

89-90

REGIONAL CANCER CENTRE

TRIVANDRUM



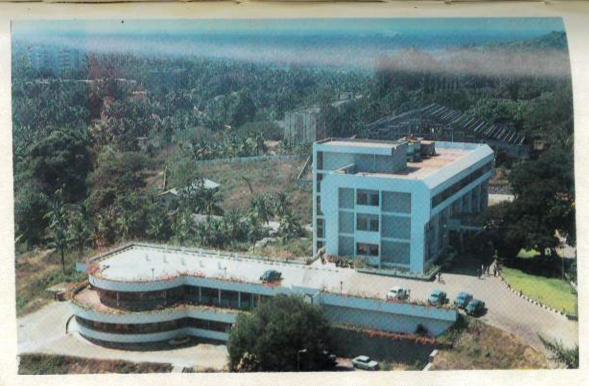
REGIONAL CANCER CENTRE
TRIVANDRUM-695 011, KERALA, INDIA

REPORT OF ACTIVITIES 1989-'90

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The New building of the Regional Cancer Centre, Trivandrum. (I Phase) inaugurated on 17-8-'89.



Shri. E. K. Nayanar, Hon'ble Chief Minister inaugurating the New building of the R.C.C. on 17-8-'89, at a function presided over by Shri. A. C. Shunmughadas, Hon'ble Minister for Health.

Distinguished Speakers who paid glorious felicitations during the inaugural meeting on 17-8-'89.





The Out Patient Department in the New building of the Regional Cancer Centre.



Patient Services Counter in the New building of the R. C. C.



"FLASH BACK" Foundation Stone for the Regional Cancer Centre's building was laid on 11–9–84 by Shri K. Karunakaran the then Chief Minister of Kerala.

CONTENTS

		Page	No.
1.	Introduction	7.5	1
П.	Departmental Activities		
	Division of Radiotherapy Division of Surgical Oncology	XX.	3 7
	3) Division of Paediatric Oncology	4.4	16
	4) Dental Wing	9.4	18
	5) Division of Imageology	9.9	21
	6) Division of Radiation Physics	4.2	24
	7) Division of Cytopathology	141	27
	8) Division of Research	4.0	42
	9) Division of Medical Records & Statistics		
	& Hospital Cancer Registry	15.5	50
	10) Division of Community Oncology		66
111.	Special Clinics/Symposia/Seminars	9.4	100
IV.	Conferences/Seminars/Workshops etc.	3.5	103
٧.	Papers presented/published	4.4	107
VI.	Distinguished Visitors	* *	114
VII.	Administration		
	1) Governing Body members	1.5	115
	Executive Committee members	2000	117
	Building Committee members	5.5	118
	4) Scientific Committee members	275	119
19	5) Major Decisions of the		
	Governing Body.	6.9.	121
	6) Major Decisions of the Executive Committee and Scientific Committee	200	122
	Committee and Scientific Committee	-9-4	122
VIII:	Engineering Department	15.5	123
IX.	Accounts	4.1	125
Χ.	List of Staff	2.5	146
XI.	Acknowledgements	76.4	152

INTRODUCTION

The year under report, 1989–90, was to us one of gratification, fulfilment and happiness as the long cherished dream of all of us of constructing a very modern hospital became a reality. This building was inaugurated on the 18th August, 1989 (1st of Chingom ME 1165). The occasion was kindly graced by the Hon'ble Chief Minister and the Hon'ble Minister for Health and Family Welfare.

Despite the fact that the concept of the Regional Cancer Centre and its philosophy of multi-disciplinary cancer management were initially not fully understood even by those in the profession, it was laudable that the programme of construction could be completed in record time and the building was commissioned. The credit goes to a very great extent to the public support thoughtfulness of the professionals, timely political decisions and administrative support for this programme.

Presently the new building accommodates all the offices, outpatients, imageology department, service area, research laboratories, library, national tumour registry, surgical oncology and medical oncology divisions.

Academic and research activities made tremendous progress in this institution during this year. Some of the faculty members received national and international awards for excellent research publications. In recognition of the high standard of research activities two major projects were sanctioned to this Centre. One of the two preventive oncology centres sanctioned in the country was allotted to this Centre.

This year marked the beginning of a series of symposia under the title "Oncology for the 21st Century"; the first in the series was inaugurated on 14–11–1989 in commemoration of

the birth centennial of Pandit Jawaharlal Nehru. Six eminent oncologists from U. S. A. participlated in this symposium.

During this year we received information that a C.T. Scanner costing nearly Rs. 150 lakhs under Japanese Aid Scheme has been allotted to the Centre.

The interest taken in the developmental activities of this centre by the Hon'ble Chief Minister and the Hon'ble Minister for Health and Family Welfare are worth mentioning in this report. We wish to place on record our gratitude to them for their unstinted co-operation.

This report for the year 1989-90 contains details of activities of all divisions and the audited statement of accounts.

DEPARTMENTAL ACTIVITIES

INVISION OF RADIOTHERAPY

2010 2010		
Br. M. Krishnan Nair	_	Director
or, T. K. Padmanabhan	—	Professor
рг. F. Joseph	-	Professor
Dr. B. Rajan	_	Associate Professor
Dr. T. Ganga Devi		Associate Professor
Br. C. S. Kuttappan		Associate Professor
Dr. P. G. Jayaprakash		Associate Professor
Mor. S. Parameswaran	_	Assistant Professor
Dr. V. Narayana Bhattathiri		Assistant Professor
ੂ ਉਸੂ, Jayaprakash Madhavan =	_	Assistant Professor
हैं. SD _Y , R. Giroesan	_	Assistant Professor
Dr. C. S. Madhu	_	Tulor
Dr. M. Jamaludeen	<u> </u>	Tutor
D _Y , S. Salahudeen	_	Tutor
ሽ Dr. K. Ratheesan	_	Lecturer

MEDICAL ONCOLOGY WING

Dr. V. P. Gangadharan	_	Assistant Professor
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CLINICAL SERVICES

1.		•		5110
2.	Number of outpatient visits		_	45512
3.	Number of inpatient cases		-	2877
4.	Number of cases treated with			
•	brachytherapy			- 688
5.	Number of cases treated with interstitial			
	implantation			98

6.	Number of cases treated with mould treatment	di.	
7.	Number of cases treated with intra- cavitary oesophagus	ia	15
8.	Number of cervix cases treated with preloading radium application		52
9.	Number of cervix cases treated with manual afterloading caesium application	_	. 6
10.	Number of cervix cases treated with Selectron	1000	66
11.	Number of cases treated with Chemotherapy		451
	Спетновнегару	-	9112

ACADEMIC ACTIVITIES

As in previous years Morning Clinics were conducted on all working days where interesting cases were discussed. The paediatric tumour board was conducted every Monday and Head and Neck Clinic on Thursdays. The clinicopathological conference was conducted once a month. Surgical tumour board and Gastroenterology Tumour Board were conducted once a month. Journal Club and symposium were held every Saturday and Imageology session every Friday.

ONGOING TEACHING PROGRAMMES

MD Radiotherapy
Dip NB Course
Diploma in Medical Radiotherapy (DMRT)
MD Radiodiagnosis (Part time)
MD General Medicine
MS General Surgery
MD Obstetrics & Gynaecology
MS Orthopaedics & D. Ortho
MS ENT & DLO
MBBS Classes
B.Sc. Nursing
M.Sc. Nursing
C.R.A (Certified Radiological Assistants Course)

Postgraduate students in Obstetrics & Gynaecology are posted in radiotherapy department for one month.

TRAININGS/CONFERENCES ATTENDED

- Dr. T. K. Padmanabhan & Dr. Jayaprakash Madhavan visited Christie Hospital and Holt Radium Institute, Manchester between October 1989 January 1990 (British Council Programme).
- Dr. S. Parameswaran visited School of Medicine, University of California, San Francisco, USA between February 1989 May 1989 (ICRETT FELLOWSHIP)
- Dr. Jayaprakash Madhavan attended the IIIrd International Conference on Brachytherapy, Bangalore March 14-15, 1990.
- Dr. M. Krishnan Nair attended the VI Varian European Meeting at Italy between 31st May to June 4th, 1989.
- Dr. M. Krishnan Nair attended the 17th International Congress of Radiology at Paris between 1st to 8th July, 1989.
- Dr. M. Krishnan Nair attended the A. R. O. I. meeting at West Bengal between 9th & 10th December, 1989.
- Dr. M. Krishnan Nair attended the 18th A. C. I. A. P. Conference at Ernakulam between 13-14th January, 1990.

PAPERS PUBLISHED

- Sankaranarayanan R; Duffy SW; Day NE; Padmakumari G; Padmanabhan T. K. Tobacco Chewing, Alcohol and nasal snuff in cancer of the gingiva in Kerala, India. Br J Cancer 1989; 60: 638–643.
- Sankaranarayanan R; Duffy SW; Day NE: Krishnan Nair M; Padmakumari G. A case control investigation of cancer of the oral tongue and the floor of mouth in Southern India. Int. J Cancer 1989; 44: 617–621.
- Padmanabhan T. K; Sankaranarayanan R; Krishnan Nair, M.
 Evaluation of local control, survival and pattern of failure with Radiotherapy in cancer of the oral tongue. Oncology 1990; 47: 121–123.

- Stich HF, Brunneman K, Mathew B; Sankaranarayanan DIVISION OF SURGICAL ONCOLOGY Krishnan Nair M. Chemopreventive trials with Vitamin and Beta Carotene: Some unresolved issues. Prev Med 1989; 18: 732-739.
- Stich HF; Rosin MP; Homby AP; Mathew B; Sankaranerae Di, M. Iqbal Ahamed yanan R; Krishnan Nair M. Pilot intervention studies with Carotenoids. Monograph on carotenoids, Plenum Press New York, 1989.
- Stich HF; Mathew B; Sankaranerayanan R; Krishnan Nair M; Remission of precancerous lesions of oral cavity of tobacco chewers and maintenance of protective effects of Betacarotene or Vitamin A. Am J Clin Nutrit (in press)
- Stich HF: Paleic B: Sankaranarayanan R: Mathew B(Krishnan Nair M. Quantitation of Chromatin patterns by image analysis as a predictive tool in chemopreventive trials with Vitamin A. In: Experimental and Epidemiologic applications to risk assessment of complex mixtures. IARC Sci Publi. International Agency for Research on Cancer. Lyon, 1990.
- Sankaranarayanan R; Duffy SW; Krishnan Nair M; Padmakumari G; Day NE. Tobacco and alcohol as rish factors in cancer of the larynx in Kerala, India. Int. J Cancer 1990:

pr. Thomas Cherian Assistant Professor

nr. Paul Sebastian Assistant Professor

Assistant Professor

Resident Surgical Officer Dr. K. L. Jeyakumar

歐Dr. P Sivaramakrishnan Resident Surgical Officer

Lecturor Noly Joseph

n. Gladys Jeevy Anaesthetist.

CLINICAL:

Surgical Oncology outpatient functions on six days in a week. All surgical cases registered in the Contro and also those referred from the Medical College or elsewhere are seen in the O.P. Also all follow ups are routinely seen in the Q.P. Due to the limitations in our present set up, we are still forced to limit the number and field of surgeries we undertake. We hope to start abdominal surgery and also increase the number of operations undertaken once our theatre and wards in the new building are commissioned. During the reporting year a total of 394 surgeries were undertaken, of which 228 were major operations, most taking 6 to 8 hours or more. It is gratifying to report that in spite of the general poor conditions, advance age and extensive surgical procedures involved, we had no operative deaths, so far. This year, there were 6 perioperative deaths due to unrelated causes. Majority of our cases are still recurrent carcinoma of the oral cavity following radical XRT. Inspite of the extensive nature of the lesions involved, the results are comparable to those achieved in any of the advanced centres of the world. The detailed pathological analysis of the excised specimens show that we have been able to achieve tumour clearance all around the margins and base in almost 96% of cases. The split up of the detailed analysis of 159 cases followed up till the date of reporting are as follows:

. TABLE i

MAJOR OPERATIONS (1989-'90)

		- . - -
Carcinoma buccal mucosa		
Carcinoma tongue	_	59
Carcinoma lower alveolus		48
Carcinoma floor of mouth		49
Carcinoma lip (upper)	_	4
	-	2
Carcinoma lip (lower)		5
Hoinguinal block dissection	_	3
Metastatic adenocarcinoma scalp	-	1
Malignarit melanoma	_	2
Other skin tumours	_	4
Carcinoma penis		3
Soft tissue sarcoma	_	5
Orbital malignancy	 -	3
Ectopic safivary tumours	_	2
Submandibular salivary tumours	_	1.
Parotid tumours		2
Carcinoma thyroid		12
Carcinoma breast	— .	21
·		
Total	_	228
MINOR OPERATIONS	· .	166
Grand Total	_	394

Detailed analysis till the date of reporting of our major surgical problem namely the cancer of the oral cavity are as follows.

TABLE II

ARCINOMA BUCCAL MUCOSA				-	
tal number of cases done			59		
Cases analysed	_		4.7		
giimary surgery	_		3 .		
Salvage surgery	_		44.		
: Ismus	_		15/47		
Surgery at the primary site only	_		5		
Primary and node dissection	_		42		
Reconstruction			37		
ু Primary closure			10		
rumour clearance at the margins					
Free 30 Free, but close 5 Dysplastic 9 Positive 2		19.	2%) 8%} 5%; 3%	96.7 4.3	
Flaps used:					
Pectoralis major myocutaneous Sterno-mastoid do- Deltopectoral Nasolabial Platysma			 	18 11 4 3 2	
Recurrence:			1		
Local Nodal				10 5	

Of the 10 local recurrences 3 patients had second surgery and 1 is NED at present. Of the 5 nodal recurrences, 4 were on the unoperated opposite side of the neck, 1 had functional neck dissection and is NED now. Others refused surgery.

CARCINOMA TONGUE

Carcinoma tongue Total		
Cases analysed	~-	48
		33
Primary surgery	_	8
Following radium implant		
Post XRT surgery	-	14
	_	11
Partial glossectomy	_	12
Hemiglossectomy		
•	_	8
Subtotal glossectomy	_	5
Neck Dissection alone	_	Я

Tumor clearance at the margins

Free Close Dysplastic	- - -	${20 \choose 4}$	96.96%
Positive		1	3.04%

Recurrence:

Local Nodal Local + Nodal	=	3 }	21.2%
	_	1 J	

Reconstruction

Flaps:

Nasolabiai flaps	_	R
Pectoralis major		
Sternomastoid		b
Oternomasion	_	2

All cases who had substantial loss of tongue leading to functional deficit had primary reconstruction restoring adequate functions.

TABLE IV

yer alveolus Analysed	Total		49
M Analysed			19
Primary surgery		_	2
Primary surgery XRT followed by sur	gery ·		17

timour clearance at the margins:

Free	_	13 ๅ	
Close	_	1 }	94.7%
Close Dysplastic	_	4)	
Positive		1	5.3%

neourrence

Local	_	5
· Nodal	$\overline{}$	1
Distant metastasis (Chest wall)		1
Death	_	1
NED	_	10
Lost to follow up		1

It is interesting to note that local recurrences manifested aguring the first year. Later appearances of lesions were always found wide of the primary site. Most of these people had severe dysplastic changes in the oral cavity denoting that these recurrent lesions should be taken as fresh primaries rather than local recurrences.

Our policy of primary reconstruction in all cases following radical ablative surgery for recurrent carcinoma helps very much in the early rehabilitation, physical, functional and emotional. This centre insists on our own techniques for reconstruction. We have now perfected a simple technique for reconstruction of the arch of the mandible with good cosmetic and functional results (Figs. 1 to 4).

ACADEMIC:

Being responsible for the academic programmes of the Medical Callege, Trivandrum, we are involved in the undergraduate and postgraduate training programmes. This division

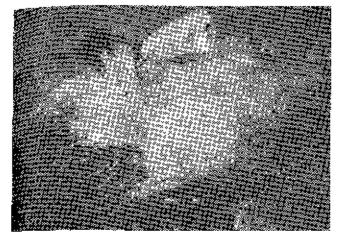
takes active part in all the academic activities of the centre, maining Noon Clinics, Seminars, Workshops and helps in research workshops.

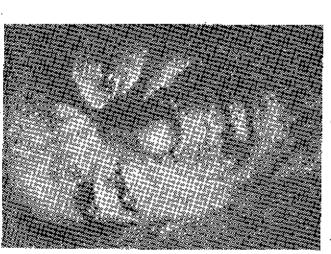
PAIN CLINIC is conducted once a week. Cancer patients in whom all the other modalities have failed are referred to Pain Clinic for pain and symptom management. Mainly oral drugs are given and WHO step ladder analgesic pattern is followed. Drugs for steps I & II are tried with good results. Drugs for weeks are supplied with specific prescription forms, dose of tablets and time to be given are explained to the patients and their relatives.

174 new advanced cases were referred to pain clinic. Only 9 patients could be given Step I drugs and others needed Step II drugs. 419 repeat cases were also soon during this period. 10% of cases come regularly once in two weeks to collect drugs with acceptable pain relief for about 8 months. With Step II, 28% had 3 months of acceptable pain relief, 45% had pain relief for one month. 30% did not have relief with Step II and had to be given injectable narcotics. We hope to get oral morphine (Step III) which would give good pain relief without injections.

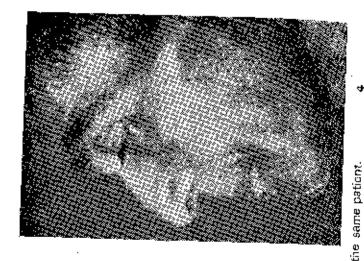
TABLE V
DISTRIBUTION OF LESIONS

S/te	Number		
Buccal mucosa		47	
longue	_	35	
Lower álveolus		24	
· Carcinoma cervix		20	
- Palate		7	
Maxilla		á	
Tonsil	7 11-	2	
Lung		5	٠.
Oesophagus		· 3	
Larynx		8	1.
Breast	-	9	
Liver		1	
Soft tissue sarcoma		5	
Overy		1	
Vagina		Å	





oma of the arch of mandible pre operative views.





One Syringe Driver was donated to this division by Miss. The Burn, an Expert on Palliative care from U. K. on 14–2–1990. It is apparatus is effectively used in controlling the pain by giving philingous subcutaneous morphine infusion. She visited our fitter and delivered a talk on "Palliative care in advanced malignity" to the academic and nursing staff of the Regional Cancer Shire.

NAESTHESIOLOGY:

For a total of 204 major cases G. A. was given. All cases were examined preoperatively and concurrent diseases were leated as far as possible. 10% of the cases were high risk stitents due to cardiac decompensation and were operated. If fiere were no preoperative casualty. More than 75% patients were anaemic and had dehydration with varying degree of electivity imbalance. Average age group was 55 yrs. Oldest case was a 86 yr old man. Average duration of anaesthesia — It hours. 17 patients had total trismus and blind nasal intubation was done for them. One patient came for 3rd operation and her larynx was distorted completely and blind nasal intubation failed and retrograde railrand method was tried with success.

CONCURRENT DISEASES WITH ASA GRADE III

5.			
j 1.	Hypertension	~	32
2.	Respiratory infection with bionchitis		
Arri	bronchicctasis, asthma and emphysema		15
3.	Łateral wall ischaemia	_	10
4. 5	Unstable angina		2
5.	Lt. Ventricular hypertrophy		. 3
6.	R.B.B.B.		5
7	Atherosclerotic sortic valve disease	_	6
8.	Mitral valve stenosis	_	2
9	M.V.P.	_	4
10.	Diabetes mellitus		6
11	Epilepsy		2
12.	Parkinsonism	<u> </u>	1

Balanced techniques of anaesthesia with controlled vehiclation was used in all cases. Patients had complete recover and had no residual paralysis. All reflexes returned soon at surgery and extubation was done for all cases on the table at patients were alert. Postoperative pain was managed with an gesic injections. 5 cases had spinal anaesthesia, others in either regional blocks or Ketamine anaesthesia.

CONFERENCES & WORKSHOPS:

- 1. Dr. Thomas Cherian, CME programme and Endoscopy Dr. Paul Sebastian, Workshop on Endoscopy, ASI Kerali Dr. K. L. Jayakumar, Chapter 13th & 14th May, 1989 Dr. M. Igbal Ahammed Trivandrum.
- 2. Or. Thomas Cherian International Congress on Oil Cancer New Delhi 13-176 November, 1989.
- 3. Dr. Paul Sebastian Dr. Jayakurnar, K. L. Dr. P. Siverama- Krishnan Workshop & T.T.P. on Head an Neck Cancer December 1989.
- 4. Dr. Gladys Jeevy Biennial Conference of Indian Society of Oncology & Precontain ence Workshop on menagement of cancer pain and hospice. 7–120 February 1990 at Ahamedabad
- 5. Dr. Gladys Jeevy Satellite meeting of Vlth World Congress on Pain with Vlth All India Conference on pain – 24–28th March 1990 at Bombay.

PAPERS PRESENTED:

 A simple technique of primary stage reconstruction of lateral defect of the lip with good cosmetic and functional results. International Congress on Oral Cancer, New Delhi 13–17tis November, 1989.

> Dr. Thomas Cherian, Dr. Paul Sebastien, Dr. Iqbell Ahamed, Dr. Jayakumar, K. L. and Dr. P. Sivarama krishnan,

Reconstruction of a functional tongue following glossectomy for recurrent carcinoma. A 5 year experience. International Congress on Oral Cancer, New Delhi 13–17th Movember, 1989.

Dr. Thomas Cherian, Dr. Paul Sebastian, Dr. Iqbal Ahamed, Dr. K. L. Jayakumar and Dr. P. Sivarama-krishnan.

Salvage Surgery for postirradiation recurrent carcinoma of the buccal mucosa - International Congress on Gal Cancer, New Delhi – November 1989.

Dr. Paul Sebastian, Thomas Cherian, Dr. Iqbal Ahamed, Dr. K. L. Jayakumar, Dr. P. Siyaramakrishnan.

/mplementation of WHO Cancer Pain Programme in Kerala.

IV Biennial Conference of Indian Society of Oncology Workshop on management of cancer pain and Hospice at Ahmodabad 7--12, February, 1990.

Dr. Gladys Jeevy.

Simple oral analgesics in the management of advanced /Cancer Pain at Satellite meeting of VI World Congress on Pain with VI Annual All India Conference on Pain at Bombay 24–26th March, 1990.

Dr. Gladys Jeevy, Dr. Paul Sebastian, Dr. M. Krishnan Neir.

DIVISION OF PAEDIATRIC ONCOLOGY

Dr. P. Kusumakumary

Assistant Professor

Dr. S. Rajeev Kumar

Lecturer

All the paediatric oncology cases were registered in this

Clinical activities:

Number of new patients seen		
Total No. of outpatient visits	_	201
Innetions admirates	_	3185
Inpatient admission		240

The following is the list of new cases registered.

		0	· +1.5Q.
Leukaemias	_	- 57	(28.4%)
Brain Tumours		41	(20.5%)
Lymphomas	_	16	(8%)
Soft tissue sarcomas	_	8	(4%)
Bone tumours	_	10	(5%)
Wilm's Tumours	_	6	(3%)
Retinoblastoma	_	7	(3.5%)
Neuroblastoma	_	4	(2%)
Germ Cell Tumours	_	8	(4%)
Hepatoblastoma	_	5	(2.5%)
Histiacytosis		9	(4.5%)
Miscellan c ous		31	(11070)

As in the previous years the most common malignancy in this age group was acute leukaemias of which 3/4 were acute lymphatic leukaemia and the remaining were acute myeloid leukaemia. Only one case of chronic myeloid leukaemia of adult type, was encountered.

Brain tumours constituted the second large group. Among brain tumours gliomas were most common. There was not both change in the relative frequencies of other solid tumours greet a slight reduction in the number of Wilm's tumour and auroblastoma.

Outpatient clinic in paediatric oncology is being held on all lays except Sunday as in provious years. Detailed diagnostic lays up of all the patients were done as a routine. This included complete haematology, blood biochemistry urinalysis, bone markey aspiration/trephine biopsy, aspiration cytology in relevant lases, C.S.F. studies, ultrasound, X-rays and C.T. Scan. About look bone marrow aspiration and biopsies and 450 lumbar punctions for diagnosis and therapy were done.

Surgery was the primary modality of treatment for solid famours followed by irradiation and or chemotherapy depending fapon the diagnosis and stage of disease. Chemotherapy was given to all cases of acuto lymphatic leukaemia. Patients requiring aggressive chemotherapy were admitted to the wards and appropriate treatment were given.

A well organised and co-ordinated multi-disciplinary team gensisting of Paediatric Oncologist, Paediatric Surgeons, Patho-slogist and Radiation Oncologist meet every Monday at 12.00 groun and major management decisions were taken by this team gas in previous years.

Academic activities:

The division imparted teaching and training to M.D. Radiotherapy, D.M.R.T., M. D. Paediatrics students of Medical College, Trivandrum.

- Dr. P. Kusumakumary is a Co-guide for M. D. thesis in Pathology of Dr. Meena on "Rhabdomyosarcoma in Childhood", M.D. sthesis in Paediatrics of Dr. Chandrasekharan on "Solid Tumours on children".
- Dr. P. Kusumakumary is a Co-investigator for Science and Technology funded project on "Immunohistochemical staining of childhood Rhabdomyosarcoma and correlation with prognosis". This work is in progress.

Conference attended:

Dr. P. Kusumakumary attended the 18th Annual Conference of I. A. P. Kerala Chapter held at Ernakulam on 13th & 14th of January, 1990.

Dr. P. Kusumakumary attended a Symposium on Research methods in Clinical Oncology held on 23–25th February, 1997 at Tata Memorial Hospital, Bombay.

Papers published:

Chellam, V. G; Elizabeth Chacko; Kusumakumary P; Suren dran, N -- "Clear Cell Sarcoms of Kidney (CCSK) -- A clinicopathological study of 4 cases" -- Indian Journal of Cancer. Vol 26 (1989) p 120–128.

DENTAL WING

Dr. K. R. Nalinakumari : Lecturer

Main activities of this division are:-

- 1 Dental extraction
- 2. Biopsies
- Preparing bite blocks, prosthetic appliances
- Preparing moulds.
- Management of precancerous and other oral lesions.
- Participation in research projects.

During the year 1989 - 90, the following services were rendered.

1.	Total number of sittings of patients	_	2357
2.	Number of biopsies	_	654
3.	Number of bite blocks and moulds		79
4.	Number of new cases	·	760
5.	Miscellaneous S. R.		9

grails of sites and numbers of biopsies

	•		
1	Burdeal Mucosa (a) Right B. M. (b) Left B. M.		131 166
	Tongue including (a) Right border of tongue, (b) Left border of tongue (c) Dorsum of tongue (d) Other sites of tongue	_	135
; [.	Plaor of mouth	_	18
	Under surface of tongue		1
	Alveolus (a) Upper alveolus (Right and left)	_	21
	(b) Lower alveolus (Right and left)	<u></u>	68
	Palate Hard palate and soft palate	<u></u>	25
	Lip — Upper lip and lower lip	_	35
	Commissure Right and left		22
	Upper sulcus		3
	Lower sulcus		11
	Retromolar region — Right and Left	_	25

As in the previous years, most of the cases with poor oral hygiene, total dental extraction was done at the earliest. Bits blocks are prepared for patients who require radiation. We also prepare moulds for cases requiring radium brachytherapy in sites like hard palate, maxillary antrum and lip cases.

We usually attend cases with precancerous lesions like teukoplakia, S M F and other oral lesions like lichenplanus, erythroplakia etc. We give proper guidance on oral hygiane, oral prophylaxis and advice on modified diet to the patients with precancerous end cancerous lesions. We give monthly check up to these patients.

Biopsies were taken from almost all the suspected cal of oral lesions. We could help a few patients to get free firm disease by proper diagnosis, treatment as well as compla excision of the disease.

Research activities:

The Dental section of the Regional Cancer Centre is no directly conducting any research work under the schemes of ICMR, DSTE, CSIR, DST, BRN, BCCA scheme but this will is giving full co-operation especially in supplying the clinical materials to the various divisions of this centre.

We are also involved in the research activities and and collaborating with research division as well as the radiotherapy department. In addition, we are actively participating in project undertaken in collaboration with research division on detection of antitumour antibodies in oral cancer (DST project immunodis agnosis of oral cancer using antitumour antibodies) and ultradi ructural studies of oral cancer and precancerous lesions. Another aspect of study of this division was the natural killer cell activition in patients with precancerous lesions of the oral cavity.

We are also one of the investigators in Kerala DSTE fundance project on "Changes of peridental tissue in relation to toois and alveolar bone in case of cancer of alveolar bone".

Our department is the collaborating department of the Columbia Cencer Control Agency of Canada (BCCA).

Papers published presented at conference.

Radhakrishna Pillai, M. Prabha Balaram, Kannan, S. Sudha, L. Nalinakumari, K.R., Hareendran, N. K. and Krishnan Nair, M. Clinical implications for oral pre-cancers of interferon activation of latent natural killer cells and alteration in kinetics of target cell lysis. J. Oral Pathol. Oral Surgia Oral Med.

SION OF MAGEOLOGY

K. Sasidharan	.	Associate Professor
Padmanabhan	· _	Associate Professor
M. Pradeep		Assistant Professor
Mr. Reghu Ram K. Nair	_	Lecturer
r K. Ramachandran	_	Lecturer
E.C.		

源於tivitie8:

17096 new cases were registered in the Department during year 1989-90. The break up of various investigations is as

Elltrasound	·	9291		
stope scan for thyroid	_	2180		
Blood sample assay	_	5500		
Radiolodine therapy	_	80		
武 Mammography	_	45		

All the imaging equipments such as Gamma Camera, projects jointly run by the Regional Cancer Centre and the British Rectilinear Scanner, Todine Uptake Counter, Ultrasound machine Sand Mammography X-zay machine were shifted from the old building and started functioning in the new building. The Gamma Camera continued to have problems with its photomulti-Riplier tube as in the previous year hence the reduction in number sof isotope studios of liver, kidneys and bone.

> The number of ultrasonograms had to be restricted for want of machine time. Purchase of a second ultrasound machine was agreed on principle.

> A 500 mA X-ray machine with memory programming of exposure and with screening facility was purchased and is undergoing installation.

There is a marginal increase in the number of patients of radio-iodine therapy. Weekly requirement of radioaction iodine was increased from 20 mCi to 40 mCi. Profaction, Algorithms of the profaction of the prof

Academic Activities:

There is an increase in demand for the short term training course in ultrasonography. A request from the Director Medical Education for imparting this course to medical office under the Directorate of Medical Education is under consideration and is to be started once the second Ultrasound machine will sector scan facility is made available.

One candidate for Ph.D. in Medical Physics was registered under the combined guidance of Dr. V. Padmanabhan and Dr. T. P. Ramachandran.

- Dr. K. Sasidharan and Dr. K. Ramachandran attended the Annual Congress of Indian Radiological and Imaging Association (IR & IA) held at Hyderabad in January, 1990.
- Dr. K. Sasidharan attended the Annual Meeting of the South Tamil Nadu Chapter of the Indian Association of Medical Ultion sound held at Kanyakumari in January 1990 and presented paper on "Ultrasonography of Testis".
- Dr. K. Sasidharan and Dr. K. Remachandran attended any presented papers on Ultrasonography in Obstetrics and Gynee cology at the South Kerala branch meeting of the Obstetrics and Gynaecology Society of India conducted at S. A. T. Hospital Trivandrum.

Academic programmes:

One day CME programme in Imageology was organised by Dr. Ramachandran as Secretary under the auspices of this Kerala State Branch Meeting of the Indian Radiological and Imaging Association (IR & IA) at Trivandrum, Dr. K. Sasidharan presented papers on Ultrasonography.

Teaching in Ultrasonography and Nuclear Medicine were inparted to students of CRA, II Year and final year MBBS students are: MLT and Nursing students.

Radio talks were given by Dr. K. Sasidharan on Imageology by Dr. V. M. Pradeep on Thyroid.

Dr. K. Sasidharan gave a talk under the Medisat Programme the Medical College, Trivandrum.

M. Sc. students attended the depratment for their project of in medical field as part of the collaborative programme tween Regional Cancer Centre and Department of Physics, Miversity of Korala.

A research paper on sonographic evaluation of operability of cervical lymph nodes was published by Dr. V. M. Pradeep, P. Sen and Dr. V. Padmenabhan.

gapers presented/published

Sasidharan K., Pradeop, V.M., Krishnan Nair M., Disappearing interface in Ultrasonography. Indian Journal of Radiology and Imaging (under publication).

Sasidharan K., Remachandran K., Pradeep V. M., Krishnan Nair M., Ultrasonography of Lymphoma - Annual Congress of IR & IA, Hyderabad, 1990.

Ramachandran K., Sasidharan K., Pradeep V. M., Ultrasono-graphy of Scrotum. Annual Congress of IR & IA, 1990.

Pradeep V.M., Ramachnadran K., Sasidharan K., Ultrasound, evaluation of cervical lymphadenopathy – Annual Congress of IR & IA, 1990.

DIVISION OF RADIATION PHYSICS

Dr. T. P. Ramachandran
 Sri P. G. Gopalakrisha Kurup
 Associate Professor
 Sri C.A. Davis
 Audistant Professor
 Sri T. S. Elias

Patient Services:

For patients undergoing teletherapy and brachytherapy treatment, planning and related dose computations were carried out routinely. The following numbers of cases were planning during the year.

External beam therapy	:	4897
Intracevitary treatment using Selectron Remote Afterloading System	<u>:</u>	451
Interstitial implants	:	98 5
Intracavitory treatment for carcinoma oesophagus		· :
Mould freatment	:	5 2 🖔
	;	16 🖔
Treatment using preloaded radium	:	, i

The newly produced manual afterloading Caesium applicators for cancer of uterine cervix patients was introduced for treatment during this year.

Number of cases treated with Manual Afterloading System

୯ଡ

Plaster of Paris shells were made for patient immobilisation in radical external beam therapy for head end neck cancers. Random measurements in patients during external beam therapy were carried out with TLD and DPD-5 dose monitoring system to ascertain accuracy in treatment. As part of the AERB research project, dose to organs like eye, thyroid, contralateral breast etc, were measured in some patients using TLD.

Quality Assurance of the following radiotherapy equipments carried out.

finear Accelerator		1
halt-60 Teletherapy machine	. 	2
默 _{uliotherapy} Simulator	_	1
Selectron Remote Afterloading System	·	1
gadium soutces	_	603 mgs
Cassium-137 sources	_	688 mCi

Routing calibration, checking and quality assurance tests on all the machines were undertaken which ensured proper dose delivery. Due to the routine check and consequent preventive maintenance in the machine, the downtime was reduced considerably and almost uninterrupted treatment could be given for patients.

Procurement of new equipment:

This division has produced instruments necessary for calibration of beam therapy machines, patient dose monitoring and radiation protection survey.

Participation in national programmes:

We participated in the postal dose intercomparison programme with the Standardisation Laboratory, Division of Radiological Protection, BARC, Bombay. Thermoluminescent dosimeters and chemical dosimeters were used for the inter-comparison purpose. This enabled us to keep our dose delivery to the national standard.

Radiation safety activities

Personnel dose monitoring is done for 90 persons using film badge. This facility is extended to the radiation workers in Regional Cancer Centre. Radiodiagnostic department of Medical College Hospital, S.A.T. Hospital and Dental College. Radiation protection survey were carried out periodically in therapy machines and brachytherapy sections to ensure safety to radiation workers and the public.

This division extends the necessary physics support TVISION OF CYTOPATHOLOGY Department of Radiodiagnosis in Medical College Hospital and S. A. T. Hospital. Acceptance tests of newly installed machines periodic quality assurance tests, planning of X-ray installation, possible repairs of equipments etc. are some of the other activities undertaken by the division.

Academic Programme:

Physics teaching and training were imparted to the following categories of students:

- M. D. Radiotherapy
- M. D. Radiodiagnosis

DMRT, DMRD, CRA, III Year MBBS, III year B.Sc. Nursing.

As in previous years, one month field training was given to three students of the Diploma in Radiological Physics course of BARC, Bombay. Government approval is awaited for starting M.Sc. Medical Physics course.

Research Project:

Work on the AERB research project "Dose to thyroid and eyelens in radiotherapy especially in the case of the cancer of the upper trunk and head and neck regions" is progressing.

Participation in Workshop/Meeting:

- Mr. P. G. Gopafakrishna Kurup attended "Brachytherapy update and Selectron Users Meeting" held at Madras on 11.12.1989 and presented a paper on "Problems and 7 year experience with Selectron".
- Mr. T. S. Elias attended the International symposium on "Physics of Medical Imaging and advances in Computer Applications" hold in Delhi during 21-23 February, 1990.

Papers published:

Wilkinson, J. M., Ramachandran T.P. "The ICRU recommendations for reporting intracavitary therapy in gynaecology and the Manchester method of treating cancer of the Cervix Uteri": British Journal of Radiology,62, 362-366, 1989.

- Dr. N. Sreedevi Amma Professor
- Dr. B. Chandralekha Associate Professor
- Associate Professor Dr. Elizabeth K. Abreham
- Dr. G. Rejasekharan Pillai Assistant Professor
- Senior Scientific Officer Smt. J. Ambikakumari
- Sri. G. Reghunathan Nair Cytologist.

ACTIVITIES :

The important activities are more or less the same as those of the previous year.

- Screening of symptomatic women attending Gynaocology outpatient of SAT Hospital, Trivandrum for detection of precancerous and early cancerous lesions of the uterine cervix.
- Assessment of hormonal status of early pregnant women attending the SAT Hospital especially in those with bad obstetric histories like repeated abortions, spotting in the early months etc.
- Population screening from Cervical Cancer form PHC Thrikkadavoor, Quilon District & from Medical and Cancer detection camps in the state.
- Cytodiagnostic aspirations and their interpretations from patients attending the Regional Cancer Centre, MCH, SATH, SCD Hospital Pulayanarkottah, Dentai College, a few near by Government Hospital viz. General Hospital W & C Thycaud, District Hospital, Peroorkdada, Taluk Hospital, Chiravinkil etc.
- 5. Examination of body fluids like Ascitic fluid, gleural fluid, C. S. F., Urine Bronchial washings etc. for malignant cells from patients attending the RCC., MCH, SATH., SCD Hospital and other nearyby Govt. Hospitals.

- Examination of sputum for malignant cells from patients suspected to have carcinoma of the lung. Patients are mainly from R.C.C., SCD Hospital and M.C.H.
- 7. Peripheral smear & Bone marrow examination & reporting of cases of Regional Cancer Centre and occasional referred cases from haematology unit M.C.H.
- 8. Histopathological examination of surgical specimens.
- Review of Histopathology slides of patients referred to R.C.C. from other Hospitals.
- Teaching and training.
- Analysis of lesions.
 - (a) Colposcopic biopsies 2 years 1988 & 89
 - (b) Cervical smears 5 years 1985-1989.

Cytology services rendered to the various Departments

Gynaec Cytology

Unit	No. of cases	% of total	
01 SAT H 02 03 04 05 06 Postpartum clinic Camps R. C. C. Other Govt. Hospital & E. S. I. Private Hospitals MCH Unit not mentioned	2032 1291 1041 1248 798 508 508 811 67 127 152 12	23.27 14.78 11.92 14.29 9.13 5.82 5.82 9.29 0.77 1.45 1.74 0.14 2.14	
Total	8732	100	
		_	:

During the year 8732 cervical smears were examined majority being from SAT Hospital. There is an increase of 1130 smears than that of the previous year. Compared to previous year the number of smears from Medical camps also have increased.

This is mainly because of the cancer awareness programme of Community Oncology Division & and Cancer Detection Camps organised by them. Another important aspect this year the extension of cervical screening facilities to women attending postpartem clinics of SAT H. 508 women were screened in the postpartem clinic.

${\it Non~Gynesc}$ and Aspiration Cytology including body fluids

During 1989–'90 6480 nongynaec and aspiration cytology comeans including fluid cytology was examined from 6022 cases. 458 smears were repeat sample. In the analysis of lesions total frumber of cases (6022) are taken. Compared to the previous year there was an increase of 763 smears this year.

The following table gives the details of total number of smears received from various hospitals and departments. Department-wise distribution of smears.

Department	No. of cases	% of total
Surgical	1352	20.86
⊈_Ogrgron Simadiathorony	868	13.39
K. Kadibine why	580	8.95
S.Medicine	200	0.00
Radiotherapy Medicine Thyroid clinic, Endocrinology & nuclear medicine	549	8.47
e. nuclear medicine CENT	504	7.78
Medical gastroentorology	377	5.82
© Urology	339	5.23
Urology Private Hospitals	229	3.53
General Hospitals & ESI Hospitals	210	3.24
SATH	191	2,96
Medical paediatrics	154	2.38
SCD Pulavanarkottah	141	2.18
SCD. Pulayanarkottah Surgical Paediatrics	99	1.52
Surgical gastroenterology	87	1.34
Cancer Detection Camps	42	0.65
	39	0.60
Orthopaedics	. 19	0.29
Nephrology		0.28
Haematology	.18	
Others	114	1.76
Department not mentioned	568	8.77
		1009/
Total	6480	100%
•	_	-

Analysis of Cervical smears.

Detailed analysis of cervical smears shows the following

Lesion	No. of cases	%
Norma)	2796	32.02
Inflammation	4 349	(22 cases a
T- V. Infection	232	with dysplasia
Fungal infection HPV infection Herpes simplex	38 3 6	53.01
T. V. with herpes	6 1	
Glandular cell hyperplasia Reserve cell hyperplasia Endocervical regeneration	82 73 131	3728
Mild dysplasia Moderate dysplasia Severe dysplasia	483 37 30	6.30
Atypical cells Suspicious or suggestive of malignal	403	0.95
Carcinoma in situ	13	0.15
Presence of Malignant cells unclassi Invasive squamous caricinoma Adenocarcinoma Adenosquamous carcinoma	fied 14 106 13	1.53
Rediation change	19	0.22
Miscellaneous	90	1.03
Unsatisfactory	132	1 51
Total	8732	· .

Hormonal Cytology

Vaginal smears for hormonal assessment was done in 753-cases during 1989–'90. These included mostly cases of early pregnancy with history of repeated abortions and suspected hormonal deficiency, a few case from primary and secondary amenorrhoeas, sterility etc.

Population Screening

352 cervical smears were received from PHC Thrikkadavoor, purison. Out of these there were 8 cases of mild dysplasias, the case of carcinoma insitu and one case of invasive carcinoma. The case of carcinoma insitu was brought over here, colposcopy, mone biopsy and hysterectomy was done and the case is being followed up now. (Table A)

FNAC (Fine needle aspiration cytology). (Table B)

31,141.			'	•
	Total	Benign	Malig-	Sus-
Site of Aspiration	c ase s		nent	pecious
Thyroid	1594	1552	42	
Ľvniphπodes	955	642	285	28
Breast & nipple discharge	808	647	150	11
Liver	392	280	93	19
ENT all sites	186	106	70	10
Oral cavity	1 5 8	111	35	12
Skin & S/C tissue	158	107	50	1
Abdominal mass	80	55	22	3
Salivary gland	62	52	10	
Bone & Joints	47	22	25	
G. F. T.	39	29	9	1
Lung	31	20	11	
Female genital system	24	19	4	1
Pancreas	18.	15	2	1
Male genital	9	8	1	
Eyes & lacrimal gland	6	5	1	
Retroperitoneal mass	5	5		
Spleen	3	3		
Mediastinal mass	1	1		
Site not mentioned	13	10	2	1
Total	4589	3690	B11	88

Sputum cytology

During the year under report a total number of 6368 smears were examined from 3184 sputum samples received from 981 patients. 3–5 or more samples were collected from each

[™] Table A. Nongynaecological and Aspiration Cytology — Analysis of lesions.

Analysis of Body fluids

Site	Total no. of cases	 %	Benigi		Malig-		 Suspe_	
Applific fluid				_ _ %	nant ———	%	cious	%
Ascitic fluid Pleural fluid Urine C. S. F. Bronchial washing Pouch of Douglas Pericardial fluid Gastric washing	,653 318 232 119 12 13 7 7	43.82 25.20 18.38 9.43 0.95 1.03 0.56 0.56 0.08		91.68 88.99 96.55 78.15 100.00 92.31 85.71 42.86 100.00	41 29 6 24 1 1	7.41 9.12 2.59 20.17 7.69 14.29 57.14	5 6 2 2	0.90 1.89 0.86 1.63
Total	1262		15.54					
Grand Total of FNAC & fluids		<u>_</u> _	1141	90.41	106	8.40	15	1.19
epat aspiration		5851 629						
otal no. entered in the Rog.		6480						

Lesion	Total No.		Male		Female	
	of cases	%	-———	·—— %		%
No malignant cells	698	71.15	581	83.24	117	16.76
Fungus	161	16.41	126	78.26	35	21.74
Nematode larva	.2	0.20	. 1	80.00	1	50.00
Atypia/ suspicious of malignancy	61	6. 22	57	93.44	4	6.56
Squamous cell Ca.	20	2.04	19	95.00	1	5.00
Adenocercinoma	. 19	1.94	19	100.00		-
Small cell carcinoma	13	1.33	13	100.00		
⊾arge cell anaplastic Ca.	4	0.41	3	75.00	1	25.00
Malignant cell (unclassified)	3	0.31	3	100.00		
Totai	 	<u> </u>	822	83.79	 159	16.2

patient. Malignancies were reported in 59 cases. There was Histopathology a significant male preponderance in all types of malignancies Detailed analysis is shown below. Compared to previous year the total number of cases examined was increased by 135 (Table C)

Buccal smears

250 Buccal smears were examined from 125 patients for sex chromatin.

Bone Marrow aspirations, inpressions & peripheral smears.

410 samples of Bone Merrow and peripheral smears were examined on an average 4 Bone Marrow slides are examined from each case and hence the total number of smears screened comes to more than 2000 (including peripheral smears); Predominent lesions were acute leukaemias and NHL infiltrations There was slight increase in the total no. of cases compared to that of previous year. Detailed analysis is shown below.

Lesion	Fresh cases	Follow up
ALL	14	7.44
AML	18	65
Acute Leukaemia-unclassified	1	ي 2
CML	-,	
CML Blast crisis	1	1 ->4
CLL	4	
Multiple Myeloma	16	1 3
Plasma cell leukaemia	10	. 5 %
NHL infiltration	40	
NHL No. infiltration	19	11.00
Hidgkins lymphoma infiltration	97	
Hodgkins lymphoma no infiltration	1 .	3
Neuroblastoma infiltration	35	
Neurobiastoma na infilmation	3	1.0
Neurobiastoma no infiltration	2	· • • • • <u>\$</u>
Myelodysplastic syndrome	• •	4 🖫
Sezary syndrome	1	1.0
Adenocarcinoma metastasis	3	1.1
Others	79	
	- 	\
Total	332	78 🛒
Grand Total (Fresh cases & follow up)	410	- j

Histopathology services rendered include detailed histogathological examination of all surgical specimens received from R.C.C. and review of H.P. slides brought from other hospitals thy patients referred over here for further management. The satter often involved recutting of the blocks for special staining sand sometimes, even processing of fresh bits from the tissue ູ້ _{eve}ilable.

Total cases

During 1989-90 we had a total of 2489 reports of which 1827 belonged to routine processing & reporting & the rest 662 were review cases. (Table D)

Teaching and Training

The Cytopathology Division actively participated in the teaching and training programme of the Medical College Trivandrum. M. B. B. S. Students who are regularly posted in the Cytology lab during their rotation posting in clinical pathology were given an insight into cytological methods of diagnosis & their importance in patient management. Pathology postgraduates of Trivandrum Medical College were given training in Cytology for 3 months during their M. D. course & DCP candidates were given training in cytology for 1½ months. Training is also imparted for students of paramedical courses. DMLT students are posted in cytology for one week and B.Sc. MLT students are posted for 14 months and given practical training in Cytopreparatory tehnique in addition to 13-15 lecture classes. General Nursing students and female health superviser trainees (FHS) were also given training in collection, fixation and mailing of cervical smears, register maintenance and organisation of population screening programmes.

Besides these pathology post graduate of Kottayam and Calicut Medical colleges were also given one week training in the interpretation of various cytology materials. B.Sc. MLT students of Gandhi University Kottayam were also given one week training in cytopreparatory techniques.

HISTOPATHOLOGY AT A GLANCE

	s 	ystems	Total	%	Benign	 Maignant	 %	
1.	Oral Cavity	Pharyrix etc.	004	·				Suspecious
		Salivary gland		39,53	313	642	49.00	29
		Jaw	27	1.08	9	18	1.12	
Æ,	Female		2	0.08	2		2.12	• •
	genital system	Cervix Uterus and	504	20.25	165	333	20.75	6
		parametrium	28	1.04	13			
		Vulva, GVagina & Vau!	t 14	0.56	3	13	0.81	.,
		Ovary	57	2.29		11	0.69	.,
	Breast			20	6	49+2	3.18	
Ш.			150	6.03	43	(Borde		
	Hematopoetic	Lymphnode	263	10.57	42	108	δ.73	
	System		•		70 L	ymphoma 80 4	1.98%	
						. N	HL 59	
		•				H	/L-21 ·	
IV.	GIT	BM, Spieen, Taymus	54	2.17	. ∙ Me; 		7.04	
	e and the second	and a fall harmon second of	48	1.93	-4-7 - 2-84 1	13		
W2\\$\\								
626	ever the second party	and the second s	hanaraziera	r — — — — — — — — — — — — — — — — — — —	eries sur la companya de la companya	ensoral Mail as		
		Liver, billary tract	12	0.48			27 to 10 m	Beriland Research
٧.	Skin		52	2.09	28	24		Literatura (1964)
VI.	Endocrine		50	2.01	17	33	2.06	
VII.	Soft tossue		43	1.73	15	28	1.74	
VIII.	Male genital							
	system		28	1.12	Ę	24	1.50	
X,A.	Bone and Joints		18	0.72	. 3	15	0.93	
В.	Kidney and							
	Urinary Tract		18	0.72	3	15	0.93	
Х.	Nervous System		15	0.60	4	11	0.69	
	Lung and Larynx		6+11	0.68	1	6+10	0.99	
XII.	Eye		3	0.12	. 1	2	0.12	
	Miscellaneous		66	2.65				
	Repeat biopsies		38	1.53				
·		Total 24	 4 8 9		 745	1605 (64.	48%)	 35

Postgraduates of other departments were given guidance in their thesis work which involved cytological aspects. During 1989-90 two thesis were guided & helped by Dr. N. Sreedeville Amma was a co-guide for the thesis "Fine Needle aspiration" in Lymphadenopathy-A clinicopathological correlation" submitted from Department of Surgery. The Division also helped in the preparation of a thesis from the Department of Medicing entitled study of Hepatocellular carcinoma with special reference to clinical features, pathological types, Tumour markers and Imaging Techniques" by providing the data on FNAC livers Dr. B. Chandralekha is guiding a thesis on FNAC of thyroid from Department of pathology.

As a means of continuing Medical Education regular oncocytohoisto pathological CPCS are conducted every month.

(6 mon) and Cytotechnologists (1 year) based on set objectives & specified carriculum. The 6th batch of Cytotochnicians has passed out in Feb. 1990 and the fourth batch of Cytotechnologists. in August 1989,

Research

1. Analysis of Colposcopic biopsies

An analysis of colposcopic biopsies done during two years: 1983 and 1989 was done and the results were correlated with clinical features, colposcopic findings and cervical smear, reports. Abnormal colposcopic findings were observed in a good number: of healthy looking cervices, but they all had some symptoms fike discharge perveginum, irregular bleeding per vaginum etc. Colposcopic examination was done in 224 women with abnormal cervical smear and/or clinically unhealthy cervics, and directed biopsies were taken in all cases. Subsequent to the biopsy report, cone biopsy and hysterectomy were done in selected cases. The analysis showed 96% cytohisto correlation for severe dysplasia & carcinoma institu and colposcopy was helpfulin pinpointing the site for biopsy as in almost all cases therewere no focal lesion. The false positive rate for cytology was 0.47% and false negative rare was 15.9% when all the lesions were taken together; while the false positive rate for colposcopy

was 3.74% & false negative rate 20.56%. The pick up rate these early lesions was significally increased when colposcopy and cytology were combined.

Analysis of cervical smears

An analysis of cervical smears received in the laboratory. Juring the past 5 years from 1985 to 1989 was done. There were a total of 40,443 cases. The histopathology of cases reported as severe dysplasia, carcinoma insitu and malignancy were collected and correlated with the Cytology report. The cases which did not correlate with histopathology were reviewed as a means of quality control. The analysis showed that dysplasias constituted 10 41%, CIS 0.11% and Invasive carcinomas 2,69% of the total cases. The histocytocorrelation for carcinoma Full time training courses are conducted for Cytotechnicians insitii was 88.57 and for invasive carcinoma was 98.63. The non) and Cytotechnologists (1 year) based on set object. wvs not done in these cases to confirm them. The studyshowed that cervical smear examination is a reliable method to detect cancerous and precanerous lesions of the Uterine cervix.

> In this analysis work we are thankful to Dr. M. A. Aleykutty, Professor of Pathology, Medical College, Trivandrum for the kind co-operation extended to our staff in collecting the histopathology reports from thier registers.

> This paper was presented in the XIX Annual conference of the Indian Academy of Cytopathologists and won the Jwaladevi Award for the best paper presented by Cytotechnologist.

Conference attended

Dr. N. Sreedevi Amma --- CME programme on G. I. Tract discases 13-10-89 Department of Pathology Medical College, Trivandrum IAPM Regional Chapter meeting 14-10-89 Department of pathology Medical College, Trivandrum. 'Red Rose Symposium' 14-11-89, R. C. C., Trivandrum. Annual Review meeting of NCRP & Pannel of pathologist meeting 18th to 18th Nov. 1989 AIIMS, New Delhi.

XIX Annual Conference of Indian Acedemy of cytologists 10th to 12th Feb. 1990, Udaipur,

Dr. B. Chendralekha — Red Rose Symposium, 14-11-89

IAPM Regional chapter meeting, 14-10-89 Dept. of Patho follower passed the examination. logy, Medical College, Thiruvananthapuram.

Dr. Elizabeth K. Abraham — Regional Chapter meeting of IAPM, 8-4-89, Lisie Hospital, Ernakulam.

CME programme and IAPM Regional chapter meeting, 13th) to 14th October 1989; Dept. of Pathology, Medical College, Thiruvanenthapuram Red Rose Symposium, 14 - 11 - 1989, R. C. C., Thiruvananthapuram.

Oncopathology workshop, 7th & 8th Dec. 1989, TMH., Bombay. Annual conference of IAPM, 10th to 12th Dec. 1989, Rother activities

Dr. G. Rajasekharan Pillai - Regional chapter meeting of IAPM 8-4-'89, Lisie Hospital, Ernakulam. Red Rose sympo-: slum, 14-11-1989, RCC., Trivandrum.

Shri, K. Raveendran Pillai -- Red Rose symposium, 14-11-'89, R. C. C., Thiruvananthapuram.

Smt. Mollykutty John - XIX Annual conference of IAC 10th to 12th Feb. 1990, Udaipur.

Training of staff

Dr. Elizabeth K. Abraham -- Short term course in computer applications 23-1-'89 to 20-3-'89, Institute of Human Research and Development for Electronics.

First National workshop on Enzyme Histochemistry & immunohistochemistry, 5-7-'89 to 22-7-'89. Department of Pathology, P.G. Institute for Basic Medical Science, Taramani,

Sri, K. Raveendran Pillei — Training course in "Mammalian cell culture" 4-12-'89 to 16-12-'89, centre for cellular & molecular biology Hyderabad.

Regional Cancer Centre, Trivandrum. CME programme on the guidance to prepare for the National Examination of College, Thiruvananthapuram.

Smt. Najiya. S., Laboratory reclinical of the National Examination of College, Thiruvananthapuram.

Smt. Najiya. S., Laboratory reclinical of the National Examination of College, Thiruvananthapuram. She appeared for the examination in Dec. 1989 in AIIMS, New

Rapers presented in conferences

Dr. N. Sreedevi Amma — "A correlative study of cervical Mology, colposcopy and Histology, "XIX Annual Conference Dr Elizabeth K. Abraham - "Malignant 爵 JAC, Udaipur. Systamic mastocytosis" as case report - in Annual Conference APM held in Bombay. Smt. Mollykutty John - "Cytohistocorrelation of Cervical Cytology, en analysis of 40,443 cases" h XIX Annual conference of IAC Udaipur.

This division had an active role in the activities of early Scancer detection programmes. The staff of this division actively Charticipated in various cancer detection camps (more then 30 camps organised by the community oncology Division of R.C.C., National service scheme, District collectors and other voluntary Pagencies & were given facilities to collect cervical smears and FNAC at the camp site.

DIVISION OF RESEARCH

Dr. (Mrs) Prabha Balaram : Associate Professor

2. Dr. Vijayakumar T. : Senior Research Officer

3. Or. K. K. Vijayan : Lecturer

Mr. Thomas Abraham 4. : Scientific Officer

Mr. Ravindran Ankathil : Scientific Officer

6. Mrs. Remani, P. : Lecturer

Mrs. Padmavathy Amma B. : Technical Officer.

The Division was mainly concerned with research activities on immunochemical, molecular, biochemical, cytogenetic diagnosis of malignant changes in leukoplakic lesions. immunochemical and electron microscopical aspects of human cancers. Immunological investigations were carried out in cancerous and precancerous lesions of the oral cavity and cancer of the lung. Oral cancer patients were classified into three groups based on the effect of patients (autologous) serum of lymphocyte functions. Accordingly, the 56 patients investigated could be grouped into blockers (44%), enhancers (26%) and those with no blocking or enhancing serum activity (30%) on a cell functions. In an effort to characterise the blocking factor, the effect of isolated circulating immune complexes (CIC) on the T lymphocyte function was assessed. The response with CIC did not always corrolate with the effect of the whole serum suggesting that there are other factors present in the cancerserum responsible for the blocking/enhancing effect. The patients are being followed upto evaluate the changes in serum immunoregulation following therapy. Evaluation of immune competence in 60 lung cancer patients showed gross immunological alterations such as alteration in the monoclonal antibody defined T and B lymphocyte populations, reduced mitogenic responses, increased IgG and IgA levels and association of low IgM levels with distant metastasis. Immune responses in diabetic and nondiabetic patients with periodontitis revealed gross impairment with a higher degree in patients with diabetes. Another study in progress is the evaluation of the status of tumour

Rikers such as AFP, CEA, Beta-2- microglobulin, SCC, CA on and cytoskeletal proteins in precancers and cancers of oral cavity and cervix. Profound alterations in the immunogical parameters were found in children with necrotising ente-Increase in serum IgA levels was a prominent feature in parients.

Ultrastructural studies were carried out in 25 leukoplakia sees and 25 oral cancer cases. Eight of the twenty five leukolakia cases showed marked cellular and architectural changes. st these 8, 3 were found to have precancerous changes at the and microscopy level. Of the other 6 in which no precencerous Regardes could be noticed in LM, two showed malignant changes the EM level and converted within two years of the EM abservation thus suggesting the potential use of EM in early

Biochemical studies carried out were the following:-5 seeds and 1 latex were identified from among 23 new seeds and 3 latexes screened for positive lectin activity. The lectin eactivity of Mangifera indica (mango seeds) and Persea americana (Ayagado pear) were found to be due to polysaccharides. Binding of jackfruit lectin isolated and labelled with HRP in this laboratory showed higher affinity to neoplastic cells in cervix and thyroid tissue when compared to normal cells. in the concentration of trace and bulk elements like. Copper Zinc, Magnesium, Manganese, Cobalt, Cadmium and Selenium and serum iron and total iron binding capacity were observed in oral SMF patients. Findings suggest chronic iron deficiency to be one of the etiological factors for OSMF.

Evaluation of HPV DNA was carried out in 50 cases of cancer of the ulterine cervix in collaboration with the Institute of cytology & Preventive Oncology, New Delhi. An increased incidence of HPV 6 & 18 was noticed in these lesions.

Chromosome studies carried out in bone marrow samples of 65 patients (29 males and 36 females) with acute lymphoblastic leukemia (ALL), before starting therapy revealed the following: Clonel chromosome abnormalities were detected in 32 petients (49.5%) while normal karyotype was observed in 33 patients (50.5%). The karyotypes fell into five categories according to the modal chromosome number (1) Normal diploid (50.5%) (2) Pseudodiploid (9.2%) (3) Hypodiploid (4.6%) (4) Hyperdiploid with 47–50 chromosomes (30.7%) and (5) Hyperdiploid with 50 chromosomes (4.6%). The chromosome abnormalities belonging to B, C, E and G groups. Gain of chromosomes belonging to B, C, E and G groups. Gain of chromosomes (16.9%). Trisomy 8 (12.3%) and trisomy 18 (9.2%) were detected in tesser frequencies. Deletion of the long arm of chromosome No. 6 (6.1%) and translocation between chromosomes 4 and 11 (3.07%) were detected. Ph chromosomes were detected in 4.6% of the patients. These patients are being followed up to evaluate the relationship between the chromosome abnormalities observed and the pregnasis and survival period.

Papers published/presented at conferences.

 Radhakrishna Pillai M; Prebha Balaram; Padmanabhan T.K; Thomas Abraham; Hareendran, N.K. and Krishnan Nair, M; Immunocompetence in lung cancer; relation to extent of tumour burden and histological type.

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- Ravindran Ankathil, Vijayakumar, T; Vasudevan, D. M; Joy Augustine and Krishnan Nair, M: Practical value of cytogenetic (chromosome) studies in the diagnosis and/or prognosis of patients with malignant neoplesms. Proceedings of the 1st Kerala Science Congress, 1989.
- Radhakrishna Pillai, M.; Prabha Balaram; Bindu, S.; Hareendran, N.K.: Padmanabhan, T.K. and Krishnan Nair, M.: Interleukin 2 production in lymphocyte cultures: a rapid test for cancer associated immunodeficiency in malignant cervical neoplasia. Cancer Letters 47 (3): 205–210, 1989.

- Rajendran, R; Vijayakumar, T; Vasudevan, D,M.; An alternative pathogenetic pathway for oral submucous fibrosis (OSMF). Medical hypothesis 30:35, 1989.
- Ravindran Ankathil; Vijayakumar, T; Sudha, L; Remani, P; Vasudevan, D.M; Stephen, J, and Krishnan Nair, M; Chromosome abnormalities in squamous cell carcinome of the human oral cavity. Neoplasma Vol 37 (2): 191–197, 1990.
- 7 Radhakrishna Pillai,M; Prabha Balaram; Hareendren, N.K; Bindu, S; Thomas Abraham; Padmanabhan, T.K. and Krishnan Nair, M: Immune reactive proteins as prognostic and clinical markers in malignant cervical neoplasia. J. Cancer Res and Clin Oncol 115: 583–591, 1989.
- 8. Redhakrishna Pillai, M: Prabha Balaram; Bindu, S; Hareendran, N.K; Padmanabhan, T.K. and Krishnan Nair, M; Radiation associated eosinophillia and monocytosis in carcinoma of the uterine cervix; a simple reliable prognostic and clinical indicator. Neoplasma 37 (1): 91, 1990.
- Remani, P; Joy Augustine; Vijayan, K. K; Ankathil. R; Vasudevan, D. M; Krishnan Nair, M. and Vijayakumar. T: Jackfruit lectin binding pattern in benign and malignant lesions of breast. In vivo 3:275, 1989.
- Rajendran, R. and Vijayakumar, T: Acute myeloid leukaemia a case with unusual clinical presentation. Ker Dent, J, 12: 197, 1989.
- 11. Anil, S. and Vijayakumar, T: Oral manifestation of HIV infection. CARC calling 2 : 2021, 1989.
- Anil, S and Vijayakumar, T: Oral manifestation of HIV infection. Proc Nat Symp on AIDS, Tirunelvely, 1990. pp. 14–16.
- Vijayakumar, T: Immunology of solid tumours and premalignant lesions. ICMR Buil 19:91, 198°.

- 14. Rajendran, R; Sujathan, C.K; Augustine, J; Vasudevall D.M. and Vijayakumar, T: Ackerman's tumour (verruco) carcinoma') of the oral cavity: A histopathologic stull of 426 cases. Sing Dent J 14: 48, 1989.
- 15. Remani, P and Vijayakumar, T: Lectins properties and biological applications Ker Dent J 13: 219, 1989.
- Anil, S. Remani, P. Vijayakumar, T and Joseph, P. Total hasmolytic complement (CH 50) and its fraction (C3 and C4) in diabetic patients with periodontitis.
- 17. Haseena Beevi, V. M. and Vijayakumar, T. Aspirin A overview. J Odontol Stomatol Maxilofac, Sug 1:8
- Anil, S; Remani, P; Ankathil, R and Vijayakumar, T; Role of circulating immune complexes in the pathogeness of localised juvenile periodontitis. Sing Dent J 14:

Conferences attended

- Anil, S; Remani, P; Ravindran Ankathil and Vijayakumar, T;
 XIX Annual conference of Indian Immunology Society,
 October 1989, Sevagram, Wardha.
- 2. Vijayakumar, T; Shanavas, K. R; Remani, P; Anif, S; Rajendran, R and Krishnan Nafr, M.
 - International Congress of Oral Cancer, November 1989.
- Prabha Balaram; Radhakrishna Pillai, M; Chidambaram,S; Padmanabhan, T. K. and Krishnan Nair, M. Second Kerala Science Congress, February 1990, Trivandrum.
- Remani, P; Joy Augustine; Vijayan, K. K.; Revindran Ankathil; Haseena beevi, V.M; Krishnan Nair, M and Vijayakumar, T. II Kerala Science Congress, February 1990, Trivandrum.

- Sreelekha, T.T.; Vijayan, K. K. and Vijayakumar, T. H. Kerala Science Congress, February 1990, Trivandrum.
- Ravindran Ankathil. Il Kerala Science Congress, February 1990, Trivandrum.
- Girija Meenattoor, J. II Kerala Science Congress, February 1990, Trivandrum.

graining/Workshops participated

- Ravindran Ankathil Training in Radiation Biology, Radiobiology department, Kasturba Medical College, Manipal, July 1989.
- Girija Meenattoor International Symposium and workshop on Bioseparations. Centre for Biotechnology, Anna University, December 1989.
- Thomas Abraham Indo US workshop on Molecular Biology of Human Lymphoma and T Cell leukemia virus. Cancer Research Institute, Bombay, January 1990.

Teaching

MS/MD/MDS Thesis supervision

- Antinuclear antibodies in collagen diseases.
 (Department of Medicine, Medical College)
- Antinuclear antibodies in children.
 (Department of Pediatrics, SAT)
- Immunological evaluation of Peridontitis patients with diabetes (Dental College, Trivandrum).
- Immunological evaluation of children with necrotising enteritis (Department of Pediatrics, SAT)
- A clinical and immunological study on comeal transplantation (Department of Ophthalmology, Medical Coellge)
 - M.Sc. Project Supervision (Cochin University of Science and Technology)

- 1. A study on the profile of thymus dependent lymphocyce. Aided Research Projects in solid tumours Miss Shoots Charter the Projects in solid tumours - Miss Sheela Shany.
- Immunoregulation by serum factors in oral cancer -Mr. E. V. Dasan.

Ph.D thesis/Supervision - 7 Nos.

- Biological markers in squamous cell carcinoma.
- 2. Plant lectins and their binding patterns in human malignan tumours.
- 3. Chromosome abnormalities in human malignant neoplasm and their clinical significance.
- Immunopathological studies on oral leukoplakia. 4.
- Immunoregulation in squamous cell carcinoms of the oral cavity.
- Studies on bioactive polysaccharides.
- 7. Effect of rediosensitisers on radiation damage.

Special Award

Dr. Prabha Balaram, is the receipient of the State Committee on Science and Technology Prestigious "Young Scientist" award for the year 1990 for the best paper presented in the field "Health Care" at the Science Congress.

Clinical Services

Total No. of routine investigations Hematology	_	1,46,254
	_	90,100
Biochemistry		37,2 10
Urine, CSF & Others	_	18,800
Serum immunoglobulin	_	80
Lymphocyte typing	_	12
Antinuclear antibodies, Cryoglobulin etc.	_	22
VMA	_	15
Cytogenetics (Keryotyping)	_	15

O Desperon Links		
Project Immunodiagnosis of oral cancer using anti tumour antibodies	Agency Dept. of Science, Technology and Environment, Kerala Govt. 1987–'90.	Investigators Dr. Prabha Balan Dr. Thomas Cheriyan Dr. Lalith Bai Dr. K.T. Sreelatha
Synthesis of Antitumour peptides	Dept. of Science Technology and Environment, Kerala Govern- ment 1988–'90	Dr. P. K. Rajan Dr. K. K. Vijayan
Serum and tissue immunoglobulins as biological markers in premalignant lesions of the oral cavity, uterine cervix and breast.	Department of Science, Techno- logy and Environ- ment, Kerala Govt. 1988–'91	
Characterisation of serum blocking factors in cancer	ICMR 1989–'91	Dr. Prabha Balaram Dr. T. K. Padmenabhan
Isolation and purification of immune complexes from sera of cancer patients	Department of Science, Tech- nology and Environment, Kerala Govt. 1987–'90.	Dr. T. Vijayakumar Dr. K. K. Vijayan
Isolation and purification of tissue specific plant lectins and their use in the diagnosis and treatment of cancer	ICMR 1986-Dec. '89	Dr. M. Krishnan Nair Dr. T. Vijayakumar Dr. K. K. Vijayan

AND HOSPITAL CANCER REGISTRY (N.C.R.P.)

Mr. P. Gangadharan — Associate Professor

Dr. R. Sankara Narayanan — Assistant Professor

Mr. S. Muraleedharan Nair — Medical Statistician

Mr. R. Rayeendran Nair — Medical Records Officer

Mrs. G. Padmakumari Amma — Senior Research Fellow

A. Medical Records and Statistics Regional Cancer Centre.

During the year 1989, the new case registrations in the outpatient department numbered 5277, which was just about the same number as in 1988. The patient statistics for the year 1989 were as follows.

Patient Statistics 1989

TABLE (

Total new registrations Number of cancer cases Males Females Sex Ratio Benigh tumours Vesicular Mole All other and Non-cancer Inpatient admissions Deaths in the hospital No. of follow-up letters sent	5277 4507 (87% of tot 2441 2066 1.18 : 1.00 166 136 469 2877	al)
	623	

During the year 1989, the number of cancer cases registered were less than that in 1988, the reasons are unknown for this change, especially when the total attendance had remained steady. More non-cancer have attended the hospital for check-

The males out numbered females, though by a small perentage. Tables II & III presents the site, sex, age distribution to ancer cases.

Overall, 4% of the cases was in the paediatric age group and [5]% was in the age groups 50 and above. However in males, 56%, and in females 54% of the cases were in the age groups 50 and above. The centre is striving hard to maintain high diagnostic standards and microscopic verification of cancer is the first confirmatory of all diagnostic criteria in cancer. There has been 85% histological confirmation of the total cancer cases, the detailed sitewise tabulation of microscopic verification is in Table IV. The percentage distribution of cases and male to female ratios are also shown in Table IV. The ten leading cancer types in males and females were as in Table V.

TABLE V TEN LEADING CANCER SITES IN MALES & FEMALES 1989

Bi. Maran	1	Vlale	04.	Female		
Site	No.	- -	Site	No.	% .	
g.— — — — . gLung	317	12.99	Cervix	476	23.03	
Other Mouth	358	10.57	Breast	449	21.73	
Tongue	183	7.60	Other Mouth	137	6.63	
Oesophagus	128	5.24	Ovary	124	6.00	
Brain	103	4.22	Th yroid	90	4.36	
Stomach	98	4.01	Brain	67	3.24	
Larynx	98	4.01	Tongue	66	3,19	
Oropharynx	95	3.89	Gum	60	2,90	
Oropharynx Hypopharynx	89	3.65	Rectum	49	2.37	
Gum	74	3.03	Body uterus	32	1.55	

Lung has become the commonest cancer site in men replacing mouth cancer while cervix continues to be the commonest site of cancer in women. The overall percentage distribution of cancer cases have undergone only minor changes. However

from hospital statistics it is πot possible to draw generalisation and thus a correct evaluation of the significance of changes difficult. Apart from lung cancer becoming the leading cancer in men, cervix to breast ratios have undergone some change and it is anticipated that in the coming years there will be men breast cancer cases to attend to than dervix cancer cases.

Sex ratios, greater than 5:1 were noted for cancers of Floor cancer which was a feature seen all over the world.

programmes. The figure 2 shows that almost 50% of all cancer leaves. 31.2% of all female cancer was seen in reproductive in men was seen in oral cavity, Pharynx, Larynx and Lung system. Lung cancer was the leading cancer site in men, together and 54% of all female cancer was the leading cancer site in men, together and 54% of all female cancers was in Breast and Gynae Breast cancer was the leading cancer in Muslim & Christian cological sites together.

Whereas the pattern seen in men reflects the influence of ONGOING RESEARCH PROJECTS tobacco habits and thus unders cores the necessity and potentials for preventive action, the distribution seen in women highlights. the role of early cancer detection, self-examination, and the need for cancer awareness among the public at large.

Table VI gives the site distribution of 10 leading Paedjatric cancer cases. These ten sites together formed almost 90% of the cancer load in children.

B. HOSPITAL CANCER REGISTRY:

The Hospitel Cancer Registry, Medical College Hospitel, Trivandrum is a part of the network of cencer registries under the Indian Council of Medical Research, New Delhi. There are at present 12 Cancer Registries in the National Cancer Registry Programme which 6 are Population based, including a rural registry and 8 are Hospital based registries. The data from these registries are being used for the National Cancer Control Pro-

mmary of 1987 data of Hospital Cancer Registry

In 1989, the cancer cases seen in the year 1987 in different gistries were presented in the Annual Review Meeting of stries held in November 1989 in Delhi. From the Trivandrum Sistry, 4759 cancer cases were reported. The incident Fig. 1 the breast to cervix ratios are presented for the years. In 1987, cases numbered 4436 cases. There was 1982–1989. increasing trend in Incident case registrations. In 1983, 6715 cases were reported and in 1987, the number was 4436, increase of 16% over the 4 year period. Microscopic veri-Mourth, Oropharynx, Hypopharynx, Liver, Larynx, Lung and feation was 86% for the 1987 cases. The average age of the Urinary bladder. Female prepands on the service and for the females it was 51 Urinary bladder. Female preponderance was noted for Thyrology pale cancer patient was 52 years and for the females it was 51 cancer which was 5 features and 50% of female cancer. Nears. 65% of male cancer patients and 59% of female cancer satlents were above 50 years. Oral cavity & Pharynx formed The date also highlights the potentials for cancer prevention 29.9% among male cancers and 17% among female cancer rammes. The forms 2 are in reproductive Women. In Hindu women corvix was the leading cancer site.

The Hospital Cancer Registry has undertaken the following research activities.

Natural Background Radiation Cancer Registry.

This is a project funded by the Department of Atomic Energy. Govt. of India. The period of study is 1990-1995. The budgeted expenditure is Rs. 35 lakhs. The objectives of the study are:---

- What is the cancer incldence in the area.
- Is it different from other population groups.
- What is the pattern of cancer in the area. 3.
- Is it different from other greas.
- Are the incidence and pattern related to background radiation and is it dose related.

In this project, a house to house survey is undertaken (which is complemented by) cancer check up clinics, and surveillance of morbidity and mortality.

National Cancer Data base

This is a project funded by the Department of Electronics Government of India. The initial funding is for 3 years. The objectives of the study are to create a data base for all cancerelated information to be used for cancer control in India. They relate to information on cancer incidence, mortality, treatment facilities, inventory of ongoing clinical and basic research, cancer literature, community anti-cancer programmes etc. In this the initial effort is to evolve standard data collection formats computer software, and cancer facilities information collection from various centres all over the country etc.

3. Epidemiologic study of Stomach Cancer - Bombay

This is funded by the Indian Council of Medical Research.

New Delhi. This is a multicentric project initiated to study the suspected associated factors of stomach cancer. This is a case-control study. Present funding is upto 31st March, 1991.

4. Causes of Delay in Cancer

Cancer is curable when detected early and treated promptly. However cancer cases continue to be detected late in the course of the disease. In the Regional Cancer Centre almost 80% of the patients come with disease spread either regionally or with distant metastasis. The study evaluates the patient related delay and the physician related delay.

5. K. A. P Study

The knowledge, attitude and practice pattern (KAP) of the general population of Kerala on cancer is assessed by studying a 600 individuals who accompanied patients attending the Medical College Hospital, Trivandrum. KAP information aids in planning and targeting health education.

6. Diet and Cancer

Diet as a major modulator of carcinogenesis is increasingly appreciated. This particular case control study attempts to

_{Evaluate} the role of local distary practices in epithelial cancers like oral, pharynx, larynx, lung desphagus, colon, breast and terine cervix. Dietary information has already been collected in more than 2000 cancers and approximately 1200 controls.

7. Thyroid Cancer – Epidemiology

This is a descriptive epidemiologic study of thyroid cancer sees seen in the Hospital Cancer Registry, Trivandrum with regard to morphology type, age, sex, religion and geographic region.

8. Treatment & End Results Study

Analysis of treatment practices, response rates and survival of patients with oral, oropharyngeal, laryngeal, breast and bervicel cancers.

Medical students are encouraged to get exposed to research methods by involving them in studies pertaining to clinical profile and survival of above-mentioned cancers. Some of the above studies are at the stage of analysis now.

9. Epidemiologio study of Skin Cancer

This is a descriptive epidemiologic study of skin carcer cases seen in the Hospital Cancer Registry analysed with regard to histology, age, sex, community and site of cancer.

10. Occupation and Cancer

This study was initiated as recommended by the Annual Review Meeting of the National Cancer Registry Project in 1989. Along with the Hospital Cancer Registry, Chandigarh, the Registry at Trivandrum was chosen for this study. The study is being conducted as per the direction and with the involveent of the National Institute of Occupational Health, Ahmedabad.

Evaluation of chemopreventive potential of Beta Carotene and Vitamin A in Oral precancerous lesions.

This study is an interactive programme of the registry with community encology division and the University of British

Consider this study is in a series of the control o Canada, this study is in operation since 1986. Vitamin A and Beta carotene have been proved to have chemopreventive potential and further studies are initiated to address issues in dosage and spacing.

Evaluation of Lutein as a chemopreventive agent 12. in Oral precancerous lesions.

This study, to be funded by EEC and American Association of Cancer Research, is again a collaborative programme involving the Registry, Community Oncology Division, MRC Dunn Nutrition Unit, Cambridge, MRC Biostatistics Unit, Cambridge and University of Birmingham, UK. Lutein is a major water soluble. carotenoid with proven chemopreventive potential in laboratory. studies. This is probably first planned human trial where it will be compared with Betacarotene and Vitamin A. This study involves several laboratory and clinical end points.

Other activities

- Mr. P. Gangadharan was invited to attend the symposium held in connection with the Rotary Cancer Hospital Day, New Delhi and presented a paper on "Epidemiology of Breast Cancer" in November, 1989.
- Mr. P. Gangadharan presented a paper on "Cancer of Thyroid" during the Annual Meeting of the Indian Association of Cancer Research, Mysore in March, 1990.
 - Dr. R. Sankaranarayanan attended the following conferences
- 1. Workshop on Cancer Control Programme jointly sponsored by Ministry of Health and Family Welfare, Government of India and World Health Organization held at Bangalore in December 4-7, 1989.
- 2. Meeting on organisation of Preventive Oncology units in India, ICMR, New Delhi in March 15, 1990.

The Hospital Cancer Registry, Trivandrum continued to publish 'CRAB' the Journal of the National Cancer Registry Programme. In the absence of Dr. Sankaranarayanan, Dr. T. K. Padmanabhan edited the issues.

- Dr. R. Sankarenarayanan returned after an years' training Cancer Epidemiology in Medical Research Council (MRC) ambridge, England. The training was under the Common-_{lealth} Fellowship Plan.
- 2. Smt. G. Padmakumari Amma has proceeded to England or a six month training in Cancer Epidemiology at M'. R. C. čambridge.

publications

- Şankaranarayanan R, Duffy SN, Padmakumari G, Day NE, Krishnan Nair, M. A case control investigation of cancer of the oral tongue and floor of mouth in Southern India. Int. J Cancer 1989: 42: 195-199.
- Sankaranarayanan, R. Duffy SN, Padmakumary G, Day NE and Padmanabhan, T.K. - Tobacco Chewing, alcohol and nasal snuff in cancer of the gingive in Kerala, India. Br. J Cancer 1989; 60; 638-643.
- Sankaranarayanan, R. Orel Cancer in India. An epidemiologic and clinical review. Oral Surg, Oral Med, Oral Path 1990; 69: 325-330.
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- Stich, HF, Brunneman, KD, Mathew, B, Sankaranarayanan, R, Krishnan Nair, M. Chemopreventive trials with Vitamin A and Betacarotene: Some unresolved issues. Preventive Med. 1989; 17: 732-739.
- Sankaranarayanan, R. Systemic and topical treatment of oral feukoplakies. Br. J. Oral maxillofacial Surg. 1989; 27: 160-261 (Letter)
- Sankaranaryanan, R. Role of Chemotherapy in the management of oral cancer. J. Royal Soc Med 1989; 82; 573 (Letter)
- Jayalekshmy, P; Letha, PT; Krishnan Nalr, M; Padmanabhan, TK. Reasons for delay in cancer diagnosis. Cancer Registry Abstract Nov. 1989; Vol. III, No. 2: 10-11.

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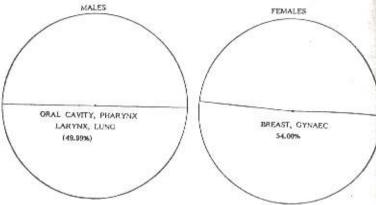
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REGIONAL CANCER CENTRE 1989 DISTRIBUTION OF CANCER IN MALES & FEMALES



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3 411 505	45	55	1987
485 504	49	51	1988 (989)
449 476	4.9	51	1989
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B. Breast Cancer C. Cervix Concer Number in brackets Right side is total of Breast & Cervix Concer cases

FIG. 1, BREAST - CERVIX RATIOS, 1982-1989

TABLE VI TEN LEADING PAEDIATRIC CANCERS 1989

Tunn of Conces	E	Boys	T (C)		Girls
Type of Cancer	No.	%	Type of Ca	No.	%
Leukaemia	32	30.77	Leukaemia	25	31.26
Brain	19	18.27	Brain	20	25.00
Lymphoma & HD	15	14.42	Bone	9	11.25
Bone	5	4.81	Ovary	5	6.25
Connective Tissue	4	3.85	Eye	5	6.25
Liver	4	3.85	Lymphoma &	HD 4	5.00
Kidney	4	3.85	Connective T	issue 3	3.75
Eye	4	3.85	Kidney	2	2.50
Thyroid	3	2.88	Thyroid	2	2.50
Nasopharynx	3	2.88	Liver	1	1.25
Total	93	89.43	Total	76	95.00
All Sites	104		All Sites	80	

92% of childhood cancers seen are found in the above 10 leading sites.

DIVISION OF COMMUNITY ONCOLOGY

- Dr. Babu Mathew
- Associate Professor
- 2. Dr. Ramani S. Wesly
- Lecturer

The Community Oncology as an entity and faculty was established for the first time in India at the Regional Cancer Centre, Trivandrum in 1985. It has now completed 5 years of its existence; and during this short span, the division's achievements were well appreciated at national and international levels. As in the previous years the major activities were centred round on the following lines.

- Health Education on Cancer
- Professional training
- 3. Generation of software for cancer awareness programmes.
- Training and utilisation of voluntary organisations for cancer survey and surveillance.
- Cancer Screening Programmes in rural areas.
- Community based epidemiological and interventional research.
- 7. Starting of a supplimentary registry for precancerous lesions.

During the year under report in addition to college students, as a new venture, we imparted trainings on detection and awareness programmes, to a few selected unemployed youths, members of Voluntary Organisations etc. and utilised them for detection of cases. It is quite gratifying to note that this maiden venture fetched excellent results.

I. Health Education on Cancer:

The cancer related health education was carried out through media, health awareness programmes for voluntary groups as well as students.

Cancer Awareness Programmes:

22 Cancer Awareness Programmes were held throughout the State, the details of which are given in Table I.

g. Participation in Health Exhibitions

This division took part in 3 major exhibitions and 6 School Science Exhibitions. It also supplied software to Early Cancer Detection Centre, Palghat to participate in the exhibitions held in Government Victoria College. The exhibitions at Trivandrum and Mar Basalius College, Kottayam were seen by several thousands of people.

Having realised that the Panchayaths have to play a pivotal role in the implementation of community helath activities, a State level health festival was organised at Palghat jointly by the Regional Cancer Centre and India Population Project of the Health Services Department of Kerala on 3–3–1990. This was inaugurated by the Hon'ble Minister of Health and Family Welfare Shri. A. C. Shanmughadas in a meeting presided over by the Hon'ble Minister for Power and Rural Development Shri. T. Sivadasa Menon. 207 Panchayath Presidents and 9 Block Development Chairman (The participants evinced keen interest in the implementation of cancer control and prevention programmes in Panchayats.) attended the cancer awareness programme and the cancer exhibition.

C. Articles in Lay Press:

3 articles were published by Dr. Babu Mathew in the lay press during the period under report, the details of which are given below:

i.	1.	Importance of cancer Education	Aug. 1989	Memoirs of N.S.S.
2	2.	Pukaelayum Vayile Cancerum	Jan. 1990	Ningalute Arogyam
3	3,	Cancer Bhadhikkan Kooduthal Sadhyatha	Feb. 1990	Kudumba Sahayee

D. Programmes through All India Radio:

A total of 5 programmes were broadcast through All India Radio during the year by the staff of the Community Oncology Division. Four Talks and discussions on the "harmful effect of tobacco", "Oral Cancer" "Prevention of Cancer" and an introduction about "Battle Against Cancer at Kottayam" were given by Dr. Babu Mathew and "Misconcepts on health" by Dr. Ramani S. Wesly through All India Radio.

Antitobacco slogans and information on prevention of cancer were broadcast through All India Radio in between the main programmes.

E. Programmes through Doordarshan;

A programme for 20 minutes on Regional Cancer Centre was produced by the Trivandrum Doordarshanbased on the script and direction by the division. It was telecast on 27th March, 1990. Antitobacco messages were telecast as fillers in between major programmes. File shots of portions of our 3 previous programmes were also tetelocast during the period under report.

II. Professional Training:

Two batches of Public Hoalth Nursos were given training on the principles of cancer provention and control. 67 Public health Nurses were given classes for 2 days in the months of April and October, 1989.

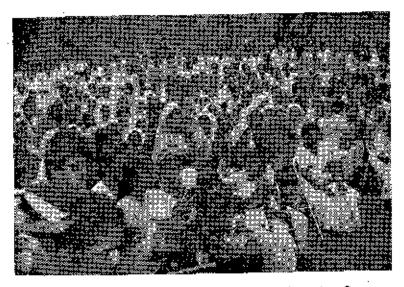
A batch of 40 Health workers working under Trivandrum Social Sorvice League were given one day training on Cancer Prevention and Control. The division is all set for giving training to Medical students and Medical Officers.

III. Generation of software for Cancer Awareness Programmes:

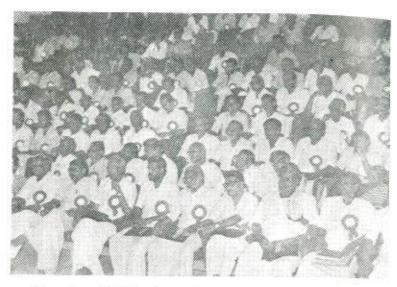
Several posters, slogans, leaflets, models and projection slides were generated, pretested and evaluated during the period under report.



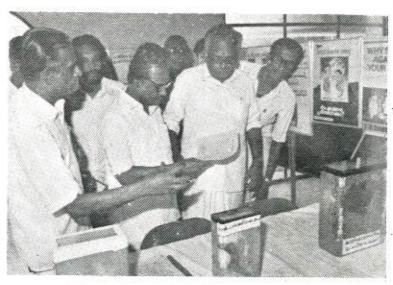
Trained Volunteers conducting field survey and examining Villagers at Chavaserry.



A view of the crowd attending the Cancer detection Camp at Chavaserry.



More than 200 Panchayat Presidents of Idukki, Palghat, Malapuram and Wayanad districts attended the Cancer Awareness Classes held at Palghat on 3-3-90.



Shri. A. C. Shunmukadas, Hon'ble Minister for Health and Shri. T. Sivadasa Menon, Hon'ble Minister for Power and Rural Development, keenly watching the exhibits in the Cancer Awareness Exhibition at Palghat, on 3-3-90.

25 posters were developed with the help of amateur artists. They were displayed in the exhibitions and various training programmes for pretesting and evaluation. A leaflet for training the volunteers for cancer survey and surveillance was developed and is being pretested during the Chavassery Programme. A model to show the hazards of smoking was made by school students under our instruction and this was given the first prize in Science Exhibition at the state level. A set of projection stides with tape recorded audio commentary is now available for the use of voluntary agencies for cancer awareness programmes.

Training and Utilisation of Voluntary Agencies for Cancer Survey and Surveillance.

This year this division concentrated on giving training to youths and members of Voluntary Organisations and thereby generating man power for cancer awareness and detection programmes. The trainees were utilised for detection of all suspected cases by themselves by making house to house visits. These cases were further examined by experts from Regional Cancer Centre for confirmation. The details of each of such major camps are given below:

a) The first one was organised in a Fisherman Village, Azeekal and sponsored by the Azeekal Development Project. 92 unemployed educated youth were trained for one day by staff of the Community Oncology Division to carry out tobacco survey, examine the oral cavity and ask questions regarding seven warning signals of cancer with the help of didactic lectures, patient demonstrations and discussions. These volunteers in turn personally contacted 13959 persons out of a total population of 14971, within a period of six weeks and 9 cases of new cancers 169 precancerous lesions were detected.

A similar training was given to educated youth for cancer survey and surveillance at Chavassery, Cannanore District. This programme was sponsored by North Malabar Gramin Bank and Farm Information Exchange Club of Chavassery. One hundred and fifty youth were given training on 20-3-1989. This work is in progress.

- b) A programme named "BACK" (battle against cancer at Kottayam) was inaugurated by Sri Mani Abraham, Chairman, Chair 600 College students, (N.S.S. Volunteers) of the Mahatma Gandhi University and made them competent to conduct tobacco 2. I.C.M.R. Project on the Feasibility of utilising trained survey and for screening and detection. So far they have idea 2. I.C.M.R. Project on the Feasibility of utilising trained survey and for screening and detection. So far they have iden tified 700 suspected lesions. The work is in full progress and is expected to be completed by the middle of 1990.
- c) The N. S. S. Unit Government Arts College, Trivendrum under Prof. N. Sadasivan has undertaken a tobacco survey and oral cancer detection programme in 7 urban slums of Trivandrum City. When the students examined 1872 high risk persons in these slums, they have picked up 892 persons with suspicious oral lesions out of which 3 new cancers and 90 precancerous lesions were detected.

V. Cancer Screening Programmes in Rural areas.

The Community Oncology Division has conducted 48 cancer detection camps during the current year. After the appointment of a Lady Lecturer in the department we were able to meet the requests for cancor detection camps from various regions of the Stato. In these camps 6871 (high risk) persons were screened. Forty two now cases of cancer, 15 treated cases with active disease and 534 precancerous lesions were diagnosed in these camps. The details are shown in the Table II.

This division maintains a registry of all precancerous cases and do their follow up. It will facilitates epidemiological studios very much

Research Activities

Ongoing Projects:

1. Collaborative studies with the Environmental Caroinogenesis Unit, University of British Columbia, Canada.

In the provious four years about 10 short projects were taken up in the collaborative study with University of British Columbia. Only 2 short projects on estimation of Beta Carotene

Multipurpose Health Workers for Primary and Secondary Prevention of Oral Cancer in the rural areas.

The project was started in January 1988 and the Phase I and the Project was over in July 1989. After this period 292 trained health workers were expected to identify oral cancer in early stages of presentation and refer to the Regional Cancer Centre, Trivandrum. They could refer so fer only 3 cases thereby qustioning the feasibility. We are contemplating alternate strategies.

The Phase II of the study, the antitobacco Community Education Programme using the health workers was to be started in July, 1989. Due to the transfer of one of the Co-investigators this could not be done. In the regular health education programmes conducted by the health workers, antitobacco education is not included.

60% of the male health workers are tobacco habituces and most of the health workers were reluctant to take up antitobacco health education programmes in the community. Therefore new strategies are being formulated to launch an effective antitobacco community education programme.

B. New Projects:

Preventive Oncology Centre:

The ICMR has sanctioned 2 Preventive Oncology Centres in India, one at Ahamedabad and the other at Trivandrum in November, 1989. To fulfill the objectives of the Preventive Oncology Centre, 7 projects within the framework of the mandate: given by ICMR were submitted in December 1989. The review Committee has finally agreed in March 1990 the following projects to be started in the Preventive Oncology Centre from next financial year. The projects are -

14.5

- (1) Preparation and inclusion of a lesson on health hazards of tobacco for students in Standard VII.
- (2) Antitobacco campaign through high school children.
- (3) Continuing Medical Education ол cancer for Medical and Dental personnel.
- (4) Opportunistic Cancer Screening in Kazhakuttan Village.
- 2. Collaborative studies on Chemoprophylaxis of Oral

Preliminary discussions were made in January, 1990 of Trivandrum with Professor M.K. Basu of University of Birmingham, United Kingdom on a collaborative project of Chemoprophylaxis of Oral Precancers with Vitamin A and retincids. The project is expected to be flagged off in October, 1990.

Papers Published:

- /Babu Mathew: Action on Tobacco Control: Role of National / Service Scheme. Monograph on Tobacco and Health: The Indian Scene, L.D. Sanghvi and Perin Notani (Eds.) UICC Workshop, Bombay, India, 1989 Pages 202–204.
- Babu Mathew: Intervention Studies of Tobacco Behaviour modification in Kerala State, Monograph on Tobacco and Health: The Indian Scene, L.D. Sangivi and Perin Notani (Eds) UICC Workshop, Bombay, India 1989, Pages 147–149.
- H. F. Stich, K. D. Brunneman, Babu Mathew, R. Sankaranarayanan and M. Krishnan Nair. Chemopreventive Trials with Vitamin A and B Carotene: Some unresolved issues. Preventive Medicine: 18: 732-39: 1989.
- 4. H. F. Stich., Babu Methew, R. Sankaranarayanan and M. Krishnan Nair. Remission of precancerous lesions in the oral cavity of tobacco chewers and maintenance of the protective effect by Bota Carotene and Vitamin A. American Journal of Clinical Nutrition (Supplement) 1989.

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Babu Mathew and M. Krishnan Nair: Primary and Secondary Prevention of Oral Cancer using the National Service Scheme Voluntéers in Bural Areas. International Congress on Oral Cancer, New Delhi. November, 1989.

Babu: Mathew. -"Are we on the Cross Roads?" Symposium on Dental Education in India. 1st Annual Conference of the Indian Dental Association, South Zone States, Davender - December 1989.

M. Krishnan Nair, Babu Mathew, R. Sankaranarayanan and Ramani S. Wesly participated in the Workshop on State Cancer Control Programmes held at Kidwai Memorial Institute of Oncology, Bangalore sponsored by W.H.O. and Ministry of Health, Government of India - December, 1989.

- 4. Ramani S. Wesly, Babu Mathew, M. Krishnan Nair, Padmakumari Amma and C. Sreekumar. Primary health care approach utilising unemployed educated youth for oral cancer detection. Indian Science Congress held at Gochin, January, 1990.
- 6. M. Krishnan Nair, Babu Mathew and R. Sankaranarayanan.
 Evaluation of Control Strategies in tobacco related cancers in Kerala. International Symposium on the control of tobacco related cancer and other diseases held at Bombay, 1990.

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We place on record our gratitude to Dr. K. R. Harilal, Principal, Medical College, Kottayam, Shri. Mani Abraham, Chairman, Kotrayam Municipality and Prof. Thomas C. Abraham NSS Programme Co-ordinator, Mahatma Gandhi University Kottayam for their co-operation in the "B A C K" project. We thank Prof. N. Sadasivan, NSS Programme Officer, Govt. Arts College, Trivendrum, Mr. M.S. Thomas, Project Advisor, C. D. Project, Mavelikkara and Mr. D. Krishnanatha Pai, Manager, North Malabar Gramin Bank, Chavassery, for thier active support and participation. We remember with gratitude, at this time Late Shri. P. J. John, Joint Director (Health Education) of Health Services Kerala, for the valuable services rendered in all the activities of this division and centre.

75

TABLE I. DETAILS OF THE CANCER AWARENESS PROGRAMME

	- 				THE CONTRACTOR OF
SI.No.	Place	Sponsored by	Date	Approx. No. attened	Categories of Persons who attended
1	2	3	4		
1.	Tharayilkadu (Alleppəy)	Tharayilkadu, C. D. Project	20–5–′99	92	Unemployed youth
2.	Muttathara	K B S C Arts Club	28-5-'89	164	Lay Public
3.	Kottarakara	N.S.S. Co-ordinator; Kerela University	1–6–'89	45	N.S.S.Programme Officers
	Malloor (Pathanamthitta)	N.S.S. Unit, St. Stephen's College	7-6-'89	60	N.S.S. Volunteers
	Kayamkulam	Fisherman Welfare Society	22-7-'89	30	Unemployed educated youth
; ·	Thycaud	N. S. S. Unit, Government Arts Collega, Trivandrum	2-9-'89	50	College Students.
'. I	Peringamala	N.S.S. Unit, Peringamela Igbal College	. 16-9-189	60	College Students.

8.	Vellayambalam	Trivandrum Social Service League	19–9–'89	40	Community Health Workers
9.	Venmony (Quiton)	Pourasamithi	30-9-89	30	Members of Voluntery Agency
10.	Kottayam	N.S.S of Mehatma Gandhi University & Kottayam Municipality	7–10–89	200	N.S.S. Units Units of 4 Coleges in Kotteyam Town
11.	Nariyapuram (Pathnamthitta)	N.S.S. Unit, Catholic College, Pathanamthitta	13–10–'89	100	N.S.S. Students
12.	Kottayam	N.S.S. Mahatma Gandhi University, Kottayam Municipality	28-10-'89	400	N.S.S. Volunteers and Programme Officers of 6 Colleges in Kottayam area
13.	Karamana	N;S,S, Unit, Wemen's College	31-10-/89	400	Students
14.	Kottayam	N.S.S. Unit, Polytechnic	22-12-89	175	Polytechniques Students
15.	Pandalam	N.S.S. Unit of N.S.S. College, Pandalam	30-12-189	200	N.S.S. Volunteers

1	2	3 :			
16.	Champazhanthi	Zoology Association Chempazhanthi			
17.	B1	S. N. College	17-1-90	45	Zoology Students
-	Nettayam	Politechnique	25-1-90	200	Diploma Engineering
18.	Pattambi (Trichur)	Y's men Club		•	Students and Staff
19.	Prasanth Nagar	Partambi,	28–1–'90	59	Doctors and Lay People
4		Nair Service Society: Bhacuji Nagar	16-2-190		
20.	Akulam	N.S.S. Unit II	10-2-30	45	Women of N.S.S. Karayogam
J.;	计二种负数 🔻	Government Arts	To the state	10.	Mind of the control
21.	Chavasseri	College, Triyandrum	22-2-190	56	College Students
	(Cannanore)	North Malabar Gramin Bank	18-3-'90	150	Employed & Unemployed Voluntoers
22.	Collectorate, Quillon	D.M.O. Quilon			Voluntoers
<u>-</u>	, teanty jaget		23-3-'90	75 .⊹	School Teachers
<u></u> .		Total		2675	A THE RESERVE OF STREET

TABLE II. DETAILS OF THE CANCER DETECTION CAMPS

SI.No.	Place of detection camps	Sponsors	Date	No. of New cancer cases	No. of Old cases with active disease	No, of Pre- Cancers	Total exa- mined
1	2	3	4	5	6	7	8
1.	Palood	Rotary Club of Trivandrum	8-4-189	_	<u>.</u> .	2	50
2.	Venpakal	Rotary Club of Trivandrum	26-4′89	2	_	11	320
3.	Kuravilangad (Kottayam)	I.R.D.P. and youth club	7–5–'89	3		5	250
4.	Chakai	National Evangelaisa- tion team	19-5-'89	_	_	i	 20
5.	Peringamala	N.S.S. Unit, Medical College Trivandrum	25-5-'89	· .	. 	<u>-</u> 8	100

1	2	3	4	 5		- - -	- -
6.	Tharayilkadu (Alleppey)	Tharayilkadu commu- nity Development project	27–5–′89	-	- -	•• <u>-</u>	8
7.	Poudikonam	B.Sc. Nursing Students		2	_	22	350
8.	Nanthiyode	N.S.S. Unit Programme	28~5–′89	_	_	12	80
9.	At the man	Officer, M. C. H. Trivandrum	29-5-189		_	20	150
9,	Nalianikkal (Aliappey)	Fisherman Welfare Society	3–6–′89	3	4	43	799
10.	Muttathara Market	K.B.S.C. Arts Club	10-6-189	· -		14	
11.	Mangalapuram	N.E.T Rural Development Project	16-6-'89	_		15	164
12.	Chenkachoola Colony		9-7-189	_		· .	124
13.	Poovachal	District Collector Trivandrum	19–8–'89	. —	, _	2.	'91 1 <i>00</i>

1	2	3	4	5	6	7	8
14.	Azhiyikkal (Alleppey)	Fisherman Developmen Project	t 23-9-'89	2	2	24	500
15.	Venmony	Pourasamithi .	30-9-'89	2	2	15	194
16.	Mudavanmughal	N.S.S. Unit, Arts College, Trivandrum	1–10–79	_		24	84
17.	Nellimoodu	Kamaraj Foundation	2-10-189	2	_	9	165
18.	Muttathara	N.S.S. Units, Arts College, Trivandrum	9–10–′89	1	_	17	223
19.	Balaramapuram	N.S.S. Unit, Arts College, Trivandrum	910'89	2	_	16	80
20.	Manvila	Bharath Scout & Guides	10–1 0 –′89	_		4	34
21 .	Thengapattanam	State Bank of Travancore	12-10-189	4.	1	12	185
22.	Parumala	N.S.S. Unit, D. B. College, Parumal	a 13–10–′89			19	198

1	2	3	4	- ' <u></u>	<u>-</u>	 -	— "
23,	Chennilode Colony	N. S. S. Unit, Arts College, Trivandrum	22–10–189		<u>-</u> -	 -	8
24.	Cheriathura	N.S.S. Unit All Saints College	30–10–189	. 1		4	210
25.	Thalikuzhi	Samasia, Arts Club	4-11-189	_	1	15	100
26.	Chennilode Colony	N. S. S. Unit, Arts College, Trivandrum	5–11–'89	_		12 8	70 50
27.	Shringavathoppu Colony	N.S.S. Unit, Arts College, Trivandrum	12–11–189			14	45
28	Kaithamukku	N. S. S. Unit, Arts, College, Trivandrum	12–11–'89	_	_	3	28
29.	Athinade	Dharmasethra R.D. Project	2-12-/89	2		.5	190
30.	Anad	Rotary Club, Trivandrum	18-12-189		—	5	100
31.	West Pattathanam	N.S.S. Unit, TKM College, Quilon	21-12-189	T			94 - సంస్థాని చెప్పు
ومرأوس والمحا	<u>r ar na Maria (n. 1885).</u>	and the second of the second second and the second	and the contract of the second	21.00	. Talkinda 1964	A CONTRACTOR OF THE PARTY OF TH	ALC: HE HAVE A VALUE
					442		Andrew 1
	3	3	4	5	6	7	8
1 32.	3 Vithura	3 N.S.S. Unit, Government Arts College, Trivandrum	4 29–12–789	5 —	6	7	3
<u> </u>		N.S.S. Unit, Government Arts		5 —	6		200
32.	Vithura	N.S.S. Unit, Government Arts College, Trivandrum N.S.S. Unit, Marthoma College,	29–12–789		6 -	7	
32.	Vithura Thìruvalla	N.S.S. Unit, Government Arts College, Trivandrum N.S.S. Unit, Marthoma College, Thiruvalla Sree Narayana	29–12–'89 30–12–'89		6	7	35
32.	Vithura Thiruvalla Neyyattinkara	N.S.S. Unit, Government Arts College, Trivandrum N.S.S. Unit, Marthoma College, Thiruvalla Sree Narayana Vichara Vedi N.S.S. Unit, Poly Technique,	29-12-'89 30-1289 6-1-'90 26-1-'90		6 -	5 —	3 5 20
32. 33. 34. 35.	Vithura Thiruvalla Neyyattinkara Nettayam	N.S.S. Unit, Government Arts College, Trivandrum N.S.S. Unit, Marthoma College, Thiruvalla Sree Narayana Vichara Vedi N.S.S. Unit, Poly Technique, Nettayam B.Sc. Nursing Student Vyaparavyavasaya	29–12–'89 30–12– 89 6–1–'90 26–1–'90 s		6 	7 5 —	35 20 90

 39. Kottayam 40. Amboori 41. Puthiyathura 42. Murukumpuzha 43. Navaikuiam 44. Paighat 	N.S.S. M.G. University Priyadersini Memmorial Mahija Samajam Catholic Welfare Society, Trivandrum Kanfed and Madiya	17-2-30 17-2-30 23 2-90 24-2-90	i			
	· .	23 2-'90	· i] - 	 6 6)
		24-2-30	İ	٠ ,	3.4	•
		1		N	an (9 /
Navaikulam Paighat		3-3-30	. !	l	ю с	e :
Paighat	Desabhimani Library	068-01	ļ -	[ם מ	0/1
	Co-operativo Sugar Factory Ltd.	17-390	٠ (٥	•	ħ (\$ 5
Kozhinjampara	Government Hospital Kozhinjampara	17-3-'90	, 4	. ÷	<u>, 4</u>	004
Vallakkaday	Kushttəroga Nirmarjanna Samithi	25-3-'90	-	· . I	<u>.</u>	6 6

ARLY CANCER DETECTION CENTRE, ERNAKULAM

B. Syamala Kumari

Cytopathologist

The Early Cancer Detection Centre, Ernakulam has completed years of its existence. As in the previous years, this centre as engaged mainly on the following activities during the year

Routine examination of patients in the Centre. Cancer Detection Camps & Clinics in the Rural Hospitals. Pap. Smear test, Fine needle aspiration cytology and other cytological tests.

Conducting Cancer Awareness Programmes.

During this year we have started a new programme of Cancer Detection, Check up among industrial workers of this district. Urine samples of 270 Indian aluminium Factory workers were examined in the centre. In addition to the activities at Emakulam District we have conducted 4 Cancer Detection Camps in different areas of Kottayam District in connection with the "To the People Programme" organised by the District Collec-∑tor, Kottayam.

The follow-up clinics for the cancer patients undergoing treatment in Regional Cancer Centre, Trivandrum have been going on in the third Saturdays of every month. This clinic covers 75-90 patients in a month.

With the generous financial assistance provided by M/s. Travancore Cochin Chemicals, M/s, Indian Rare Earths Ltd. and Cochin Refineries Ltd., a Histopathology unit and a Colposcopy unit will be established in this Centre.

A total of 8292 persons underwent cancer detection check up during the year under report. This includes patients referred from other hospitals, cancer detection camps and those coming to the Centre voluntarily. A total of 15 camps and 3 awareness programmes were conducted, 195 cancer cases were detected 173 from the Centre and 22 from camps and referred for treatment. Details are shown in the table below:

IL RESUME OF WORK DURING 1989-1990 EKM

Particulars of work			Centre based	Camp based	Total
Persons screened			5740	2552	8292
Cervical smears	• •		3640	788	4428
Oral Smears			115	62	177
Sputum Smears			104	. —	104
Fine Needle Aspiratio	n Cytology		395	65 .	460
Body Fluid Cytology			. 113	· · ·	113
Urine smears			270	s <u></u> .	270
Nipple discharge Cyto	logy	•	8		. 8
Semen Cytology			1	· <u></u>	1 :
Endometrial washing t	Cytology		1 ·		1

Details of Camps Conducted in 1989-90

No.	Date	Place	Sponsors	Persons screened	Smears	Gynaec	Non- Gynaec
1.	4-4-89	Kothamangalam	Indian Medical Association	121	61	58	3
2.	22-4-89	Nellad	Malankara Onhodox Mission Hospital Kolenchery	85	55	50	: 5 ·
3.	27–5–891	Valkom	Consumer Guidance & research Society of India	343	154	135	. 19
. 4.	31-5-89	Ramapuram	Kottayam Collector	93	25	16	. 9
5.	2-8-89	Vechoor	Kottayam Collector	30	29	22	/
6.	23-9-89		Korala Sastra Sahityaparishad	325	117	105	12
7.	4-10-89	Kulasekhara- mangalam	Kottayam Collector	50	18 167	9 1 52	9 . 1 5
8.	4–11,489	Akanad	State Bank of India Perumbayo	300 300	102	. 90	, 12
9.	9–12–89	Perumbalam :	Sarangi Arts & Sports Club	85	18	.12	. 6
40.	30 4 2 –89	Mattanchery	Netto Mattanchery	: 213	79	75	4
11. 12.	13–1–90 16–1–90	Kuttamassery Manimala	Aiswarya Arts & Sports Club Kottayam Collector	38	:15	. ; 8	7.
13	3 -2-90	Trippunithura	NSS Unit Ayurveda College, Trippunithura	12	12	: i 6	. 6
14.		Uzhavoor	Youth Talent Society	. 59 147 on — 61	47 16		10
15 .	31–3–90	Sherthallai	Rural Development Organisatio				

Ħ.	LESION	RREAK	UP 1989-'90
r 1.	LLGION	DREAK	UE 1202— 30

	H. LESION BREAK U	P 1989–	SO				Centre	Comp	Total
		Centre	Camp	Totel	20	Endocervicitis with moderate dysplasia	4		. 4
l.	GYNAECOLOGICAL					Endocervicitis with severe dysplas	sia 3	_	3
1.	Normal	484	239	723	21 . 22 .	Atrophic smear with inflammation		··· : .	8
2.	Normal Atrophic smear	66	 -	66		& mild dysplesia	정. 1	·:· —··	. 1
3.	Inflammation	1340	315	ζĞ.	23	Herpes infection	2		
4.	Atrophic smear with inflammation			1556	24	Trichomonas & Herpes infection	· · · · · · · · · · · · · · · · · · ·	· . <u>-</u>	. 4
	,		6	155 📜	25	HSV with severe dysplasia	. 1	·	
Ş,	Endocervicitis	414	34	448	26.	HSV with moderate dysplasia Inflammation with atypical			
6,	Trichomonas infection	621	109	730 🖏	27.	squamous metaplasia	7	2	8
7.	Fungus	26	5	31	28.	Endocervicitis with atypical squamous metaplasia	6	_	
3.	Inflammation with Reserve Call hyperplasia (RCH)	19	13	32	29.	the state of the same the same	15	_	1
Э.	Endocervicitis with RCH	74	9	83	30.		7	4	1
).	Inflammation with mile dysplasia	92	14	106	31.		3	_	
				H	32		1		
۱.	Inflammation with moderate dysplasia	8	3	11	33.	and the second second	1		
2.	Inflammation with severe dysplasia		1	4	34		12		
	, .		•		35		42		
	Trichomonas with mild dysplasia	75	-20	95 🦨	36	. Carcinoma-in-situ	7	2	
,	Trichomonas	54		54	37	. Endocervical adeno Carcinoma	1	_	٠.
ί,	T. V. with moderate dysplasia	23	1. • •	24	38		1	. 1	
ì.	T. V. with severe dysplasia	3	1	4 ;	39		1	· · · · ·	- - :
7.	B.T. V. with RCH	2		2	40	. Miscellaneous	33	; 	-
3.	T. V. & Fungal infection	4	1	5		Total	3640	788	3 44
Э.	Endocervicitis with mild dysplasia	23	1	24	₩ L			_ 	
						• •			

		Centre	Camp	Total	 : .		Routine		Total
ΙΙ.	NON-GYNAECOLOGICAL			~~~ ~	 Ibrod	ystic Dysplasia	34	. 3	37
١,	Oral lesions		•			adenoma	. 31	· · 6 :	37
1.	Fungal infection	2	1	1999 B		nnatin	38	. 3	41
2,	Inflammation	22	8	- (G)		nancy	26	. 1	27
3,	Leukoplekia	30	. 38			Parotid Aspirations			
4.	Leukoplakia with atypia	17	5	68 b	"	NMC .	7	_	
Б,	Carcinoma recurrence	1	_			Pleomorphic adenoma	. 1		
6.	Rediation changes	4	1			Minor Salivary Gland Warthins	1		
7.	Squamous cell carcinoma	37	. '		A	Thyroid			
3,	Squamous Papilloma	2	_	40	-1	Non-malignant lesions	45	16	6
	Sputum	_				Neoplasms			
	No malignant celis	76		70		a. Benign	3	5	•
	Fungal infection	2		70		b. Malignant:-			
	Squamous Cell Carcinoma	16		16.		Papillary Carcinoma	4	1 ·	
	Adeno Carcinoma	4	<u> </u>	10.		Anaplastic Carcinoma	1		
	Muco Epidermoid Carcinoma	1	_	4	d)	Lymphnode			
	Oat Cell Carcinoma	4				N.M.C Granulomatous	35	2	
	Undifferentiated Carcinoma	4	_	4		Lymphadenitis	18	3	
		. '		1		Malignancy		• •	•
	ASPIRATIONS					a. Primary	1	· –	
E	lreast ·					b, Secondary	35	2	
	Duct Papilloma	2		2	e)	Other sites			
	Mammary dysplasia	43	5	48		Benign	58		
						-			

		Centre	Camp	Tota
	Malignancy`	2	1	
Έ,	Radiation Changes	1	_	ì
	Recuirence	1	1	
f).^	Tumour Aspiration			
	Benign	2		
	Malignant	1		1
3)	Bone Aspiration	27 50.52		
	Benign	· . 2		2
1)	Liver Aspiration			•
	Benign	* · 3		3
V. F	LUIDS			
	Bronchial Washings			
	NMC	44		44
	Malignanoy .			
	Squamous Cell Carcinoma	2		2
	Adeno Carcinoma	3	- .	3
	Oat Cell Carcinoma	. 3		. 3
	Well Differentiated Carcinoma	2	. -	2
	Pleural fluid			
	NMC	28	_	28
	Squamous Cell Carcimome	δ	pv.	.6
	Adenocarcinoma	4		4
		•		

	Centre	Camp	Total
Peritonial Fluid			
N. M. C.	14	سيد	14
Adena Carcinoma	7	400	7
CSF			·
N. M. C.	1	· . · - ·	1
URINE			
Ŋ. M. C.	268		268
Miscellaneous	2	<u>·</u>	. 2
NIPPLE DISCHARGE N, M, C.	8	_	8
II. ENDOMETRIAL WASHINGS			
N. M. C.	1		1
AUL SEMEN	1]	_	1
		٠.	٠.

EARLY CANCER DETECTION CENTRE, PALGHAT

Dr. R. Ananda Kamath — Medical Officer

The activities of this Centre during the year were in line with the main objectives of the National Cancer Control policy for India. (1) Primary Prevention of Tobacco related cancer. (2) Early detection of cancer of uterine cervix and oral cavity (3) Extension of therapy to all curable cancers and pain relief for all incurable cancers. These included routine work at the institution, conduct of cancer detection camps and cancer awareness talks and participation in exhibition. Routine work in the institutions comprised of examination of persons referred from other institutions and those who came voluntarily, Cytology of smears collected at the Centre and camps, giving suitable guidance to cases diagnosed as cancer and follow-up of some treated cancer cases and advanced cancer cases. Thirteen Cancer Detection Camps were held in various places in the district with the help of voluntary organisations. Details of these are given in table IV. At these camps apart from screening, a small talk also was given relating to the problem of cancer. Separate cancer awareness talks were also given. Govt. Victoria College had conducted a Science Exhibition in connection with its centenary and the Oncology stall of this centre attracted a good number of visitors, This Centre actively participated in the State Health Festival held at Palghat on March 1990 along with the Regional Cancer Centre staff, for cancer awareness and exhibition.

Acknowledgements

Thanks are due to Dr. K. G. R. Kartha, District Medical Officer of Health, Palghat, for allotting vehicle and deputing nursing students to attend the camps. Thanks are due to various voluntary organisations for organising the camps.

THE DONE OF WORK RESUME TABLE

	Male	Female	Total	Ca. Cases
Total Number of Persons Screened in the Centre	528	355	883	54
Number of Smears taken for Cytological Examination	306	213	519	51
Total Number of Persons Screened in the Camp	775	927	1702	9
Number of Smears taken for Cytological Examination	44	503	547	7
Total Number of Smears taken	352	714	1066	ta 1
Total Number of Biopsy sent for HPE			36	
Total Number of known Cancer cases and suspected Cancer cases in the Camps	ancer cases	in the Camp	s 70	
Number of Cancer patients referred to RCC. TVM.			09	
Number of Cancer patients referred to MCH Kozhikode			9	81
Number of Cancer patients referred to other Institutions	s		56	
Total number of referred cases	ferred cases		122	

BREAK UP OF CYTOLOGICALLY DETECTED LESIONS 1989-1990 TABLE II.

8			CARCINOMA	VOMA	
SPECIMEN	CENTRE	CAMP	CENTRE	CAMP	TOTAL
Cervix	176	461	18	 6	637
Buccal	84	73	15	2	157
Sputum	231	2	15	J	233
Breast	2	ಣ	2	Į.	00
Fluid	S	1	•	1	, ro
Others	18	89	4	L	26
TOTAL	519	547	55	1 1	1066

ANALYSIS OF CERVICAL SMEARS 1989-'90

		Centre	Camp	Total
	Normal	20	94	114
1.	Inflammation	108	237	345
2.	Hyperkeratotic Cervix	1	4	5
3.	Inflammation with Squamous			
4.	Metaplasia	9	34	43
5.	Trichomonas Vaginalis Infection	7	33	40
6.	Inflamation C Reserve Cell			5
0.	Hyperplasia	3	5	8
7.	Endocervical Cell Regeneration	4	7	11
8.	Herpes Infection	1	1	3
9.	T. V. C Mild Dysplasia		3	3
0.	Inflammation C Mild Dysplasia	1	13	14
11.	Inflammation C Squamous			
100	Metaplasia & Mild Dysplasia	1	7	
12.	Mild Dysplasia		2	
13.	T. V. C Moderate Dysplasia	7	2	
14.	Inflammation C Moderate Dysplas	ia —	2	
15.	Severe Dysplasia	1	1	è
16.	Carcinoma in SITU	2	2	
17.	Suspicious of Malignancy	2		
18.	Invasive Squamous Carcinoma	15	7	2
19.	Adeno-Carcinoma	1	-	
20.	Malignant Cells		1	
21.	Radiation Changes	1	-	
22.	Unsatisfactory Samples	9080	7	

TOTAL

176 461 637

NON-GYNAECOLOGICAL 1989-90

						Centre	Camp ;	Tota ———
		Centre	Camp	Total	Breast			
J.	Oral				No Malignancy Cells	3	3	•
	No Malignant Cells	. 67	68	136	Malignancy	2		:
·	Herpes Infection		1	1	TOTAL		3	
	Suspicious of Malignancy	1	1	2				
	Suggestive of Malignancy	3		3	ં N Pleural Fluid			
	Malignancy	12	2	14	No Malignancy Cells	4.		
	Radiation Change	1	1	2	Malignancy	. 1		
		· · · · · · · · · · · · · · · · · · ·			Total	5	<u></u> -	_ •~
	TOTAL	84	73	157	· · · · · · · · · · · · · · · · · · ·	·		
					۷. Other Items			
					No Malignancy Cells	14	8	2:
۱,	Sputum				Malignancy	4		
	No Malignant Cells	212	2	214	. Yotal	18		 2
	Malignacy Cells	7		7		·		
	Squamous Cell Carcinoma	6		6	•			
	Adeno Carcinoma	2		2	•	. :.		
	Suspicious of Malignancy	· 2		2	•			
	Unsatisfactory	2		2			•	
• .	TOTAL	231	2	233				
	At a second		·	1				

TABLE IV DETAILS OF CAMPS CONDUCTED IN 1989-'90

SI. no.	. <i>Date</i> 	Place	Sponsored by	No. of partici- pants	Smear Tuken	No. of Biopsies	Known Cancer cases	Diag- nosed	Cytologi- cally Disg- nosed	Suspected
1_	2 4-89	Kallepulty	Fine Arts & Sports Club	· — -		··			ca. cases	CO, CASOS
2.	28-4-89	Perumkulang	P. H. Cestre Pazirambalakode	47	17	1		1	1	
3.	14-5-89	Wafayar	Malabar Coments Etd. Walayar	89	33	โ	1	í		
4.	2 4- 9 -89		Yuvadhara Arts &	53	9				1	1
5.	22-10-89	Ponkarrdom	Sports Club Akshaya Arts & Sports Club	102	G1		î	1	1	1
6.	9 -12-89	Маплатрефа	Ponkandom N.S. Unit V.T. Shattathinppad	134	64	3	3		2	3
7_	19-12-89	Nandiyode	Correge, Stockrishnaputam Primary Health Centre.	58	39	7	1		í	2
8_	7-1-90	Sreekrishna-	Nandiyode Recreation Club.	40	14		1			3
9.	28-1- 90	puram Pattambi	Szeckrishneporam	327	109	2	4	î	1	٠,
10_	11-2-90	Pallikunnu	Lions Club, Pattembi	68	20	2	. 2		,	,
11.	-17-3-90		Chaithanya Arts & Sports Club	154	62	3	4		3	1
12.		Mononpara	Co-operative Sugar Mills Ltd.	375	56	1	6		3	3
	17: 3-90	Kozhinjanpara	Govz, Hospital, Kozhinjanpara N.S.S. Unit.	160	41	í	6	2		5 8
13. 		Kottekanu	Govi. Victoria Coffage	75	22		4.			3
	_ TOT	AL	The contract was been discussed to be designed to	1702	547	15 3	<u> </u>	·	7: 3	

TABLE V
LIST OF AWARENESS PROGRAMMES IN 1989-90

St. No.	Date	Place	Spansored by	Humber of Participants
	25–3–69	Kallepully	Fine Arts Club. Kallepuliy	110
	18-2-90	Govt. Victoria	Govt. Victoria College, Centenary	
	tu 11–3–99	Coffege Palakkadu	Celebration Exhibition, Palghat.	2,50,000
3 .	14-3-90	Koyyamarakadu Palakkadu Di.	Hoalth Festivel, P. H. Centre Kanjikode	200
1.	23-3-90	Attappakiloas Palakkadu, Dt.	Health Festival, P. H. Contro	· 150
5.	28 3 90	Walayar Palakkadu . Dt	Beatth Cestival, P. H. Centre, Walayan.	210

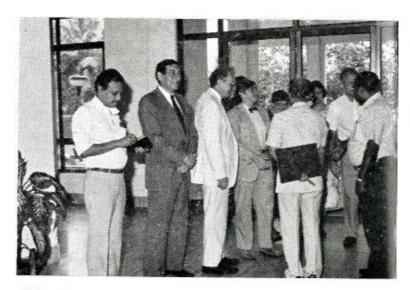
SPECIAL CLINICS (Multi disciplinary)

In addition to the routine clinics and noon clinics, the following special clinics with the active participation of faculty members from other departments were conducted regularly

- Paediatric Oncology All Mondays at 12 noon. Resources persons from other departmetris Dr. V. G. Chellam, Professor of Paediatric Pathology, Dr. Mani Ninan, Director a Professor of Paediatric Surgery, Dr. N. Surendran, Professor of Paediatric Surgery.
- II. Head and Neck Clinic All Tuesdays 12 Noon. Resource persons - Staff of E. N. T.
- III. Trophoblastic tumour clinic All Wednesdays 12 Noon Resource persons Dr. K. Lalitha, Director and Professor of Obst. & Gynaecology.
- IV. Clinicopathological Conference on 1st Saturday of every month at 11.30 AM. Resource persons - Dr. M. A. Aleykutty, Professor of Pathology & other staff of Depart ment of Pathology.
- V. Pain Clinic All Thursdays at 1 P. M.
 Conveners Dr. Gladys Jeevy and Dr. Paul
 Sebastian



Dr. M. V. Pillai, Naval Hospital, Bethesda U.S.A. addressing the participants in the Red Rose Symposium



"Oncology for the 21st Century" Receiving the distinguished faculty members from U.S.A. for the Red Rose Symposium on 14-11-1989.

SYMPOSIA/SEMINARS

ONCOLOGY FOR THE 21ST CENTURY

In order to give further impetus to research and to promote modern clinical practices in the field of oncology, this centre arranged a series of symposia called "ONCOLOGY FOR THE 21ST CENTURY" with eminent foreign doctors and scientists as faculty members. This series of symposia will continue upto 2000 AD. These are being conducted as a collaborative effort of a number of prestigious national and international scientific institutions and bodies.

During the year under report we commemorated the birth centennial of our beloved late Prime Minister Pandit Jawaharlal Nehru, by conducting the first in the series of symposia called "The Red Rose Symposium". This was held in Regional Cancer Centre, Thiruvananthapuram on 14–11–1989. A short account of this symposium is given below.

The symposium was inaugurated by Dr. N. Balakrishnan Nair, Chairman, Science and Technology Department, Government of Kerala at a function presided over by Dr. V.K. Jayapalan, Principal, Medical College, Trivandrum. Dr. M. V. Pillai, Naval Hospital, Bethesda, U.S.A. presented a report on the symposium and was the moderator. The following eminent scientists of international repute from U.S.A. as faculty members delivered lectures on their specialized areas of work.

- Dr. James F Holland, Mount Sinai School of Medicine, New York, U.S.A. "Cure for Leukemia" – "The Light at the end of the Tunnel".
- Dr. Morton Coleman, Cornell University, New York, U.S.A "Chemotherapy of malignant lymphomas" from Megadose to Monoclonals.
- Dr. Lawrence Lessin, George Washington University Medical College, Washington DC, Ü.S.A. "Hematopoietic growth factors" – From bench to bedside.

- 4. Dr. Jimmie Holland, Memorial Sloan Kettering Cancer Centre, U.S.A. "Mind, Medicine and Malignancy"
- 5. Dr. Andrew M Yeager, John Hopkins Medicine Centre. U.S.A. "Bone Marrow Transplantation"- From small steps to giant leaps.

There were more than 150 participants from the different departments of all the Medical Colleges of Kerala, other private hospitals and the Regional Cancer Centre. The lively discussions which ensued after the lectures helped not only for the crosspollination of views and ideas but also enabled our scientists in familiarising with the modern trends.

This centre wishes to place on record their gratitude to all the guest faculty members especially, Dr. M. V. Pillai for the pivotal role he played in arranging such a grand academic session.

Pain Relief Seminar

Ms. Gillian Burn, an international expert and WHO Consultant on Cancer Pain Relief from Great Britain, visited Regional Cancer Centre in February 1990. She participated in a seminar on Palliative Care in Advanced Malignancy on 14.2.1990. She also delivered a talk on "Multidisciplinary approach to Palliative Care". Ms Burn donated a Syringe Driver for the management of intractable pain to the "Pain Clinic" of Regional Cancer Centre and demonstrated its application.

CONFERENCES/SEMINARS/TRAINING WORKSHOPS ETC. ATTENDED BY VARIOUS STAFF

Assistant Professor of Cytopathology

pr. Elizabeth K. Abraham Regional Conference of the Indian Association of Pathologists & Microbiologists, Ernakulam - April 1989.

Dr. K. Sasidharan Associate Professor of Imageology

Workshop-cum-Seminar on Recent Advances in Ultrasonography, Bombay - April 1989.

Dr. Prabha Balaram

ICMR Meeting on Research Projects, New Delhi - April 1989.

Dr. Elizabeth K. Abraham Assistant Professor of Cytopathology

First National Workshop on Histochemistry and Immuno histochemistry; Basic Medical Sciences, University of Madras - July, 1989.

Mr. Ravindran Ankathil, Scientific Officer

Higher training in Radiation Biology Kasturba Medical College, Manipal -July 1989.

Dr. V. N. Bhattahiri, Assistant Professor of Radiotherapy

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Dr. S. Parameswaran Assistant Professor of Radiotherapy

Association of Physicians of India-Regional Conference, Trivandrum October 1989.

Dr. M. Igbal Ahamed ·Assistant Professor of Cancer Surgery

International Congress of Oral Cancer New Delhi - October 1989

Dr. Paul Sebastian, Assistant Professor of Cancer Surgery

-do-

Dr. T. Vijayakumar, Senior Research Officer.

-do-

	·
Mr. P. G. Gopalakrishna Kurup, Associate Profe- ssor of Radiation Physics.	International Congress of Oral Cancel New Delhi-October 1989.
Dr. Paul Sebastian, Assistant Professor of Cancer:Surgery.	Workshop and Technology Transfer Programme on Head and Neck Cancer Bombay - December 1989.
Dr. N. Sivaramakrishnan, Resident Surgical Officer.	_do-
Dr. K. L. Jayakumar Resident Surgical Officer.	-do-
Mr. Ravoendran Pillai, K. Cytotechnologist.	Training Course on Mammalian Collections and Collection Biology, Hyderabad December 1989.
Dr. Elizabeth K. Abraham, Assistant Professor of Cytopathology	Annual Conference of the Indianal Association of Pathologists & Micros biologists and preceding Workshop in Oncopathology, Bombay - December 1989.
Mr. C. A. Davis, Assistant Professor of Radiation Physics.	Selectron Users' Meeting, Madras - December 1989.
Mr. P. G. Gopalakrishna Kurup, Associate Professor of Radiation Physics.	-do-
Dr. P. G. Jayaprakash Asst. Professor of Radiotherapy.	-do -
Dr. C. S. Madhu Tutor in Radiotherapy.	Annual Conference of the Association of Radiation Oncologists of India

Annual Conference of the Association of Radiation Oncologists of India Nagpur - January 1990.

pr. K. Ramachandran Lecturer in Imageology.	Annual Congress of Radiology and Imaging Association, Hyderabad — January 1990.
or, K. Sasidharan, Associate Professor of Imageology	-do-
Mr. Thomas Abraham Scientific Officer.	Workshop on Molecular Biology of Human Lymphoma and T-Cell Leukemia Virus at Cancer Institute Bombay - January 1990.
Dr. P. Kusumakumary Assistant Professor of Paediatric Oncology.	Annual Conference of the Indian Association of Paediatrics (Kerala Chapter) Ernakulam - January 1990
Dr. B. Prabha Associate Professor of Cancer Research	International Conference on Molecular Basis of Immunology at AlIMS, New Delhi - January 1990.
Dr. Ramani S. Wesly, Lecturer in Community Oncology	Indian Science Congress, Cochin – February 1990
Dr. B. Prabha, Associate Professor of Cancer Research	Indian Science Congress, Cochin – February 1990
Dr. Gladys Jesvy Anaesthetist.	International Workshop on Pain Relief in Oncology, IV Biennial Conference of Indian Society of Oncology at Gujarat Cancer & Research Institute, Ahamedabad – February, 1990.
Dr. N. Sreedevi Amma, Professor of Cytopathology	XIX Annual Conference, Indian Academy of Cytopathologist, RNT Medical College, Udaipur - February

1990.

Mr. Thayal Singh Elias, Lecturer in Radiation Physics. International Symposium on Physics of Medical Imaging & Advances In Computer Application, New Delhi February 1990.

Dr. T. Ganga Devi Associate Professor of Radiotherapy, Symposium on "Research Methods in Clinical Oncology", Bombay — February 1990.

Smt. G. Padmakumari Sanior Research Fellow.

--do-

Dr. P. Kusumakumary, Assistant Professor of Paediatric Oncology.

-dq

Dr. R. Sankaranarayanan, Assistant Professor of Cancer Research. IXth Annual Conference of Indian. Association of Cancer Research, Mysore March 1990.

Dr. B. Prabho Associate Professor of Cancer Research

 $-d\sigma$

Dr. Jayaprakash Madhavan, Assistant Professor of Radiotherapy. lind International Endocurie Thorapy Conference, Bangalore - March 1990,

Dr. Gladys Jesvy, Anaesthetist

Satellite Meeting of VI World Congress on Pain: VI All India Conference on Pain, Bombay - March, 1990.

PAPERS PUBLISHED / PRESENTED IN CONFERENCES ETC.

- Sankarenerayanan, R; Duffy, SW; Day, NE; Padmakumeri G; Padmanabhan, TK. Tobacco chewing, Alcohol and Nasal snuff in cancer of the gingive in Kerala, India. Br J Cancer 1989; 60: 638–643.
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- Stich, HF: Mathew, B; Sankaranarayanan, R: Krishnan Nair, M. Remission of precancerous lesions of oral cavity of tobacco chewers and maintenance of protective effects of Betavarotene or Vitanun A. Am J Clin Nutrit (in press)
- 7. Stich, HF, Palcie, B; Sankaranarayanan, R; Mathow 13; Krishnan Nair, M. Quantitation of Chromatin patterns by image analysis as a predictive tool in chemopreventive trials with Vitamin A.

in: Experimental and Epidemiologic applications to risk assessment of complex mixtures. IARC Sci Publi. International Agency for Research on Cancer, Lyon, 1990.

- Sankaranarayanan, R; Duffy SW; Krishnan Mair, M Padmakumari, G; Day, NE. Tobacco and alcohol risk factors in cancer of the larynx in Kerala, India Int. J Cancer (in press) 1990.
- Chellam, VG; Elizabeth Chacko; Kusumakumary, p. Surendran, N. Clear Cell Sarcoma of Kidney (CCSK).
 A clinicopathological study of 4 cases. Indian Journal of Cencer. Vol 26 (1989) p 120–128.
- 10. Radhakrishna Pillai, M.; Prabha Balaram; Kannan, S.; Sudha, L.; Nalinakumari, KR; Hareendran, NK; Krishnan Nair, M. Clinical implications for oral pre-cancers of interferon activation of latent natural killer cells and alteration of kinetics of target cell lysis.
 - J. Oral Pathol. Oral Surg. Oral Med. (Accepted)
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- Sasidharan, K; Ramachandran, K; Pradeep, VM; Krishman
 Nair, M. Ultrasonography of Lymphome Annual Congress of IR & IA, Hyderabad, 1990.
- 13. Ramachandran, K; Sasidharan, K; Pradeep, VM. Ultra-"sonography Scrotum. Annual Congress of IR & IA, 1990.
- 14. Pradeep VM; Ramachandren K; Sasidharan K. Ultrasound evaluation of cervical lymphadenopathy Annual Congress of IR & IA, 1990.
- Wilkinson, J.M.: Ramachandran, TP. The ICRU recommendations for reporting intracavitary therapy in gynae-cology and the Manchester method of treating cancer of the Cervix Uteri. British Journal of Badiology, 62: 362–365, 1989.
- 16. Sreedevi Amma, N. A correlative study of cervical cytology coloposcopy and histology. XIX Annual Conference of IAC, Udaipur.

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- 46. Krishnan Nair, M; Babu Mathew and Sankaranarayanan R. Evaluation of Control strategies in tobacco related cancers in Kerala. International Symposium on the control of tobacco related cancer and other diseases held at Bombay 1990.
- Thomas Cherian; Paul Sebastian; Iqbal Ahamed, Jayakumar KL and Sivaramakrishnan P. A simple technique of primary stage reconstruction of lateral defect of the lip with good cosmetic and functional results – International Congress on Oral Cancer, New Delhi 13–17th November 1989.
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Gladys Jeevy: Paul Sebastian; Krishnan Nair M. Simple oral analgesics in the management of advanced Cancer Pain at Satellite meeting of VI World Congress on Pain with VI Annual All India Conference on Pain at Bombay 24-26h March, 1990.

DISTINGUISHED VISITORS

- Dr. John Yarnold
 The Royal Marsden Hospital
 Downs Road, Sutton
 Surrey, SM2 5 PT
 United Kingdom
- Andrew M Yeager, The Johns Hopkins Oncology Centre Baltimore, Maryland U.S.A.
- Morton Coleman, New York Hospital Council Medical Centre New York, NY 10021
- James F. Holland, Mount Sinai Medical Centre New York
- Jimmi C. Holland,
 Memorial Sloan-Kettering
 Cancer Centre
 1275 York Avenue
 New York
- Lawrence A. Lessin, George Washington University U.K.
- 7. Gillian L. Burn
 "Railway Cuttings"
 2, Fairoak Road
 Cardiff CF2 4 PI

ADMINISTRATION

GOVERNING BODY MEMBERS OF THE REGIONAL CANCER CENTRE SOCIETY, TRIVANDRUM

Shri E. K. Nayanar
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: Chairman

Shri A. C. Shanmukhadas
 Minister for Health
 Government of Kerala.

: Vice-Chairman

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 Secretary to Government
 Health & Family Welfare Dept.

: Alternate Vice-Chairman

4. Shri. R. Narayanan, Commissioner & Secretary to Govt., Finance Department Member

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: Member

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: Member

Dr. M.S. Valiathan,
 Director, Sree Chitra Tirunal
 Inst. of Medical Science & Technology, Trivandrum.

: Member

 Dr. G. Santhakumari, Director of Medical Education Trivandrum.

: Member

Dr. Elsie Philip, (upto 30.4.1989)
 Dr. V. K. Jayapalan (from 1.5.89)
 Principal, Medical College

: Member

Trivandrum

 Senior most Pathologist in the Medical College services in the Kerala Government.

: Member

Dr. M. Krishnan Nair,
 Director, Regional Cancer Centre.
 Trivandrum.

Convener

MEMBERS OF THE EXECUTIVE COMMITTEE OF THE REGIONAL CANCER CENTRE SOCIETY

1989-1990

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Member

Commissioner & Secretary Finance Department

Shri V. Krishnamurthy, Secretary to Govt. : Member

Planning Department

Dr. G. Santhakumari,

: Member

Director of Medical Education Trivandrum

Dr. Elsie Philip (upto 30–4–89)
 Dr. V. K. Jayapalan (from 1–5–89)
 Principal, Medical College,

: Member

Trivandrum.

Dr. M. Krishnan Nair,
 Director,
 Regional Cancer Centre,

: Convener

Trivandrum

MEMBERS OF THE BUILDING COMMITTEE OF THE REGIONAL CANCER CENTRE, TRIVANDRUM.

1. Shri. P.R. Balakrishnan (till 20-5-1989) Chairman Shri. E. Abdul Azeez (from 26-4-89 to 22-1-1990) Shri. M. J. Mathew (from 16-2-1990) Chief Engineer, P.W.D. Buildings & Local Works, Trivandrum Dr. M. Krishnan Nair Member Director Regional Cancer Centre, Trivandrum 3. Dr. Elsie Philip (upto 30-4-89) Dr. V. K. Jayaplan (from 1-5-89) Member Principal Medical College, Trivandrum. 4. Dr. G. Santhakumari, Member Director of Medical Education, Trivandrum. 5. Shri. Thomas Panicker Member Chief Architect P.W.D., Trivandrum 6. Shri. Joseph Stephen (upto 31-5-89) : Member Shri, K.R. Bhaskaran Nair (from 17-7-89) Finance & Accounts Officer. Regional Cancer Centre, Trivandrum. Shri P, Rajagopal (from 5-10-89) (Asst. Engineer in charge of P.E.) Shri G. Raveendranathan Nair (Asst. Engineer in charge of P.E.) Shri, G. Raveendranathan Nair Convener Project Engineer

SCIENTIFIC COMMITTEE MEMBERS OF THE REGIONAL CANCER CENTRE SOCIETY, TRIVANDRUM

Chairman Dr. Sundram, M. S. Head, Biomedical Division, BARC, Bombay Dr. Elsie Philip, MD, (upto 30-4-89) : Vice-Chairman Dr. V. K. Jayapalan, MD (from 1-5-90) Principal, Medical College, Trivandrum Dr. M. S. Valiathan, MS, FRCS, FAMS Director, Sree Chitra Thirunal Institute for Medical Science & : Alternate Technology, Trivandrum. Vice-Chairman Dr. N. Lakshmypathy, MD Member Director, Institute of Nuclear Medicine & Allied Sciences, Delhi. Member Dr (Mrs.) G. Sudha Gangal, Ph.D. Head, Division of Immunology, Tata Memorial Hospital, Bombay. Dr. Renadev Ph.D. : Member Retd. Director, Cancer Research Institute Tata Memorial Centre, Bombay Member 7. Dr. Jayaram Panicker, MD Retd. Principal, Medical College, Calicut. 8. Dr. Yagnanarayana Iyer, Ph.D : Member Prof. of Biochemistry St. John's Medical College, Bangalore.

Regional Cancer Centre

Trivandrum.

 Dr. N. Sreedevi Amma, MD, Prof. of Cytology, Regional Cancer Centre, Trivandrum

: Member

 Dr. T. P. Ramachandran, Ph.D. Assoc. Prof. of Radiation Physics Regional Cancer Centre, Trivandrum.

: Member

Dr. K, Sasidharan,
 Assoc. Prof. of Nuclear Medicine,
 Regional Cancer Centre,
 Trivandrum.

Member

 Dr. M. Krishnan Nair, MD, FRCR Director, Regional Cancer Centre, Trivandrum.

: Member

 Dr. M. Thangavelu, MD.
 Dean, P.S.G. Institute of Medical Science, Coimbatore.

: Member

 Dr. T. K. Padmanabhan, MD, (upto 5-3-90)
 Superintendent, Regional Cancer Centre, Trivandrum.

Convener

MAJOR DECISIONS OF THE GOVERNING BODY OF THE REGIONAL CANCER CENTRE SOCIETY

- Resolved to implement the scheme sanctioned by the ICMR to set up a Centre for Preventive Oncology as the subsidiary of the Regional Cancer Centre with financial support from them.
- Resolved to implement the project entitled "Cancer Registry in the natural background areas in Kerala" sanctioned by the Department of Atomic Energy with financial assistance of Rs. 36 lakhs provided by them.
- 3. Resolved to approve the audited Statement of Accounts and the Annual Report of the Regional Cancer Centre Society for the year 1988–89 with the comments of the Commissioner & Secretary to Government (Fin) as such. It was also resolved to approve the budget proposals for 1990–91 and revised estimates for 1989–90 subject to the provision made in the annual budget of the Kerala Government.
- Resolved to pursue vigorously the bifurcation of staff of DME and RCC as ordered by the Government of Kerala and get the matter finalised by the Government at the earliest.
- 5. Resolved to permit the Regional Cancer Centre Society to avail of a loan of Rs. 40 lakhs with State Government guarantee to be repaid by the State Government in the financial year 1989–90 to make the outstanding payments on building and to implement a few urgent developmental activities, in view of the financial constraints.
- It was resolved to request the State Government to exempt the Mini Bus purchase for Cancer Care for Life Scheme from the payment of usual taxes for free transport of Cancer patients.

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MAJOR DECISIONS OF THE EXECUTIVE COMMITTEE DURING THE YEAR 1989-90

The Committee resolved to establish training facilities for cancer control with W.H.O. support and to utilize the amount of US § 10,000/- for the purpose of establishing a Cancer Control Training Centre and Detection Centre.

The Committee resolved to take over the 2 ECDCS in Ernakulam and Palghat in consultation with the DHS. It was further resolved that the Director, Regional Cancer Centre may

It was resolved to appoint Dr. P. N. Madhavan Nair as Prof. of Cancer Research (Immunology) in the Regional Cancer Centre taking into consideration his achievements in the field of Cancer Research and the senior position which he holds presently in United States and agreed to sanction him a few lication and Fire protection and fire fighting etc.). The foundation advance increments in the present scale of power has been decided in the present scale of power has been decided by Sri K. Karunaadvance increments in the present scale of pay when he joins

It was resolved to purchase "Micro Comp 550" X-ray unit offered by M/s. I. G. E. India Ltd., Cochin at a cost of Rs. 8,25,316.

The Committee agreed to the proposal to conduct a Red Rose Symposium on 14-11-1989 on "Advance in Oncology" with the participation of 6 American specialists and to incur an expenditure of Rs. 15,000/- on this account.

The Committee resolved to implement the 1st pay revision order of Government of Kerala in Regional Cancer Cerulasuch w.e.f. 1-7-1988.

It was resolved that letters of appreciation should be giv 1 to Dr. Prabha Balaram, for the best paper presented by her in to section on health care in the Kerala Science Congress, Smt. Moly kutty John for winning the Jwaladevi Award for the best paper presented in the 19th Annual Conference of the Indian Academy of Cytologists in Udaipur and Sri Ravindranathan New J Medical Records Officer for the untiring efforts made discount in the organising clinical facilities in the new building or paid - VJ be CRET

ENGINEERING DEPARTMENT

The necessity for constructing a new building complex Regional Cancer Centre, Trivandrum to accommodate various histicated and modern equipments used for diagnosis and ment of cancer patients as well as to provide beds for them been felt from the very inception of the Centre. Accordingly. estimate had been prepared for Rs. 950 lakhs for the conection of the building project. In accordance with the pattern sharing of expenditure with the State and Central, the State wernment had provided funds in the Annual Budget estimate write to Government on the need to retain these centres as action activities in 1983-84 and plans in respect of First part of the Regional Cancer Centre ase of Building Complex was finalised, and the construction the building was taken up during 1985. The Governing Body the Cancer Centre gave their approval for the construction of he Ist Phase of the building estimated to cost of Rs. 217 lakhs later on revised Rs. 301 lakhs to accommodate revised proposals Mone for the 1st Phase was laid on 11-9-1984 by Sri K. Karunakaran, the then Hon'ble Chief Minister of Kerala in the presence of Sri. K.P. Ramachandran Nair, the then Hon'ble Minister for Health at a function held in a befitting manner. Henceforth here was no question of looking back, and relentless strenuous work of all concerned helped to complete building in a record eriod of 4 years.

INAUGURAL FUNCTION

The new building was inaugurated by Shri. E. K. Nayanar, orFble Chief Minister of Kerala on 17-8-1989, at a function Fraued over by Shri A. C. Shanmukhadas, Hon'ble Minister i iealth and Family Welfare. Shri. M. Vijayakumar, M. L. A., Dr. M. S. Valiathan, Director, Sree Chitra Thirunal Institute for Medical Sciences & Technlogy, Dr. V. K. Jayapalan, Principal, Medical College, Trivandrum, Dr. K. P. Chandrasekharan, Joint Director of Medical Education, Dr. K. V. Krishnadas, Rtd. Director & Professor of Medicine, and Dr. K. Balaraman, Director of talth Services (Retd) delivered felicitation speeches. To accasion mementos were awarded to 12 persons inclu-Tolly oction etors, engineers and labourers for the valuable work derect his them in completing the 1st Phase of building project.

The new building with an area of 5,000 sq. mts. houses the O.P. waiting and patient examination facilities, all investigation facilities such as imageology (radiological, nuclear and ultrasonal graphic), Clinical Pathology, Library, Surgical theatres and acute post-operative care areas, medical oncology and National Tumous Registry & Offices. A 500 M. Cub. capacity Ground Water Tank, Two 200 tonnes YORK Centrifugal Airconditioning systems a 1250 KVA Indoor Transformer etc. which all will cater to the missioned. This is expected to reduce the cost of the II phase building construction. Fire detection and fire protection facilities, Medical Gas systems, Telephone Communication systems have also been provided.

The Civil works were done at a cost of Rs. 1.47 crored by M/s P. Ratnaswamy, Engineers & Contractors, Trivandrum Electrification works for Rs. 26 lakhs done by M/s Harrisons Malayalam Limited, Rs. 31 lakhs worth or electrical equipments were installed for the project. M/s Blue Star Limited has done the Airconditioning system for Rs. 30 lakhs and we had imported N/s. Contrifugal Chiller from YORK, U.S.A. for Rs. 24 lakhs Madras Engineering Concerns, Madras and M/s M.E. Industries, Bombay, have done the Plumbing and fire protection and fire fighting systems respectively.

The II phase of the Building Project — an 8 storey block to house the inpatient wards, Main surgical theatre, 4 EB Therapy rooms, Research Division, Utilities and Radiotherapy, Clinical Laboratories and Imageology, accommodation for residential staff etc. — is on the anvil. The work on the new project will commence in August, 1990 and is expected to be completed in 3 years time.

The Building Committee which controls the construction activities of the Project met four times to discuss planning and implementation of the Project during the current year.

Sri G. Reveendranathan Nair, Project Engineer left the Engineering Department on completion of 5 years of deputation in October 1989 and handed over charge to Shri P. Rajagopan Assistant Project Engineer.

ACCOUNTS

REGIONAL CANCER CEN OCIETY, THIRUVANANTHAPURAM

As at 31–3–1985	LIABILITIES		SHEET AS	ST MARCI	H, 1980		
Ra.				A8 51	400578		.,.
	CAPITAL FUND			3-1989	ASSETS		
	As per lost Balance Shoet Add) - Trensfer of Cepital Gran State Govern	^{4,13,32,29} 9.7	fu.	As.	FIXED ASSETS:-	Rs. P	Rs. P
	This Government		\$	6,02,94,273	As per Schedule Addi: Capital Gouds in Transit	5,87.08,066.04 Nili	
	Central Government Transfer of cionations	36,64,257, 85 23,00,000, 00		A,41,384	Machinery-at-site	8,25,316,00	5,75,33,382.0
4,13,32,30	0 received	5,000.00			INVESTMENTS:		(7,7 0, 50,6) 6 2. (
	CAPITAL GRANT :		4,73,02,589	e G	Term Dappaits in respect of		
	From Guvernment of India Ministry of Health and Family Walfare, News Born				Cancer Care for Life Scheme, with Banks	1,09,71,718.00	
					In-Non-Operational Account with Banks	. 38,163.95	1,10,09,879.0
	1st Instalment of Grant for 1985-90 as per letter No. V-22015/6/88-R			:: 1,00,60,783 :: ::	CURRENT ASSETS, LOANS AND ADVANCES: ·		1,10,00,014.2
	dated 3.8.1089	3,00,000 ₋₀₀		3,72,816	Stock of Chomicals, Films Sund	•	
	Less: Amount utilised for	5,60,000.0 <u>0</u>			Medical items sto. Interest Accred on	6,40,850.00	
	$B^{\prime\prime\prime}D^{\prime}D^{$. 1,68,784	Bank Deposits	1,11,089,00	
Nij	Transferred to Capital Fund	200 000		1 Nil	Grant Receivable	: 6,70,000.00	
	Xerala State Government	3,00,000.00		2,64,274	Advances: Considered Good ;	10,50,977.75	
	STURT Gaultaliand			15,000	Considered Doubtful	. 15,000.00	
		36,64,257,82		. Nii	Incometax Daducted at source	5,484,00	
	^{ι-res} : Απιαμπι gijli _{sen' fos}			1,97,115	Deposits	2,03,115.00	
	construction of Building			138 9,590	Stamps on Hand Cash on Hand (including	287.00	
	one princhage of positions			9,350	imprest Rs. 6,550)	9,982.70	
61:1	transferted to Capita!				Balandes with Banks and	242000-70	
Nil		5,64,257 ₋₈₂ °			Тгеавигу:—		
	Donstion received for ourcliese		MIL STATE	4 00 000	State Bank of Travancare.		
	of Capital Assets			1.63,683	Medical College Canara Bank, Pothenchanthai	Nil 9,35,180,15	
		89,000,00		27,055 12,01,905	Indian Overseas Bank, Patroni	11,72,682.96	
. '	Less: Amount atilised during			1,36,436	Kerala State Co-operative Bank.		
0.000	the year	6,000.00	34		Trivandrum.	4,83,693.01	
2,300	Carried Over	~-·-·-	84,000.ca	25,07,212	Government Treasury	18,84,099.00	72,82,386.5
		4,7	3,86,657.60	6,68,60,799	Carried Over:		7,56,25,648.5

REGIONAL CANCER CENTER

BALANCE SHEET AS ST MARCH, 1990 (Contd.)

As at 31–3–1989	LIABILITIES (Contd)	<u></u>	
Rs,			—·—
4,13,42,300	Brought forward:	Rs, P ,	As,
	UNUTILISED GRANTS:-		4,73,86,66
	I) From Government of India: a) For setting up cobalt Thera No. 7-200013/13/86-8 dated 20-5-1986 No. V-22015/6/88-8 dated 20-1-1989 No. V-22015/2/89-8 dated 20-10-1989 No. V-22016/2/89-8 dated 21-2-1990 No.V-22016/2/89-8	12,00,000 12,00,000 20,00,000 12,00,000	
	clated 30-3-4990	5,00,000	
32,00,000	Less: Utillaed for purchase of Cepital equipments during the year transferred to Capital Fund	54,00,000.00 20,00,000.00	
	b) For Carcor Control Programme No.2 (235)/ 88/T010 dated 14-12-1989	34,00,000.00 3,60,000.00	
	iii) From World Health Organisation as perfetter dated 11-7-1969 1,64,880.00		

OCIETY, THIRUVANANTHAPURAM

						
ng;	ASSETS (Contd)				
			Rz.	P.	Rs.	Р.
8 \$∖∕8,58,60,799	B/f	Orward			7,58,25,64	8.65
	INCOME AND EXP ACCOUNT:-	PENDITURI	Ē			
	Cancer Centre: Balance as per last Balance Sheet		33,40,16	6 4.2 6		
() %: &) ()	Add. Excess of Expo over Income	anullune aturilune	6,95,37	78.96		
5 3.		. —	40,35,54	43.22		
	Add: Excess of Inco	r jast 35,835.60	20,31,2	14.56	20,04,3	28.6
: 20,04,3 2 9						
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					22.2	/

BALANCE SHEET AS

REGIONAL CANCER CENT OLETY, THIRUVANANTHAPURAM

MARCH, 1990 (Contd.)

3/-3-1589	LIABILITIES (Contd)			As at	ASSE	TS ((Cofitd): River	44 274	
Rs. 4.45,42,366		Rs. F	Re.	1989 7 7 Re.			Rs. P.	
	Less Utiliaed during		4,73,86,5 ₆₇ ,	6,78,65,128	(ex-	B/ferward: 1000000000000000000000000000000000000	; ⊋; 76,29, 9	77.3
	the your4,151 .80		· Š			.;rs. 4;rm)	: 4: -:	
	Cancer care for life Fund account:	1,60,726.20	39,20,7 2 8			r i de la companya de		
95,60,612	As per last Balanco Sheet	86,80,612, 0 0				A LANGUAGE.	111 MH.1	
	Add: Receipts during the year	9,49,018.00				e no para de la servición de la companya del companya del companya de la companya		
	SECURED LOAMS:		1.06,09,630			and the second second		
	From Banks:-						189-25	
	On Hen against Fixed Deposits						101.61	
	relating to Cencor Care for Life Schome:					· .		
	State Bank of Travancore	- 0.04 550			arragics	r NT Luit kii Maala II Qaaraa I	. N. 5.3	
	State Bank of India	9,6 8, 53 0. 00 9,95,915,40				ye was a firm of	: -	
	On Equitable Mortgage by depos	ie -		256				
	of title deeds of land and Building at Trivendrum and hypothecetion) ·				FAÇOSIN COLOSSOS .	· <u>·</u>	
	of all moveble assets.	•				My artist to A. F. G.	1.5	
	Consra Bank 42,61,179	42,61,179.80				Anna Million (1917)	W. 1	
,12,92,807		42,73,889.55				· · · · · · · · · · · · · · · · · · ·		
. , ,	UNSECURED LOARS:	-	1,04,99,623.76				105.7	
Nil	From State Bank of Travancore			2		in the first of the sales		
	CURRENT LIABILITIES		22,13,047.50			ment of a section of		
23,69,609	Sundry Craditors				in eriyar Sanana	erremon. B		
78,65,128	adminy Glechfork	•	32,00,490,16		un videli Vin i ganti			
, 0,00,120		~	7.78,29,977.21	0.70.05.07		•	7,78,29,	977
	,,	/ids our report o	1,012	6,79,66,128				
	•	For	r SURr & co 🎏	Ch				Dire
Thiruvenanthu		Charte	red Assaurtum N	∯\$d/- Si Principal			11.0	5

Directorate of Medical Education Trivandrum-11

INCOME AND EXPENDITURE ACCOUNT OF THE YEAR ENDED 31ST MARCH, 1990

### ### ### ### ### ### ### ### ### ##	Figures for the previous year	EXPENDITURE		
1.48,444 To Opening Stock of Chemicals, Films and other Surery Medical			·—	·
### Films and other Sundry Medical Itama etc. 3,72,6 5,51,393	1 49 444	To Owner to 1		As.
	1,10,144	o Opening Stock of Chem	icals,	
5,51,393			Medical	
Salaries, Wages, Bonus, Contibution to Prevident and Other Funds 3,83,478 Purchase of Medicines 7,89,58 6,44,509 Purchase of Medicines 7,89,58 Consultation service fee 27,63, 19,696 Uniform 24,334 30,500 Rent 89,371 Postage, Telegrams and Telephones 1,10,829 1,09,934 Printing exponses 1,92,311 28,360 Advertisement charges 55,045 21,776 Electricity charges Rumuneration to Auditors: 7,500 Fee for Acdd Fee for Tax Representation Repairs and Meintenance: Equipments 5,24,363.20 Buildings 36,645.82 Vehicles 1,08,092.75 7,17,101 New Bullding Inscription and Shifting Expenses 8,60,100 New Bullding Inscription and Shifting Expenses 93,888. 15,44,335.	5.61.700			3,72,89
tibution to Prevident and Other Funds 9,83,476 Purchase of Medicines 7,89,58 6,44,509 Purchase of Medicines 7,89,58 6,44,509 Purchase of Medicines 7,89,58 32,468 Consultation service fee 19,696 Uniform 24,39 30,500 Rent 8,371 Postage, Telegrams and Telephones 1,10,829 1,10,839 1,10,8	5,51,593			
25,59.004 Other Funds 33,52,83 9,83,478				• • •
9,83,475	75 50 004		1	
6,44,509				33,52,83,
Radiotherapy Isotopes 32,698				
32,488 Consultation service fee 27,63 19,696 Uniform 24,339 30,500 Rent 24,339 89,371 Postage, Telegrams and Telephones 1,10,829 1,09,934 Printing and Stationary 1,10,829 64,349 Travelling Exponses 1,92,311 28,360 Advertisement charges 55,045 21,776 Electricity charges 4,07,953 3,250 Legal Exponses 8,600 Remoneration to Auditors: Fee for Audit Foe for Tax Representation 1,500 Repairs and Maintenance: Equipments 5,24,363,20 Buildings 96,645,82 Vehicles 1,06,092,75 4,20,754 New Bullding theorems 93,988 8,60,100 Interest Paid to Banks 15,44,335.	6,44,509			100,00,
19,696				4.19 500
24,39 30,500				
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1,09,934 , Printing and Stationery 1,10,825 1,09,934 , Printing and Stationery 1,10,825 64,349 , Travelling Exponses 1,92,311 28,360 , Advertisement charges 55,045 21,776 , Electricity charges 4,07,953 3,250 , Legal Exponses 8,600		,, Rent		
54,349 Travelling Exponses 1,92,311 28,360 Advertisement charges 55,045 21,776 Electricity charges 4,07,953 3,250 Legal Exponses 8,600 Remaneration to Auditors: Fee for Audit Foe for Tax Representation 1,500 Repairs and Maintenance: Equipments 5,24,363,20 Buildings 96,645,82 Vehicles 1,06,092,75 4,20,754 New Bullding theorems 93,988 8,60,100 Interest Paid to Banks 15,44,335.		., Postage, Telegrams and Tr	Sispinones	
28,360 , Advertisement charges 55,045 21,776 , Electricity charges 4,07,853 3,250 . Legal Expenses 8,600		,, Printing and Stationary		
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3,250 Legal Expenses 4,07,893 Rumuneration to Auditors: 7,500		,, Advertisement charges		
3,250 Legal Expenses \$,600 Remoneration to Auditors: 7,500 Fee for Audit Fee for Audit Fee for Tax Representation 1,500 Repairs and Maintenance: Equipments 5,24,363.20 Buildings 96,645.82 Vehicles 1,06,092.75 7,47,101 New Bullding theorems and Shifting Expenses 93,988 8,60,100 Interest Paid to Banks 15,44,335.	21,776	., Electricity charges		
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### 1,500 ### Repairs and Maintenance: Equipments 5,24,363.20 Buildings 56,645.82 Vehicles 1,06,092.75 ###################################	7,500			8.600
### Repairs and Maintenance: Equipments 5,24,363.20 Buildings 66,645.82 Vehicles 1,06,092.75 7,‡7,101 New Bullbing Inecguration and Shifting Expenses 93,958 8,60,100 Interest Paid to Banks 15,44,335 65,62,883 Control 2		Fee for Tax Representation		
Equipments 5,24,363,20 Buildings 96,645,82 Vehicles 1,06,092,75 7,17,101 New Bullbing Inauguration and Shifting Expenses 93,988 8,60,100 Interest Paid to Banks 15,44,335.				1,5UÇ,
Buildings 96,645.82 Vehicles 1,06,092.75 7.‡7,101 New Bullaing Inerguration and Shifting Expenses 93,858. 15,44,335. 65,62,883				-
#.20,754 Vehicles 1,08,092.75 7.‡7,101. New Bullsing Inerguration and Shifting Expenses 93,858. 15,44,335.				
7.‡7,101. New Bullsing Inerguration and Shifting Expenses 93,958. 8,60,100 Interest Paid to Banks 15,44,335.		-		
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Shifting Expenses 93,958. 8,60,100 Interest Paid to Banks 15,44,335. 65,62,833		, New Bulldjow theoretics	and	
8,60,100 , litterest Paid to Banks 15,44,335.		Shifting Expenses	and	
65.62.833	8,60,1 00 ,	, Interest Paid to Banks		•
65,62,883 Cerried Over:	<u> </u>	.:		1644419991
	65,62,883	. Carried Over:	· · · · · · · · · · · ·	91,68,229.6

REGIONAL CANCER CENT POLIETY, THIRUVANANTHAPURAM

1			
Miss for the Mous year	INCOME		
Rs.	_,	Rs. P.	Re. P.
	By Grant from Government of Kera Health and Family Welfare Department received during	. ·	
	the year:- 1st Instalment as per letter No. G.O. Rt. 2002/89/H GFWD	30,00,000.00	
Ç.	dt. 1–7 -1389	30,00,000.00	
	2nd Instalment as per letter No. G. O. Rt. 2914/89/H & FWD ct. 29-9-1989	26,00,000.00	
	3rd Instalment as per letter No. G.O. Rt. 3724/89/H & FWD st. 19-12-1989	30,00,000.00	
	4th Instalment os per lotter No. G.O. Rt 786/90/H & FWD dt. 12-3-1990	18,00,000.00	
9) 67 67	5th Instalment as per letter No. 6,0, Rt. No. 931/90/H & FWO ot. 22–3–1990	1,60,000.00	
:		1,04,50,000.00	
47,82,100	Less: Part of the Grant Capitalised and transferred to Batance Sheet	96,64,257.82	67,85,742:18
12,50,384	By Investigation Fees		16,74,203.71
		•	
60,32,484	Carried Over:	* 55.7	84,59,945.6
. 00,34,404		· 	

REGIONAL CANCER CENTER

INCOME AND EXPENDITURE ACCOUNT

Figuras for Ula Stovious year	EXPENDITURE (Contd)	रण-प्र कार १ : : १
·Au.	Rs. P.	
56,62,888	B/ferward,	97,68,23
14,033	To Conferences, Seminors &	. 100,22
	**************************************	€0,93
87,83S	Books and Periodidals Barly Cancer Detection Centre Exponess	1,02,50
	Salaries and Alfowaness 8,29,308,40 Travelling and other in the	
4,29,843	Exponses 51,480.45	
7,20,043	, Proportionate Share of Expanditure of National	3,80,785
1,19,801 .	- Tuthour Registry	11000
25,030	Miscellanuous Expenses	1,19,068
	A CONSTRUCTION OF THE PROPERTY	67,859

NOTE: Receipts and Payments on account of various Research and other Schemos senctioned by ICMR and other organisations/Government departments have not bosn incorporated herein.

> Vide our report of date attached For SURI & CO.

Chartered Accountants

Pisoe: Thirtiyananthapuram Dated: .07-11-1990_____

THE YEAR ENDED 31st MARCH 1990

igares for Vevious your	INCOME (Contd)	<u> </u>
ns.	_ ; ; ; ;	Rs. P.
	B/forward	. 64,59,945.89
5, 00,44-7 5, 1 7,019	By Interest Roceived	- 37,204.8C
3,000	, Cylolechnician Cause Fee	9,750.00
50 0	, Fee and charges on Radio Immune Assev Conrse	
2,000	, Fee on Ultrasonography Training	7,000-00
24,029	, Missellanoous Recuipts	45,57/.40
· 9 	, Closin Stock of Chemicals, Fifms and Other Sundry Medical	8,40,950.00
3,72,816	items etc.	
7,97,581	, Excess of Expenditure over Income	6,95,378.59

72,39,429

Sd/-Director

Medical College, Trivandrum

DR. AYSHA GCHARAJ, MD Directorate of Madical Education Trivandrum 695 011.

CANCER CARE

 Figures for the previous year	EXPENDITURE	→
Rs,		—
 36,000 7,250 25,314	To Salaries Advertisement and Publicity Processing of Application Forces and mailing charges Cost of Return of utilised	Ra. 47,13, 10,67, 29,78;
 9,218 2,500 1,166	Application Forms Printing and Stationary Postage and Felephone Rent	56,324 31,767
 20,500	Travelling Expenses Maintenance and Motor Vehicles Cost of Medicines and Exponsos reimbursed to patients	1,275 18,417 1,07,137
37 7,97,880	Miscellancous Expanses Excess of Income over Expanditure for the year	429, 8,95,378

REGIONAL CANCER CENTE SECULTY, THIRUVANANTHAPURAM

THE SCHEME

INCOME AND EXPENDITURE ACCOUNT OF THE YEAR ENDED 31st MARCH 1990

gylogs year	INCOME	
88. 9,183 8,89,431	Sy Sale of Application Form , Interest on Fixed Deposits	As. P. 12,850.00 9,71,297.61
		en en en en en en en en en en en en en e
		All All Pills All Pi

Vide our Report of deto attached

For SURI & CO N SESd/-

9,84,147.61

Partner Partner B95 011

Chartered Accountants (DR. AYSHA GUHARAJ M. D. Sd/ Director

N. SUBBIAH Directorate of Medical Education

8,98,814

Sd/-Director

9,84,147.01

.....Principal

Medical College, Trivandrum

Pface: Thiruvananthapuran Dated : 07-11-1990 the Arthurst

8,98,614

136

∴ <mark>137</mark>

Schedule of Fixed Asset

		Written down value as of 1-4-1989	Additions during the year
		Rs. Ps	Rs. P.
: Bujlding	and the disc	1,89,08,147,79	34,85,736.68
Boundary wall		1,27,118.63	
Furniture and Fixtures		4,93,251 ,45	6,59,652.57
Office Equipments		1,03,708,50	6,177.40
Vehicles		1.02,253 .95	3,36,239.00
Library Books		1 96 340 gtv	

Lift/Elevators 4,39,433.00 Electrical Installation and Fittings 58,33,236,80 Air-Conditioning (under installation) 56,23,384,65 Telephone Equipments 5,15,695,003

Water Supply Addition to Old Building

Hospital and Lab Equipments

Note: A sum of Rs. 116 lakhs and Rs. 80 lakhs have been utilised till 31-3-1990 on purchase of Hospital and Laboratory Equipments and construction of building respectively out of the Grant-in-Aid received from the Government of India.

Trivandrum, 7-11-1990.

Sd/-Director 4

1,96,340,65

8,02,985,00

8,60,110,25%

5,02,94,272.96

1.62,88,609 39

REGIONAL CANCER CENTRE SOCIETY, TRIVANDRUM

as on 31st March 1990.

*	Additions during the year	Deduction during the year	Balance es on 31-3-1990
	Rs. P.		Rs. P.
Ž.	34,85,736 . 68		2,23,93,884.47
	34,65,750.00		1,27,118.63
	6.59,652.57		11,52,904.02
	6,177 . 40		1,09,883.90
	3,36,239.00		4,38,492.95
25	3,30,200.00		1,96,340 :55
	16,04,274.63		1,78,92,884.02
Par N	50,047.00		4,89,480.00
	1,80,636.10		59,93,872 . 90
	10,015.70		56,33,400.35
() ()	. 10,010.10		5,15,695 · 00
	1,01,014.00		9,03,999.00
€	1,01,014.00		8,60,110 . 25
		• •	
	64,13,793.08		5,67,08,066 . 04

Sd/-Principal Medical College Trivandrum

For SURI & CO., Chartered Accountants Sd/-N. SUBBIAH Partner

·\$d/--Dr. AYSHA GUHARAJ, MD. Director Directorate of Medical Education, Trivandrum-11

SURI & CO.

Chartered Accountants

M. G. Road Trivandrum-695 001

7th November, 185

The Governing Budy, Regional Cancer Centre Society "HIRUVANANTHAPURAM:

AUDITORS' REPORT

We have rexamined the accounts of REGIONAL CANCER CENTRE SOCIETY THRUVANANTHAPURAM (Regn. No. 567/81) for the year ended 31st March 1990, the attached Belance Shoot as at 31st Merch 1990, and the Income and Expenditure Account for the year ended that date annexed thereto and we certify the same to be correct and in agreement with the books of account and other recover kept by the Society so far as it appears from our examination of those bricks and reports, subject to the following:

- Deprudation on Fixed Assets has not been charged since 31-3-1986 and the unprovided depreciation amounted to Rs. 1,26,38,989 Including Rs. 39,73,913 relating to the year ended 31.3.1990.
- In respect of additions to the old building, capitalised during the year 7987/88
 a) Rs. 8,60,110, pending negotiation und/or sattlement with State P.W.D.,
 additional claim of Rs. 4,16,940 medo by the State P.W.D. has not been provided.
- 3. In respect of land of 89 cents at Paighat, assigned by Government in G.O.No. 619/88-RD dated 28.7.1988 and building constructed thereon, the value of which amounted to Rs. 1,27,119 and is included under Fixed Assots, the receipt of patta in favour of the Society is yet to be obtained.
- 4. Stock records in respect of chemicals, films and other modical materials have not been properly maintained. The closing stock of Rs. 6,40,950 as on 31.03.1990 has been valued as per the inventories furnished by various Departments.
- 6. Advances considered good includes Rs. 29,452 towards travelling advances and Rs. 82,816 towards advances for purchases, aggregating to Rs. 1,12,268, outstanding for more than one year in respect of which no proper adjustments/recoveries have been made in the accounts. The control procedures for squaring up of advances require to be strengthened.
- No provision has been made in respect of Advances considered doubtful of recovery empuriting to Rs. 15,000.

Existing internal control procedures for the purchase of chemicals, films and other medical materials and also for capital assets should be strengthened further to the advantage of the Society and also periodical physical verification has to be conducted to facilitate comparison of physical stock with the records and to make adjustments, if any, in the financial records.

No Salestax liability on the works contract has been provided for in the accounts.

In the absence of specification as to capital and revenue nature for the grant of Re. 1,04.50,000 received from Government of Kerals, the grant received has been treated as revenue grant shown under income and expenditure account to the extent of excess of expenditure over income, including the Cancer Care for Life. Scheme and the balance of grant received has been treated as capital grant, carried to Balance Sheet.

For SURI & CO.

Chartered Accountants

Sd/-N. SUBBIAH *Pertner*

REGIONAL CANCER CENTRE

NOTE

No.

RCC/Accts / 90-913

Date: 14-11-1989

Remarks of R. C. C. on the points raised in Sub:--Auditors Reports.

- State Govt, have instructed that depreciation need not be
- 2. State Govi, have been requested to waive the additional claim of Rs. 4.16,940.
- Action is pursued with revenue Authorities to get Pattic in respect of the 69 cents of land in Palghat.
- improve the system of maintenance of stock records.
- Instructions are noted for guidance.
- Court has decreed the amount in favour of the Centre and honce the amount is realisable. It is not doubtful of recovery.
- 7. Instructions are noted for guidance and action will be taken ${\mathbb Z}$ to streamline the procedures.
- Observations are noted.
- Parts of the grant was utilised on construction of Building and acquisition of assets and hence that part of grant, shown as capital grant is in order.

Sd/→ DIRECTOR chartered Accountants

Mahatma Gandhi Roadi Thiruvananthapuram-695 001

12-11-1990

UTILISATION CERTIFICATE

Certified that the grant of Rs. 23,00,000 (Rupces Twenty Sthree lakhs only) received by the Regional Cancer Centre Society. Trivandrum (Reg. No. 567/81) from Ministry of Health and Family Wolfare, Government of India, as per letters No. V-22015 Observations of Auditors noted. We have taken action to 12 6/88-R dated 20-01-1989 and 03-05-1989, has been utilised improve the system of majority. during the year ended 31-03-1990, for purchase of equipments in connection with the development of the Regional Cancer ිරි Contre.

> For SURI & CO. Chartered Accountarits \$d/-N. SUBBIAH Partner

Mahatma Gandhi hoa Trivandrum-695 00

8-11-199

UTILISATION CERTIFICATE

Certified that the grant of Rs. 1,04,50,000 (Rupees One Crore Four lakhs and fifty thousand only) received during 1989/90 by REGIONAL CANCER CENTRE SOCIETY THIRUVANANTHA Department, Government of Kerala, as per the following Govern ment Orders:

GO (Pt) No cooperation	-
G.O. (Rt) No. 2002/89/H&FWD dt. 1–7–1989	20.00
G.O. (Rt) No. 2914/89/H&FWD dt. 29-9-1989	30,00,0
GO (Pt) No 270 240 250	25,00,00
G.O. (Rt) No. 3724/89/HAFWD dt 10 12 1000	1 - 4/9/

G.O. (Rt) No. 786/90/H&FWD dt. 12-3-1990

G.O. (Rt) No. 931/90/H &FWD dt. 22-3-1990

1,04,50,000

has been utilised by the Society during the year 1989/90 for the purpose of Chemotherapy and Nuclear Medicine and allied services and also for the purpose of maintenance of the Institution and other working expenses, implementation of projects, construction of buildings, functioning of Early Cancer Defection Centres and maintenance of National Tumour Registry.

> For SURI & CO. Chartered Accountants Sd∕∸ N. SUBBIAH

> > Partner

CANCER CARE FOR LIFE SCHEME

Modern medical management of cancer is expensive on g gocount of the enormous cost for diagnosis and treatment. As such a number of patients especially of the weaker section do not comply with the stringent requirements of modern greatment. The R. C. C. sought to relieve the problem to a celtain extent by offering to the residents of Kerala, a welfare scheme called "Cancer Care for Life". It was introduced in PURAM (Regn. No. 567/81) from Health and Family Welfare Summer 1986. Anyone who is not a cancer patient can become a Department. Government of Very member of the scheme by filling in an application form for membership and making a one-timo remittance of Rs. 101/- to a desiganated bank. There is no medical examination prior to enrolment in the scheme. A membership card is issued to those joining the scheme. The membership in the scheme entails the applicant o receive cancer diagnostic and treatment facilities at the R.C.C., trivandrum in the unfortunate event of getting cancer anytime 18,00,000 Learning his life-time after 2 years from the date of enrolment.

1,50,000 R.C.C. will also meet Bus/Railway fare from residents in Kerala for the first trip to the Centre and accommodation charges accor-ding to the rules of the Centre. If the Academic Forum after due consideration of various facts recommand advance treatment alsewhere in India or abroad such expenses will also be mot by R.C.C. (subject to clearances individual cases by Reservo ್ಜ್ Bank of India).

> The details given below as on 31-2-1990 reveal how far the scheme has been beneficial to the people of Kerala.

- No. of persons enrolment in the scheme 1,05,000
- Membership fee invested in securities
- No. of persons benefited by the scheme -11,10,10,000
- Expenditure incurred on granting 1,27,637 benefits to CCL patients

The amount paid by a person may not be helpful to himself but it will help another in distress.

LIST OF STAFF

	• • • •
Director	— Dr. M. Krishnan Nair
Superintendent	 Dr. T. K. Padmanabhan
Secretary (Academic)	- Prof. A. Joseph
RADIOTHERAPY	
Dr. M. Krishnan Nair Dr. T. K. Pedmanabhan Dr. F. Joseph Dr. C. S. Kuttappan Dr. B. Rajan Dr. T. Gangadevi Dr. C. S. Rafeeka Beegum Dr. P. G. Jayaprakash Dr. S. Parameswaran Dr. V. Narayana Bhattathiri Dr. Jayaprakash Madhavan Dr. C. S. Madhu Dr. A. Sudhakaran Dr. P.R. Sasindran Dr. Gireesan Dr. K. Ratheesan	- Director & Professor - Professor - Assoc, Professor - " - " - Asst. Professor - " - " - Tutor - " - Lecturer
DENTAL SECTION	•
Dr. L. Sudha Dr. K. R. Nalinakumari Smt. Krishnambal M.	Tutor Lecturer Qental Hygienist
IMAGEOLOGY	
Dr. K. Sasidharan Dr. V. Padmanabhan Dr. V. M. Pradeep Bri. Raghu Ram Nair, K. Dr. K. Ramachandran	Assoc. Professor Asst. Professor Lecturer

7: Smt. Raheena Beegum	— Radiographer Gr. II (on long leave)
	- Radiographer Gr. II
nt. V. Sheela	
Sil, Joe D'Cruz	n
gri, T. Prasad gri, T. Radhakrishnan Nair	
Sil 1. Hadhakiletti	
BADIATION PHYSICS	A Frederica
or, T. P. Ramachandran	Assoc. Professor
Mal P.G. Gopalakusuua norup	- I/
Ke, C. A. Davis	 Asst. Professor
溪ri. Thayal Singh Ellas	— Lecturer
R Vimala	 Radiographer
្រឹត្តិក្រ N Sadasiyan Nuit	
₩‰+ Suseelamma	— "
இர், C. Viswanathan	_ "
‰on• M. Leola	
ើក្សា p Ramabhadran	<u> </u>
Sit, K. P. Radhaknshhan	"
≋smt. R. Suj≉	16.
Šimt. Susamma George	Radium Technician
Sri, S. Sreenivasan	Radium recriniciani
CYTOLOGY	
Dr. N. Sreodevi Amma	Professor
S.Dr. B. Chandralekha	 Assoc, Professor.
Dr. Elizabeth K. Abraham	Asst. Professor
Dr. Rajasekharan Pillai	_ "
Smit, J. Ambika Kumati	 Senior Scientific Officer
Sri. Ragunathan Nair	- Cytologist
g: sn. nagunaulan (kan ∮ Sri. K. Vijayagopal	 Junior Research Offices
Sti. P. Gopalakrishnan	 Research Assistant
Sri. R. Muraleedharan	 Cytotechnologist
C. Sill 11 Minimidentia.	(on long leave)
Sri, K. Raveendran Pillai	 Cytotechnologist
Smt, Molykutty John	 Cytotechnologist
Smt. C. Radhamme	Lab Technician Gr. I.
Smt. S. Najeeja	<u>-</u>
Smt. J. Omana	U. D. Typist
Smt. G. Leelamma	 Lab Technician Gr.f.
7. Gilli, G. SOUISINIA	

Smt. G. Lekha Sri. P. T. Abraham.	- Lab Technician Gr. II	Dr. R. Sankaranarayanan	 Epidemiology (Medical)
Citi 1, 1, Abianam.	 Cytotechnician 	Biolina Davaendran Neu	 Medical Records Officer
SURGICAL ONCOLOGY		are a Marcalessallatal iven	Medical Statistician
		Padmakuman Anima	 Senior Research Fellow
<u>Dr. Thomas Cheriyan</u>	Asst. Professor	P. T. Lama	Social Investigator
Dr. Gladys Jeevi	- Anaesthetist	an A ₊ Anitha Na⊓	- "
Dr. Paul Sebastian	Asst. Professor	a-emt V. Jajajakuillali	— Clork
Dr. Iqbal Ahamed		a a ⊢ G Amaiadas	n .
Dr. N. Sivaramakrishnan	- Resident Surgical Officer	Raiasekharan wair	— "
Dr. K. I. Javalius	- Part	Cont Steedevikutty	- Typist
Dr. K. L. Jayakumar Dr. Asha Kumar	Resident Surgical Officer	🐒 😋 B Sreekumar	· — Coding Clerk
	 Lecturer 	smt. D. Chandrika	4. Coding Clerk
Dr. Moly Joseph Joy Sri. B. Harikumar	 , , , , , , , , , , , , , , , , , ,	Smt. T. Chandrika	Clerk Typist
on, p. nankumar	Theatre Asst.	Sri S. Rajayyan	Technical Helper
PAEDIATRIC ONCOLOGY			
A PROPERTY OF COLOG	Y	MEDICAL ONCOLOGY	•
Dr. P. Kusuma Kumari Dr. S. Rajeev Kumar	Asst. Professor Lecturer	. Or. V. P. Gangadharaп	 Asst. Professor
CAMOED BEARING		Community Oncology	
CANCER RESEARCH		6.	D. 5
Dr. Prabha Balaram		Dr. Babu Mathew	 Assoc. Professor
Smt. P. Remani	- Assoc. Professor	Dr. Ramani S. Wesley	Lecturer
Sri. Ravoendran Ankathii	- Lecturer in Cancer Research		
Sri. Thomas Abraham	- Scientific Officer	ADM IN ISTRATIVE OFFI	C L
Smt. B. Padmavathy Amma	F7	Sri. K. Lekshmana Iyer	Registrar
	- Technical Officer	Sri. Joseph Stephen	- Finance & Accounts
Smf. C. Gangadevi	(till 31-3-90)	ac. dt. ddaepii otepiiot	Officer (till 31-5-1989)
Smt. J. Usha	— Lab Technician Gr II.	Sri. K. R. Bhaskaran Nair	Finance & Accounts
Smt. P. Renuka		O(I. te ii. Didistanti	Officer (from 1-7-1989)
Sri. Anil Kumar		Sri. G. Sadasivan	 Administrative Officer
Smt. A. Leela	Aprimal Hand	Sri. C. Somasekheran Nair	Financial Asst.
	- Animal House keeper-cum-	Old Co. Bollingson	(till 31-12-89)
Sri. K. Vikraman Nair	Attender	Sri. S. Sukumaran Nair	 Cashier-cum-Accountant
•		Sri. G. Gneneswaren	— Accountant
HOSPITAL CANCER REGIS	TRYAND	Sri. N. Ramaswamy Iyer	Office Assistant
MEDICAL RECORDS		Sri, S. V. Sasikumar	— "
		Smt. B. Lalitha	"
Sri. P. Gəngadhəran	- Assoc. Prof. of Cancer	Smt. N. Beena	···
	Epidemiology (Statistics)	Sri. K. Sasikumar	_ "
	Transmortal (Statistics) . Was	on it odakomo	**

Sri. Sudarsanan Pillai	— Office Asst. (till 29-4-1989)		
Sri. Sreedharan Nair		ENGINEERING WING	•
Smt. K. Rajaf⊚kshmi		ENGINEER	
Smt. R. Sudevi Smt. S. Malfikadevi	 Confidential Asst. 	Sri. G. Raveendranathan Nair	Project Engineer (till 4 . 10 . 89)
Smt. B. Savithri Amnia		Sri A. Rajan	 Maintenance Engineer (Electrical)
Sri. P. Krishnan Nair	— Driver		Asst. Proj. Engineer
Sri, P. Sreekumaran Natr	<u> </u>	Sri. P. Rajagopal	Ist Grade Overseer
Sri. K.P. Krishnadas	- /	Asokan Nair	
Sri, Sasidharan Nair		See See p Suggela	Confidential Asst.
Sri. M. Subair	→ Helper	Sri. A. R. Santhosh Kumar	 Supervisor (Electrical)
Sri. P. Antony		· 在新聞記:	- Supervisor (Electrical)
Sri. K. Devaraje Panicker	— "	Sri. N. Sesidharan	- Supervisor (creculous)
Sri, G. Surendran	— "	🏂 🐞 \varsigma ri Κ. R. Rajeπdran	<i>n</i>
Sri. R. Anifkumar	· · · · · · · · · · · · · · · · · · ·	Sri. B. Rajeevan	·
Sri. C. Hari	$\sim 2 - 10^{-3}$		
Sri. K. Thankappan Chettiyar	rr	FARLY CANCER DETECT	ION CENTRE, ERNAKULAM
Sri. K. G. Balachandran	 		
Sri. P. Gopakumar	$ \alpha$	Dr. B. Syamalakumari	 Cytopathologist
Sri. P. S. Suresh	— "	Smt. Mercy Joseph	— Cytotechnologist
on, r. o. auresh	— "·	Sri, K. Sujathan	Cytotechnician
Sri. L. Balachandran	· - "	Smt. T A. Ramani	 UD Typist.
Sri. K. Sivankutty		5mt. L. Madhavikuttyamma	 Staff Nurse
Sri. S. Seлan		Sri, P. M. Adbul Rahiman	— Helper
Smt. P. Seothalekshmi		Smt. N Santhakumari	 Nursing Assistant
Sri. Sasikumaran Nair		Sill, N Salidiakum	
•••	Helper-cum-Watchman	EARLY CANCER DETECT	TON CENTRE, PALGHAT
NURSING	*.*	THE WALL CANGER DETECT	,011 02101112,1112
Smt. P.M. Aleykutty	•	Dr. Ananda Kamath	Cytopathologist
Smt, S. Geetha	Staff Nurse	Smt. C. Radha	Cytotechnologist
Smt Cabras	- Staff Nurse	Sri. B. Anujan	_ "
Smt. Saly Augustine	 Staff Nurse (on long leave). 	Sri. A. Nataraj	 Cytotechnician
SECURITY	tan iong roavey	Salar Stj. A. Nataraj	(on long leave).
SECONITY .	•	Smt. P. C. Bhavani	Staff Nurse
Sri. S. Vijayan Nair	g		Hospital Attender Gr. II
Sri. K. Thankappan Nair	— Sergeant	Smt, Lekshmikutty	— Helper
Sri. N. Achuthan Nair	 Security Guard 	Sri. G. Das	
Sri. B. Stellage	,,		
Sri. Somaskeharan Nair	- "		
Sri. Sukumaran Nair	- ,		
Sri, Sahadeyan	- ,,		
on, sanadevan	₄		
. 800		7,235,7750U 7,835,770U	

ACKNOWLEDGEMENT

Government of India, Ministry of Health & Family Welfare,

Government of India, Department of Science and Technology,

Government of Kerale, Department of Health & Family Welfare

Chief Secretary to Government of Keraia.

Indian Council of Medical Research, New Delhi.

World Health Organization, New Delhi.

International Union Against Cancer (UICC) Geneva, Switzerland

British Council, Madras.

American Cancor Society, New York.

National Cancer Institute, Bethesda, Maryland, U.S.A.

Allegheny General Hospital, Pittsburg, U.S.A.

Christie Hospital & Holt Institute, Menchester.

Chester Beatty Research Institute, London.

University of British Columbia - Environmental Carcinogenesis of Sneh Bhargava, All India Institute of Medical Sciences, Unit, Vancouver, Canada.

Bhabha Atomic Research Centre, Bombay.

Director General of Health Services, Government of India, New Director of Census Operations, Kerala, Delhi.

Director, Vikram Sarabhai Space Centre, Trivandrum.

Director, Sree Chitra Thirunal Institute for Medical Sciences & University of British Columbia, Canada. Technology, Trivendrum.

Kerala State Committee on Science, Technology and Environment, Trivandrum.

Director of Medical Education, Kerala.

Trivandrum.

Principal, Medical College, Trivandrum.

இழ்ந்தார்கள் இது Medical College Hospital, Trivandrum.

Superintendent, Stee Avittam Thirunal Hospital for Women and Children, Trivandrum.

Dean, Dental College, Trivandrum.

Dr. Calvin Zippin, Director, Tumour Registry, San Francisco.

pr. A. S. Paintal, Director General, Indian Council of Medical Research, New Delhi.

Dr. Usha K. Luhra, Sr. Deputy Director General, Indian Council of Medical Research, New Delhi.

Dr. V. Shanta, Director, Cancer Institute, Madras.

pr. P. B. Desai, Director, Tata Memorial Centre, Bombay.

pr. M. Krishna Bhargava, Director, Kidwai Memorial Institute of Concology, Bangalore.

Dr. B. D. Gupta, Postgraduate Institute, Chandigarh.

New Delhi.

Controller of Stationaries, Government of Kerala, Trivandrum.

Director, Bureau of Economics and Statistics, Kerala.

Dr. H. F. Stich, Chief Environmental Carcinogenesis Unit,

4 Managing Director, Travancore-Cochin Chemicals, Always.

M/s. Instrumentation Ltd. Palghat

Vice-Chancellor, University of Kerala.

Vice-Chancellor, Mahatma Gandhi University, Kottayam

Dr. M. V. Pillai, Naval Hospital, Bethesda, U. S. A.

Dr. Morton Coleman, Cornell University, New York.

Dr. Laurence Lessin, George Washington University, Washington DC

Dr. Jimmie Holland, Memorial Sloan Kettering Cancer Centre, USA

Dr. Andrew M. Yeager, John Hopkins University, U.S.A.

Dr. N.E. Day, Director MRC Biostatistics Unit Cambridge,

Mr. Stephen W. Duffy, Scientific Officer MRC Biostatistic Unit, Cambridge.

Board of Directors, Susan Daniel Memorial Cancer Relief Fund, Irvine, California.

Drugs Controller, Trivandrum.

Director, College of Pharmaceutical Sciences, Trivandrum.

