as a first step, encouraging the caring society to come forward with hand in hand in providing care to these unfortunate dying patients. THE HAVE ALL's are i feel obligated to give back to the society at least a fraction of what the almighty has bestowed on them, it is an opportunity for them to earn for themselves in the hereafter as well. Its just the realization of the fact if one does, he is blessed..**

**The first 120 bedded Hospital based Palliative Care unit has been planned by the C C H & R C . A model of care in which the terminally ill cancer patients will be admitted for not only pain, symptom management but also to make a needs assessments as well as to train the primary carer , provide volunteer support, who would be a link between the patient at home and the palliative care unit for providing total care. The Palliative unit will loan out equipment, the patient may require for care at home, like wheel chairs, syringe drivers, nebulizers, special mattresses, air cushions etc .The Palliative unit will act as a backup support, anytime the need arises to bring back the patient direct from the home bed to the hospital bed for short term management. To Encourage and train the family, so as to, be so confident, to take care of their loved ones at home in the last days of their life.**

**To provide bereavement care to the family once the loved one is gone.**

**The Palliative unit will also act as a training ground for palliative physicians and nurses, leading to diploma courses.**

**Training of doctors and nurses from all district hospitals in Palliative care, to establish a networking to manage patients going back to their respective districts of residence.**

**To run a volunteer training program, for orientation for volunteers from the general public**

**To do research on different aspects of Palliative Care management.**

**Dr Riaz ur Rahman**

**Palliative Care Physician.**

**Member Board of Governors.**

**Cancer Care Hospital & Research center.**