2007-2008



REGIONAL CANCER CENTRE

THIRUVANANTHAPURAM - 695011, KERALA, INDIA

Regional Cancer Centre Thiruvananthapuram - 695 011, Kerala, India

Telephone : +91 471 2442541 Director (Dir) : +91 471 2443128 Fax : +91 471 2447454 E-mail : director@rcctvm.org

www.rcctvm.org

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ORGANISATION & SERVICES

GOVERNING BODY

EXECUTIVE COMMITTEE

DIRECTOR

ADMINISTRATION

General Administration Finance

SERVICES

CLINICAL
Radiation Oncology
Surgical Oncology
Medical Oncology
Paediatric Oncology
Anaesthesiology
Radiation Physics
Community Oncology
Multidisciplinary Clinics

DIAGNOSTIC

Cytopathology Imageology Nuclear Medicine Clinical Laboratory

AFFILIATED UNITS

Nursing Pain & Palliative Care Blood Bank Pharmacy Medical Records Dental Care

RESEARCH

Basic Research
Molecular Medicine,
Drug Development and
Chemo-informatics
Epidemiology &
Clinical Research

Outreach Programmes

ECDC, Ernakulam ECDC, Palakkad NBRR, Karunagapally

Library & Information Services Information Systems

GOVERNING BODY (2007-2008)

	•	,
1	Sri.V.S.Achuthanandan	
	Hon'ble Chief Minister of Kerala	Chairman
2		: :- :: :: :: :: :: :: :: :: :: :: :: ::
	Hon'ble Minister for Health, Govt. of Kerala	Vice-Chalman
3.	Dr.Vishwas Mehta, IAS	VICE-OILDINGS
	Secretary to Govt.,	
	Health and Family Welfare Department	•
	Govt. of Keraia	Alt.Vice-Chairman
4.	Sri.K.Jose Cyriac, IAS (Till 8.02.08)	7 M. FIGO SHERINGH
	Principal Secretary to Government	
	Finance Department, Govt. of Kerala	Member
5.	Dr. L.C.Goyal, IAS	1416:11761
	Principal Secretary to Government	
	Finance Department, Govt. of Kerala	Member
6.	Dr. Alok Sheel, IAS (Till 30-06-2007)	·
	Secretary to Government	
	Planning Department, Govt. of Kerela	Member
7.	Dr.Teeka Ram Meena, IAS (From 10-07-2007)	Menting
	Secretary to Government	
	Planning Department, Govt. of Kerala	Member
8.	Dr.K.Mohandas	inchinal
	Director, Sree Chithra Thirunal Institute for Medical Sciences	
	and Technology, Thiruvananthapuram	. Member
9,	Director General of Health Services,	. Montesi
	Ministry of Health and Family Welfare, Govt. of India	Member
10.	Secretary	HEITING
	Ministry of Health and Family Welfare, Govt. of India	Member
11.	Dr.S.C.Gupta	. arcanog
	'Vaidya', Pulayanarkotta Road, Thiruvananthapuram	Member
12.	Dr. Meenu Hariharan (Tirl 30-04-2007)	indine of
	Director of Medical Education, Thiruvananthaouram	Member
13.	Dr. G. Sudayakumar (01-05-2007 to 31-10-2007)	Managa
	Director of Medical Education, Thiruvananthaouram	Member
14.	Or. P. V. Ramachandran (From 01-12-2007)	11104111/04
	Director of Medical Education, Thirryananthapuram	Member
15.	Dr.A.V.Remadevi (Till 30-11-2007)	in all INCO
	Principal, Medical College, Thiruvananthapuram	Member
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la a	Dr.K. Salikumar (From 61-12-2007)	
lin.	Principal, Medical College, Thiruvananthapuram	Member
17.	Or.B.Rajan	
i	Director, Regional Cancer Centre	Convener .
1.		
	Executive Committee (2007-2008)	
1.	Dr. Vishwas Mahta, IAS	
	Secretary to Govt., Health and Family Welfare Department, Govt. of Kerala	Chairman
2.	Sri.K.,Jose Cyriac, IAS (Till 8.02.08)	
	Principal Secretary to Government	Member
	Finance Department, Govt. of Kerala Dr. L.C.Goyal, IAS	NIO!!!
Э.	Principal Secretary to Government	
	Finance Department, Govt. of Kerala	Member
4.	Dr. Alok Sheel, IAS (Till 30-06-2007)	
	Secretary to Government, Planning Department, Govt. of Kerala	Member
	Or. Teeka Ram Meena, IAS (From 10-07-2007)	
퉙.	Secretary to Government,	
	Planning Department, Govt. of Kerala	Member
6.	Dr. Meenu Hariharan (Till 30-04-2007)	Member
	Director of Medical Education, Thiruvanamhapuram	Menne
7.	Dr. G. Sudayakumar (01-05-2007) to 31-10-2007) Offector of Medical Education, Thiruvananthapuram	Y _i ember
8.	Dr. P. V. Ramachandran (From 01-12-2007)	Member
	Director of Medical Education, Thiruvananthapuram	. Inen:Dei
9.	Dr.A.V.Remadevi (Till 30-11-2007) Principal, Medical College, Thiruvananthapuram	Membe:
40		
10.	Principal, Medical College, Thiruvananthapuram	Member
1î.		
11,	Director, Regional Cancer Centre, Thiruvananthepuram	Convener
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OVERVIEW

Regional Cancer Centre, Trivandrum, having entered into its 27th year of existence, has added several stars to its crown of achievements fouring the report year. Being one of the leading RCCs in India, we continued to keep appreciable standards in comprehensive cancer care, prevention, control and research. Rapid progress could be seen in all our activities targeting the community at large. At par with the international standards and current trends in oncology, treatment protocols are being applicated and we have been taking best possible care of the patients.

The year 2007-08 brought in remarkable improvements in the infrastructure facilities which the Centre has been giving major thrust. Clinical and diagnostic services have been further strengthened with the addition of new facilities. With the commissioning of a state-of-theart Bone Marrow Transplant Unit, RCC has become the first institution in Government sector in the state and fourth among Indian states to offer such an advance facility to those suffering from Acute lymphoma. Leukernia and Multiple myeloma. The unit was opened by Smt. P.K.Sreemathy Teacher, Hon/ble Minister for Health on 6th October 2007. By this, a life saving procedure at reasonable experise could be delivered to the needy patients. We could claim the credit of being the first Centre in the country to offer bone marrow transplant at a very low and affordable cost. Diagnostic facilities at RCC were strengthened with the installation of Magnetic Resonance Imaging(MRI) scanner, a major project inaugurated by Dr. Anbumani Ramadoss, Hon ble Minister for Health & Family Welfare, Govt. of India on 24th November 2007. Patients not only at the Centre but those referred from other hospitals also could avail the benefits of MRI at subsidised rates or at no cost. The X-ray units with C-arm facility and Digital Radiotherapy Simulator are other noteworthy additions to augment the infrastructure towards comprehensive cancer management. Initiatives were taken to enhance the blood bank facilities and for organizing a modern Microbiology · laboratory as part of intensifying the clinical support services.

There has been an upsurge in academic and research activities during the year. The PG programmes - Diplomat of National Board, were running well in all the approved specialties. We also offered Fellowship opportunities in many specialties in oncology. From the very inception, RCC has been giving high priority to teaching, training and research that has earned due recognition at national and international levels. Several

external agencies. The results of many research activities both at basiliar in the care facilities of RCC to sural people. Community research and clinical level found place as scholarly articles in international journals Currently 28 scholars are doing research leading to Ph D. One of the field projects covering large population groups both in urban and rural areas surveys led by RCC during the research leading to Ph D. One of the field projects covering large population groups both in urban and rural areas. surveys led by RCC during the report year found that smoking and page masala use were prevalent among government school students. Many such surveys provided us the data in formulating our future course of action in cancer control activities in the State. An ICMR funded study of genetic susceptibility of tobacco associated malignancies came up with evidence on metabolizing genes in the transformation of oral leukoplakia Studies were also taken up in integrating cancer therapeutics with traditional ayurveda compounds and exploring its benefits. Clinical tria using ayurvedic mouth wash in patients undergoing radiotherapy for ora cancer provided us positive results in minimizing radiation toxicities.

Integration of cancer screening programmes with existing health care system as a whole has been another dynamic area the Centre has been focusing. Breast cancer has emerged as a major public health issue in the state which urged RCC to target its attention to this particular problem. Trivandrum Breast Cancer Screening Project, the collaborative line. RCC resources and funds raised from sponsorship were utilized project of Regional Cancer Centre and International Agency for Research on Cancer, France is progressing well. This programme is in line with the Trivandrum Oral Cancer Screening study which has demonstrated for the first time in the world the effectiveness of oral visual examination in reducing mortality from oral cancer. Benefiting the community at large, many of the RCC camps and awareness classes focused mainly on oral and breast cancers.

The Centre has been able to organize several training programmes and seminars during the year. World Palfiative Care day was observed on October 6, 2008 with various programmes. Addressing the seminar, Shri. M. Vijayakumar., Hon'ble Minister for Law, emphasized the need for No-Tobacco Clubs to make the public aware of the menace of tobacco use. Another event was the Workshop on Oral premalignancies and cancer organized on 7th November 2008 in connection with the National Cancer Awareness Day'. On 6th October 2008, the 'World' Palliative care Day', 'Santhwana Sandesa Yatra' a vehicle rally was organized by RCC Palliative Care Division with the support of many nongovernmental and residents' associations. Several awareness meetings in selected locations were conducted all along the rally to spread the message of terminal care and pain relief. A telemedicine link for palliative

clinical research projects were undertaken supported by national animal external agencies. The results are alliative care facilities of RCC to rural people. Community research ave been a notable feature of our outreach programes. A variety of mass communication media were utilised. As detailed in the departmental activities, a series of cancer detection and screening programmes were conducted under Trivandrum Corporation Cancer Control (TCCP) and District Cancer Control Programme (DCCP) projects. In organizing such events and bringing more people under the umbrella of Centre's nsurance scheme, Cancer Care for Life (CCL) we place on record our deep sense of gratitude to the residents' associations and various nongovernmental organizations.

Philanthropic activities extended by RCC based voluntary agencies like Asraya, Prathyasa continued with some innovative projects. Fruit aid project implemented through 'Care plus', an NGO in RCC, worked frowards providing fresh carrot and citrus fruits with recuperative value free of cost to pediatric patients. 'Akshayapatram' the food project envisaged for the distribution of food four times a day for all patients below poverty for this welfare service. A free drug bank was also launched during the year mainly through sponsorship.

For RCC, the report year has special significance as the observations and reports made by the Petitions Committee of Kerala Legislative Assembly in June 2007 is expected to bring far reaching effects. As pointed out by the Committee, the non-availability of land for development has been a prime problem. In order to get the Deemed to be University status, the Centre's long felt need and to achieve the status of Centre of Excellence, the Committee stressed the need for more political lobbying from Members of Parliament from Kerala with Union Ministry. The report also stressed the need for more non plan funding, strengthening manpower and improvements in other infra-structure facilities. RCC. Trivandrum, in the course of its decades of service strives hard to set up a comprehensive cancer care facility with all the modern amenities. Many things are yet to be accomplished. It is worthwhile to note that patient registration has been significantly on the increase along with the corresponding increase in the review cases. This Centre is indeed one of the few institutes in public sector where nearly 50% of the patients receive free treatment and another 21% of the middle income group get treatment at subsidised rates. Handling this situating with the available infrastructure, manpower and materials has been real challenge.

We continued to get immense support and constant encourageme from Central and State governments, Governing Body and Executive Committee, without which all these achievements would not have bee possible. In this connection, the devoted service rendered by the states well appreciated. Hope the development proposals and project submitted to Central and State governments would materialise in the near future. We are dedicated to continue the triumphant march to figure against cancer.

I am very pleased to present this annual report which contain activities of various divisions and peripheral centres of RCC for the year 2007-08.

Director during th	ne report year
Dr. 6, Rajan	

(Dr. K. Ramachandran Director-in-charge

MULTISPECIALITY CLINICS AT RCC

,	RIDETISFECIACITY OCINIOS AT NOC		
l	C] nics	Specialities	Specialized Services
A.	Hematological / Lymphoreticular malignancy & Sarcoma	Medical Oncology Radiation Oncology Surgical Oncology	High-dose chemotherapy, Peripheral Blood Stemicel Transplantation.
В.	Head & Neck	Radiation Oncology Medical Oncology Surgical Oncology	External Radiotherapy-both photon & electron, Brachytherapy-both High Dose Rate(HDR) and Low Dose Rate (LDR) Concurrent chemoradiation.
C.	Breast & Central Nervous System	Radiation Oncology Medical Oncology Surgical Oncology	Breast conservation Breast Reconstruction Adjuvent / Necadjuvent treatments Support services.
D.	Gynaec & Genitourinary	Radiation Oncology Surgical Oncology Medical Oncology	Brachytherapy - both HDR & LDR Gynaec Tumour Board & Genifourinary Tumour Board.
E.	Chest & Gastro	Raciation Oncology Surgical Oncology Medical Oncology	Bronchoscopy, Oesophagoscopy, Colonoscopy, Colosformy care, Brachytherapy for Lung, Oesophagus, Bile duct & anus Gastrotumour Board Concurrent chemoradiation.
E.	Pediatric Oncology	Pediatric Oncology Radiation Oncology Surgical Oncology	Pediatric Tumour Board Aggressive chemotherapy for high risk Acute leukemias and Non Hoogkins Lymphomas.
G.	Thyroid .	Nuclear Medicine Surgical Oncology	Thyroid Scan and uptake, Ultraschography in vitro assays, radiciodine therapy, radio nuclice therapy.

DEPARTMENTAL ACTIVITIES

RADIATION ONCOLOGY

Dr. B. Rajan	Professor & Director
Dr. P. G. Jayaprakash	Professor
Dr. S. Parameswaran	Professor
Dr. Suresh Chandra Dutt	Additional Professor
Dr. Jayaprakash Madhavan	Additional Professor
Dr. K. Ramadas	Additional Professor
	(On leave from 15-07-2007)
Dr. K. Ratheesan	Additional Professor
Dr. Francis V. James	Additional Professor
Dr. Thomas Koilparampil	Associate Professor
Dr. Beela Sarah Mathew	Associate Professor
Dr. Aswin Kumar	Assistant Professor
	(On leave from 22-08-2007)
Dr. C. D. Sivanandan	Assistant Professor
Dr. R. Rejnish Kumar	Assistant Professor
Dr. Susan Mathews	Lecturer
Dr. Sajeed A.	Lecturer
Dr. Asha Arjunan	Lecturer
Dr. Kainickal C. T.	Lecturer

Being the major division of the Centre, the Department is looking after the 4 major solid tumour clinics - B, C, D, E. The majority of patients come to this department at initial stage of their treatment. The division is empowered with 17 doctors from Lecturer to Professor level and half, a dozen Post Graduates for the patients service. Patient registration has significantly increased in the recent past, including the review cases. This has resulted in substantial increase in the workload of the staff.

As part of academic programmes of the division, the staff continued to be fully involved in post graduate teaching, training, conduct of interdisciplinary patient review meetings, participation in national and international conferences/meetings, etc. Trivandrum Breast Cancer Screening Programme, the major collaborative project of Regional Cancer Centre and International Agency for Research on Cancer, France is progressing well. The first batch of DNB, Radiotherapy students

completed their programme during the report year. The doctors of the division were actively involved in the follow-up clinics at various outreacted. Centres of RCC.

There has been significant improvement in the clinical service also. The division could acquire a digital radiotherapy simulator during the period. In order to strengthen the timely delivery of radiotherapy care, steps have been initiated for the acquisition of more radiotherapy machines with state of the art technology to update all the moder, amenities in radiotherapy.

ONGOING RESEARCH PROJECTS

- HBRA Project (Karunagappaily): Cancer occurrence in the Natura Radiation Area of Kerala (Funded by: Health Research Foundation Kyoto)
 - Principal Investigator, Dr. B. Rajan
- Estimation of tobacco attributable mortality in Kerala, India (Funder by: International Agency for Research on Cancer, France)
 Principal Investigator: Dr. K. Ramadas
- Randomised controlled trial of oral cancer screening by mouth examination in Kerala, India (Funded by: International Agency fo Research on Cancer, France)
 Principal Investigator: Dr. K. Ramadas
- Ras gene mutation and tumour response to radiation therapy (Funded by: Kerala State Council for Science, Technology and Environment, Government of Kerala)
 Principal Investigator: Dr. Jayaprakash Madhavan
- Chemoradiation in Carcinoma Cervix (JHQS) (Funded by: Eli Lilly India)
 Principal Investigator: Dr. P. G. Jayaprakash
- JHSH Plus one (Funded by: Eli Lilly)
 Principal Investigator: Dr. Jayaprakash Madhavan
- Development of a vitro cellular model to predict tumor response to Radiation Therapy. (Funded by: Kerala State Council for Sciences 15. Technology and Environment, Government of Kerala)
 Principal Investigator: Dr. P. G. Jayaprakash
- Randomised Clinical Trial to test the efficacy of Ayurvedic Mouthwash in the management of radiation induced oral mucosites. (Funded by: World Health Organisation)
 Principal Investigator: Dr. K. Ramadas

A randomized, double blind, placebo controlled phase II study of oral recombinant human lactofemin (rhLF) in combination with Carboplatin and Paclitaxel (C/P) chemotherapy in patients with locally advanced and /or metastatic non-small cell lung cancer (NSCLC). (Funded by: Reliance Clinical Research Services, Mumbai)

Principal Investigator: Dr. Jayaprakash Madhavan Tobacco Cessation Clinic. (Funded by: W. H. O) Principal Investigator: Dr. B. Rajan

Aphase II Randomised, Double Blind, Placebo Controlled, Multicentre Comparative Study of ZD1839 250mg or 500mg(IRESSA™) given either continuously or concomitantly with Cisplatin plus Radiotherapy for the treatment of patients with previously untreated unresected late stage III/IV Non-Metastatic Head and Neck Squamous Cell Carcinoma. (Funded by: Quintiles Research, India Pvt. Ltd, Bangalore)

Principal Investigator: Dr. K. Ramadas

TOCS Project Follow up Programme for Oral cancer Prevention. (Funded by: International Agency for Research on Cancer, France)

Principal Investigator, Dr. K. Ramadas

A randomized, double blind, placebo controlled phase II study of oral recombinant human lactoferrin (rhLF) monotherapy in patients with locally advanced or metastatic non-small ceil lung cancer (NSCLC) who have failed 1 or 2 line chemotherapy. (Reliance Clinical Research Services, Mumbai)

Principal Investigator: Dr. Jayaprakash Madhavan

- 4. Efficacy of Varanadi Ghritha as a Biological response modifier in controlling the recurrence of treated Head & Neck cancers a randomized pilot study. (Funded by: Kerala State Council for Science, Technology and Environment, Government of Kerala) Principal Investigator: Dr. K. Ramadas
 - A phase III randomized, stratified, parallel-group, multi-center, comparative study of ZD 1839 (IRESSA) 250 mg and 500mg versus Methotrexate for previously treated patients with squamous cell carcinoma of the head and neck. (Funded by: Siro Clinpharm Pvt. Ltd., Mumbai)
 - Principal Investigator, Dr. K. Ramadas
- Organisation of a community based cluster randomized controlled

- trial for the early detection of Breast Cancer, Thiruvananthapuram District. (Funded by: International Agency for Research on Cancer, France)
- Principal Investigator; Dr. K. Ramadas
- 17. A phase 3, Double Blind, placebo-controlled study of maintenance permetrexed plus best supportive care versus best supportive care immediately following induction treatment for advanced non-small cell Lung Cancer. (Funded by: Eli Lilly, India). Principal investigator: Dr. Jayaprakash Madhavan.
- Amulti-centric, open label, phase III clinical trial to evaluate the safety and efficacy of interlukin - 2 (Zenotech) in patients with Renal Cell Carcinoma. (Funded by: Zemotech Laboratories, Hyderabad) Principal Investigator: Dr. P. G. Jayaprakash
- 19. A randomized, Double blind, Paralfel-group, Multicentre, Phase 97. III study comparing the efficacy and Tolerability of Fulvestrant (FASLODEX™) 500 mg with Fulvestrant (FASLODEX™) 250 mg in postmenopausal women with Oestrogen Receptor positive advanced Breast Cancer progressing or relapsing after previous endocrine therapy. (Funded by: Quintiles Research, India) Principal Investigator. Dr. K. Ratheesan.
- 26. A phase 3 randomised, placebo-controlled, double-blind study of oral 28, CCI-779 administered in combination with Letrozole Vs. Letrozole alone as first line hormonal Therapy in postmenopausal women with locally advanced or metastatic Breast cancer. (Funded by: Quintiles Research, India)
 Principal Investigator: Dr. K. Ratheesan.
- Production of training materials on visual screening for oral 29, cancer. (Funded by: International Agency for Research on Cancer. France)
 - Principal Investigator: Dr. K. Ramadas
- Clinical and patho-biological effects of Curcumin on oral leukaplakia.
 (Funded by: Department of Biotechnology. Government of India)
 Principal Investigator: Dr. K. Ramadas
- INDOX Trial (Funded by: Department of Pharmacology, University of Oxford, UK)
 Principal Investigator: Dr. B. Rajan
- 24. Psycho-social problem of the spouses of patients with Breast Cancer. (Funded by: Kerala State Council for Science, Technology and Environment, Government of Kerala)

- Principal Investigator: Dr. B. Rajan
- A phase 3 randomised double blind placebo-controlled multicentric phase III study to evaluate the efficacy and safety of GW786034 compared to placebo in patients with locally advanced and for metastatic renal cell cardinoma who have progressed following cytokine based first line treatment. (Funded by: Glaxo Smithkline) Principal Investigator: Dr. Francis V. James
- An open label study to evaluate the efficacy and safety of Human recombination granulocyte colony stimulating factor developed by Biocon Limited in patients with chemotherapy induced Neutropenia (GCSF-Study) (Funded by: Clinigene International Pvt. Ltd., Bangalore)
 - Principal Investigator, Dr. Jayaprakash Madhavan
 - A randomized active control double blind double dummy parallel group multi national study to assess the efficacy, tolerability and safety of the granisetron transdermal delivery system(GTDS) in chemotherapy induced nausea and vomiting associated with the administration of moderately or high emetogenic multiday chemotherapy. (Funded by: Kendle, India)
 - Principal Investigator: Dr. R. Rejnish Kumar A randomized single blinded placebo controlled multicentre phase
 - If study of Lapatinib in combination with concurrent radiotherapy and Cisplatin versus Radiotherapy and Cisplatin alone, in subjects with Stage III and IVA, B squamous Cell Carcinoma of the Head & Neck. (Funded by: Glaxo Smithkline)
 - Principal Investigator: Dr. K. Ramadas
 - H3E-MC-JMHO Study: A randomized phase III trial of Alimta (Pemetrexod) and Carboplatin in extensive stage small cell Lung Cancer (Funded by: Eli Lilly, India).
 - Principal Investigator: Dr. Jayaprakash Madhavan
 - An open label randomized Phase II Study of two different dosing regimens of capecitabine in combination with intravenous Docetaxel (Q3W) in patients with locally advanced and for Metastatic Breast Cancer (Roche study) (Funded by: Quintiles Research, India) Principal Investigator: Dr. K. Ratheesan.
- 31. A randomised open label, multicenter, phase 3 study of Epoetin Alfa plus standard supportive care versus standard supportive care in Anemic patients with Metastatic Breast Cancer receiving first line standard Chemotherapy. (Funded by: M/s.Parexel International

- Synchron) Principal Investigator: Dr. B. Rajan
- 32. A randomized double blind multicenter study of Denosuma compared with Zoledronic Acid (Zometa) in the Treatment of Bor Metastases in Men with Hormone refractory Prostate Cance (Funded by: PPD, India)
 Principal Investigator: Dr. P. G. Jayaprakash
- District Cancer Registry: Kollam, (Funded by: NCRP-ICM; 42. Bangalore)
 Principal Investigator: Dr. B. Rajan
- Population Based Cancer Registry. (Funded by: NCRP-ICM Bangalore)

Principal Investigator, Dr. B. Rajan

- Amgen Study Denosumab; 20050136. (Funded by: PPD, India) Principal Investigator: Dr. Ratheesan K.
- Development of data management system for oncology with specireference to RCC. (Funded by: CDAC, Government of India) Principal Investigator: Dr. B. Rajan.
- 37. A phase III randomized double blind, multi-centre parallel-group study to assess the efficacy of ZD6474 (ZACTIMATM) vs. Erloting (TARVEVA) in patients with locally advanced or Metastatic Not small cell lung cancer after failure of at least one prior Cytotox Chemotherapy. (Funded by: Astra Zeneca Pharma India Ltd)
 Principal Investigator: Dr. Jayaprakash Madhavan
- 38. International randomized study to evaluate the addition of docetaxs to the combination of displatin-5-fluorouuracil (TCF) vs. displatin 5 Fluorouracil (CF) in the induction treatment of nasopharynges cardinoma (NPC) in children and adolescents EFC10339. (Funde by: Sanofi Aventis)
 Principal Investigator: Dr. R. Rejnish Kumar
- 39. A randomized, double blind, placebo-controlled multicenter phas 3 study of Denosumab on prolonging bone metastasis free survivi in Men with hormone-refractory Prostate cancer. Principal Investigator: Dr. P. G. Jayaprakash
- 40. Phase It study of vinflunine plus gemoitable vs. paclitaxel plu 47 gemoitable in patients with unresectable locally recurrent a metastatic breast cancer after prior anthracycline-based adjuval chemotherapy. (Funded by: Chiltern International Pyt. Ltd.)

Principal Investigator: Dr. Asha Arjunan

A randomized, controlled phase III trial picoplatin and best supportive care(BSC) vs. BSC alone in patients with small cell lung cancer, refractory or progressive within six months of completing first line, platinum-containing chemotherapy. (Funded by: Siro clinpharm) Principal Investigator: Dr. Jayaprakash Madhavan

A randomised, double blind placebo controlled, multicentre, phase III study of post operative adjuvant Lapatinib or placebo and concurrent chemoradiotherapy followed by maintenance Lapatanib or placebo monotherapy in high risk subjects with resected squamous cell carcinoma of Head and Neck. (Funded by: Glaxo Smithkline) Principal Investigators: Dr. Ramadas K.; Dr. R. Rejnish Kumar

A phase 3 randomised trial of chemotherapy with or without Panitumumab in patients with metastatic and or recurrent squamous cell carcinoma of the Head and Neck. (Funded by: PPD, India) Principal Investigator: Dr. R. Rejnish Kumar

A randomized double blind phase III study to compare the efficacy and safety of AZD2171 when added to 5-fluorouracil, Leucovorin and Oxaliplatin (Folfox) or capecitabine and Oxaliplatin(Xelox) with the efficacy and safety of placebo when added to Folfox or Xelox in patients with previously untreated metastatic colorectal cancer.(Funded by: Astra Zeneca Pharma India Ltd)

Principal Investigator: Dr. Jayaprakash Madhavan

A phase II. Open-label, randomized, multicenter trial Pazopanib in combination with Lapatinib compared to pazopanib monotherapy and lapatinib monotherapy in subjects with FIGO stage IVB metastatic or recurrent cervical cancer with zero or one prior chemotherapy regimen for advanced/recurrent disease. (Funded by: Glaxo Smithkline)

'Principal Investigator: Dr. P. G. Jayaprakash

- A randomized phase 3 study of Pemetrexed in combination with Cisplatin versus Cisplatin Monotherapy in patients with recurrent or metastatic Head and Neck Cancer. (Funded by: Eli Lilly, India) Principal Investigator: Dr. R. Rejnish Kumar
- A phase 2, randomized, double masked, placebo controlled study to evaluate the efficacy of SNX-1012 in reducing the duration and severity of ulcerative Oral Mucositis in patients receiving Cytotoxic chemotherapy for Breast or Lung Cancer. (Funded by: Kendle, India)

- Principal Investigator: Dr. K. Ratheesan.
- A pivotal plus phase 3 observer blind, randomized clinical trial of the efficacy and safety of APF530 compared to Aloxi for the preventing of acute onset and delayed onset chemotherapy induced nause and vomiting following the administration of either moderately highly emetogenic chemotherapy regimens. (Funded by: Neems Medical International, Asia)

Principal Investigator. Dr. Jayaprakash Madhavan

- A phase III randomized, Double blind placebo controlled study assess the efficacy and safety of 10 mg ZD4054 in combination will Docetaxel in comparison with Docetaxel in patients with Metastat Hormone resistant prostate cancer. (Funded by: ICON Clinic Research India Pvt.Ltd.) Principal Investigator: Dr. P. G. Jayaprakash
- A randomized phase II biomarker neoadjuvant study of sequents AC followed by Ixabepilone compared to sequential AC follower by paclitaxel in women with early stage breast cancer no overexpressing HER-2 or Estrogen receptors. (Funded by: Bristo Mvers Squibb India Pvt. Ltd.) Principal Investigator: Dr. B. Rajan
- An open label, prospective, multicentric study to evaluate the safety and efficacy of biomab-EGFR (Nimotuzumab) as induction and maintenance therapy in combination with radiotherapy plu Temozolomide in Indian patients with Glioblastoma multiforme (Funded by: Clinigene, Bangalore) Principal Investigator: Dr. Beela Sarah Mathew

Conferences, meetings, training attended

Dr. B. Rajan

11th Varian European users meeting. Malta, June 2007

Dr. P. G. Jayaprakash

Investigators meet (Protocol: 20050147), Mumbai. 27 - 29 April 2007

Dr. Parameswaran S

Breast Cancer Symposium Academic session, Baroda. 18 - 19 May

Dr. Parameswaran S., Dr. Jayaprakash Madhavan, Dr. Francis V. James, Dr. Beela Sarah Mathew, Dr. Kainickal CT, Dr. Asha Ariunan

28th National Conference of the Association of Radiation Oncologists India, Chennai. 29 November - 2 December 2007.



nauguration of Digital Radiotherapy Simulator by Sri. Panniyan Raveendran, Hon'ble Member of Parliament. (24 November 2007)

pr. Jayaprakash Madhavan

Conference on Lung cancer, Kozhikkode. 29 April 2007.

Dr.K. Ramadas

WHO - IARC visiting scientists award.

Expert training in cancer research, Lyon, France. From July 2007. lead and neck programme, Goa. April 2007.

nvestigators meeting, Department of Biotechnology, New Delhi. 25 28 June 2007.

investigators meeting (DBT project), Kochi, Kerala. 19 – 21 April 2007. Valional:Workshop on Oral Cancer, Kidwai Memorial Institute of manlogy & Govt, Dental College and Research Institute, Bangalore.

4, 26 May 2007.

Dr. Beela Sarah Mathew

ASCO Breast Cancer Symposium, San Francisco, United States. eptember 2007.

Conference on Evidence Based Management of Cancers in India: is Tumors, Mumbai. February 2008.

Di Susan Mathews, Dr. Kalnickal C. T.

ifference on Management of advanced breast cancer & ovarian ers: Tata Memorial Hospital, Mumbai. October 2007.

pakainickal C.T., Dr. Asha Arjunan

wer insights in the management of ovarian cancer, Chennai. 14 February 2008.

afference on 'Role of monoclonal antibodies in head & neck cancer', W.Delhi, November 2007.

Di Asha Arjunan

Miderice-Based Medicine, Mumbai. 28 February - 1 March 2008.

Braksinish Kumar R.

filternational oral cancer conference, Amsterdam, The Netherlands.

linical Trial Investigators Meet, Australia. 19 - 22 July 2007.

SURGICAL ONCOLOGY

Dr. Paul Sebastian	Professor & Head
Dr. Jem Prabhakar	Additional Professor
Dr. Shaji Thomas	Associate Professor
Dr. Bipin T. Varghese	Associate Professor
Dr. Paul Augustine	Associate Professor
Dr. Chandramohan K,	Associate Professor
Dr. Elizabeth Mathew lype	Assistant Professor
Dr. Balagopal P.G.	Assistant Professor
Dr. Rema P.	Assistant Professor
Dr. Kurian Cherian	Assistant Professor
Dr. Madhu Muralee	Lecturer
Dr. Arun Peter Mathew	Lecturer
Dr. Suchetha S.	Lecturer

During the reporting year, 4826 surgeries (3922 major and 904 mine Academic activities surgeries) and 1646 endoscopic procedures were carried out in the Academic programmes include division. Minimal access surgeries and uro-oncology service were als initiated

Table 1: Major procedures

Site	Number	%
Head & Neck	1027	33.9
Breast	1008	33.29
Gynecological	281	9.2
Thorax & abdominal	252	8.32
Bone & soft tissue	105	3.47
Genitourinary	83	2,74
Skin tumors & miscellaneous	272	8.99
Total	3028	

Table 2: Minor procedures

Procedure	Number	%
Minor surgeries	773	85.50
Cystoscopy	80	8.85
Cryosurgery	2	0.22
Colposcopy	22	2.43

I SEP	. 27	2.99
Total	904	

Table 3: Endoscopic procedures

Procedure	Number	%	
Nasopharyngoscopy	824	50.06	
Bronchoscopy	151	9.17	٦
Oesophagogastroduodenoscopy	462	28.06	٦.
Esophageal stenting	12	0.73	
Colonoscopy	297	18.04	٦
Total	1646		٦,

DNB programme in Surgical Oncology with an annual intake of 2 candidates

Fellowship programme in Head & Neck Oncology (2 year) with an annual intake of 1 candidate

Training in Surgical Oncology for post graduate trainees of General surgery, Otolaryngology, Obstetrics & Gynecology, Oral and maxillofacial Surgery and Plastic Surgery from Medical and Dental Colleges in Kerala, Tamil Nadu and Karnataka.

We conducted seminars and site specific tumor boards on a weekly basis and monthly morbidity & mortality meetings. The faculty also participated actively in all the academic programmes of the institution.

Ongoing Research Projects

- Molecular ecology, molecular genetics and natural history of anterior tongue cancer in young adults without (or insignificant) tobacco exposure: can a distinct clinical entity be defined? (Funded by: Department of Biotechhology, Government of India).
 - Principal Investigator: Dr. Paul Sebastian
- Prospective identification and clinical significance of tumor progenitor cells in oral and breast cancer. (Funded by: Department of Biotechnology, Government of India).

Principal Investigator: Dr. Jem Prabhakar

Molecular analysis of surgical margins in oral cancer. (Fund by: Kerala State Council for Science, Technology a Environment).

Principal Investigator: Dr. Paul Sebastian

- Differential gene expression on tumor tissue at different stages menstrual cycle, (Funded by: Kerala State Council for Scient Technology and Environment). Principal Investigator: Dr. Jem Prabhakar
- Development of a strategy for comprehensive post laryngeator rehabilitation: A Kerala perspective, (Funded by: Kerala St Council for Science, Technology and Environment). Principal Investigator: Dr. Bipin T. Varghese
- Pattern of care and survival studies on cancers of head a neck, (Funded by: Indian Council for Medical Science a Technology). Principal Investigator; Dr. Paul Sebastian
- Organisation of a community based cluster randomized control trial for the early detection of Breast Cancer, Thiruvananthapura District, (Funded by: International Agency for Research on Cand France).

Co-investigators: Dr. Pauf Sebastian, Dr. Jem Prabhakar, Dr. Pa Augustine

- TOCS Project Follow up Programme for Oral cancer Preventie (Funded by: International Agency for Research ол Cance France). Co-investigator Dr. Paul Sebastian
- Validation of p16 expression as a marker for oncogenic Hi infection in uterine cervix. (Funded by: Kerala State Council Science, Technology and Environment). Co-investigator, Dr. Rema P.
- A randomized single blinded placebo controlled multicentre phase Il study of Lapatinib in combination with concurrent radiotheral and Cisplatin versus Radiotherapy and Cisplatin alone, in subject with Stage III and IVA, 8 Squamous Cell Carcinoma of the Hea & Neck. (Funded by: Glaxo Smithkline). Co-investigator: Dr. Paul Sebastian

on proliferation and tolerability of Fulvestrant (FASLODEX) 500 ma with Fulvestrant 250 mg when given as neoadjuvent treatment in postmenopausal women with ER positive breast cancer. (Funded by: Quintiles Research India Ltd.).

Co-investigator: Dr. Jem Prabhakar

Speech outcome after treatment of T1 and T2 cancers of the tongue: comparison between different treatment methods used: a multi centric study.

Principal Investigator: Dr. Paul Sebastlan

Randomized controlled study on morbidity in SOHND and methods to reduce it.

Principal Investigator: Dr. Paul Sebastian

Assessment of tissue shrinkage in oral cancers after fixation. Principal Investigator: Dr. Paul Sebastian

Evaluation of Aesthetic Outcomes in breast conservation surgery following large volume resection.

Principal Investigator: Dr. Jem Prabhakar

Assessment of risk factors for seroma after surgery for breast cancer surgery- a prospective study.

Principal Investigator: Dr. Jem Prabhakar

A randomized controlled trial comparing encoplastic closure of partial breast defects by mastopexy and conventional breast conserving surgery with non-closure of the lumpectomy cavity and its impact on early and late breast cosmesis and morbidity. Principal Investigator: Dr. Jem Prabhakar

Perioxisomal proliferator -activated receptor y, a tumor promoter for tumor inhibitor: Investigation of new perspectives in breast

cancer. Co-investigator: Dr. Jem Prabhakar

Elucidation of the role of EphB4 in the writ pathway by RNA interference and its significance in colon cancer. Co-investigator: Dr. Jem Prabhakar

Protocol No.VB4-845 01 III; a-Proxinium Study. (Funded by: PPD,

Co-Investigator: Dr. Shaji Thomas

Prospective randomized study comparing the efficacy of watch Random open label multicenter phase If study comparing the effection with neck dissection in clinical superficial tongue

27

- squamous cell cancers with N0 status. Principal Investigator: Dr. Bipin T. Varghese
- Salivary neoplasms: therapeutic and functional outcom retrospective study Principal Investigator, Dr. Bipin T. Varghese
- Selected molecular markers as indicators of clinical profile, tun characteristics and treatment outcome in squamous cell carcinor of larvnx. Principal Investigator: Dr. Elizabeth Mathew lype
- Prospective study to assess the requirement of hemithyroidector in laryngectomy and laryngopharyngectomy. Principal Investigator: Dr. Elizabeth Mathew lype
- 25. Brain Tumor Registry project. Principal Investigator, Dr. Balagopal P. G.
- Prospective study on the anatomical variations of margin mandibular nerve. Principal Investigator: Dr. Balagopal P. G.
- 27. Study on the adequacy of information provided to head and new tipying cancer'. patients undergoing surgery. Principal Investigator: Dr. Balagopal P. G.
- 28. Prospective study on facial node involvement in head and necessary facilities. Prospective study on facial node involvement in head and necessary facilities. Success for the prospective study on facial node involvement in head and necessary facilities. cancers. Principal Investigator: Dr. Madhu Muralee
- Prospective study on the role of nasogastric tube in lower GI and pelvic surgeries. Principal Investigator: Dr. Madhu Muralee

Marits, conferences/meetings/trainings attended, papers presented talks delivered

Dr. Paul Sebastian

Asian National Cancer Center's Alliance Meeting, Singapore. November 2007.

Department of Biotechnology meeting, New Delhi, July 2007. INDOX Annual Meeting, Thiruvananthapuram, February 2008.

gaui Sebastlan, Dr. Shaji Thomas, Dr. Bipin T. Varghese

ctional course in plastic surgery organized by the Association plastic Surgeons of India (Kerala chapter), Thiruvananthapuram. ğ _{August} 2007.

ad talk: Paul Sebastian. 'Current concepts in the management of neck cancers'

homas. 'Effect of radiotherapy on wound healing' Warghese. Indications, goals, options, tissue requirements and d of choice in laryngopharyngeal reconstruction.

parpaili Sebastian, Dr. Madhu Muraice

conference of Indian Association of Surgical Oncology, Ludhiana. her 2007.

pe Baul Sebastian, Dr. Arun Peter Mathew

CME programme of Association of Surgeons of India, Kochi.

និង្ខិតខ្មែរព្រះ 2007. ព្រះស្រើវូឌីlk: Paul Sebastian. 'Issues in the management of differentiated

mina Breast Cancer Initiative, Artemis Health Institute, New Delhi. (ahuaiy 2008. (as faculty).

International conference on colo-rectal cancer, New Delhi. March

Dr. Prabhakar, Dr. K. Chandramohan, Dr. Madhu Muralee, Dr. Arun

Conference of the Association of Surgical Gastroenterologists of Kerala (ASIGN), Cochin. January 2008.

hwitedtalk: Jem Prabhakar. 'Gl Lymphomas'.

Dr. Jam Prabhakar, Dr. Madhu Muralee, Dr. Arun Peter Mathew Addition of Surgeons of India (Kerala shepien, Thiruvalla, Kerala. February 2008.

🚉 Stiaji Thomas, Dr. Bipin T. Varghese, Dr. Madhu Muralee

CME on locally advanced head & neck cancers at Amrita Institute of Medical Sciences, Kochi, January 2008.

himkelkalk: Shaji Thomas. 'Surgical management of locally advanced,

potentially curable head and neck cancers'

Invited panelist: Bipin T, Varghese, Discussion on 'swallowing & specific Cornell Medical College, New York, June – July 2007. issues in head & neck cancers'

Dr. Shail Thomas

Investigators meet on Evaluation of the efficiency and safety of Proxinit in patients with recurrent squamous cell carcinoma of head & neck', Ne south Zone annual ENT conference, Thiruvananthapuram. 5-7 October Delhi, February 2008.

CME on oral cancer, Regional Cancer Centre, Thiruvananthapural vit National conference of Foundation for head & neck oncology. November 2007

Invited talk: 'Management of head & neck cancer: surgic perspective".

CME on 'End of life issues in palliative care', Thiruvananthapura National conference of the Neurological Society of India, Agra. December January 2008.

Dr. Bipin T. Varghose

1st conference of the International Academy of Oral Oncology, Amsterdar Saper presented: 'Sinonasal Terato-carcino-sarcoma: a case report'. The Netherlands, May 2007.

Paper presented: 'The submental artery island flap in oral cand Alappuzha April 2007. reconstruction"

Training in Laser, Microvascular surgery & molecular epidemiolog himvananthapuram, September 2007. Texas, United States, March - June 2007,

Dr. K. Chandramohan

UICC - ICRETT fellowship for training in hepatic surgery, National Cand Madural, Tamil Nadu. November 2007.

Centre, Singapore. 11 June - 10 July 2007.

INDOX Phase I clinical trial training, Oxford, UK. 17 - 21 September 2007.

Dr. K. Chandramohan, Dr. Madhu Muralee, Dr. Arun Peter Mathe October 2007. (as faculty)

Annual state conference of the Association of Surgeons of India (Kera Annual conference of the Ali Kerala Congress of Obstetrics and chapter), Thiruvananthapuram, 27 - 29 April 2007.

Paper presented:

Dr. K. Chandramohan. 'Thoraco-laparoscopic versus open surgery carcinoma esophagus'.

Poster presented: Dr. K. Chandramohan. Laparoscopic stemach pull u for postcricoid carcinoma'.

ør. Elizabeth Mathew lype

Mammadi - Soudaver fellowship for training in Basic Science Research,

fraveling Club Programme on head & neck oncology, Memorial Sloan kettering Cancer Center, New York, June 2007.

ME on Current treatment options in cancer of larynx & hypopharynx, rata Memorial Hospital, Mumbai. January 2008.

Mangalore, Karnataka, November 2007.

er. Balagopal P. G.

Neurological Society of India (Kerala chapter) meeting. Kolencherry. November 2007.

Neurological Society of India (Kerala chapter - South zone) meeting,

international conference on cerebro-vascular disorders,

Dr. Rema P.

AGOICON 2007, Meenakshi Mission Hospital and Research Centre.

Paper presented:

Role of secondary cytoreductive surgeries in the treatment of recurrent ovarian cancers'...

Workshop on colposcopy & treatment of CIN, PVS Hospital, Kochi.

@ynaecology, Alappuzha. 11 February 2007.

invited talk; 'Border line ovarian tumours'.

Dr. Rema P., Dr. Suchetha S.

🖓 International Conference on Cervical Cancer (RGCON 2007), Rajiv Gandhi Cancer Institute and Research Centre, New Delhi. April 2007.

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Poster presented: 'Effectiveness and safety of LEEP in treatment of C beginners experience'

Dr. Madhu Muralee, Dr. Azun Peter Mathew

Hepato-biliary conference, Lakeshore Hospital, Kochi. March 2008.

Dr. Kurian Cherian

Gastrointestinal laparoscopy conference, V.G Hospital, Coimbato May 2007.

Dr. Arun Peter Mathew

Conference on 'Management of advanced breast cancer & ovari cancers'. Tata Memoriai Hospital, Mumbai. October 2007.

MEDICAL ONCOLOGY

Dr. Geetha N.

Additional Professor & Head Associate Professor in

Dr. Sreejith G. Nair

Hematology & Blood Transfusion

Dr. Mirsa Hussain Dr. N. P. Prakash Dr. Şanthosh Thyagu

Assistant Professor Assistant Professor Assistant Professor

Dr.Lali V. S.

Resident Medical Officer

illnical activities

he Department of Medical Oncology is responsible for the diagnosis ndifinanagement of haematological and lymphoreticular malignancies. argomas and other solid tumors where intensive chemotherapy is idicated. It conducts outpatient clinics 6 days a week. About 1500 new ses were treated during 2007. The number of outpatient attendance Sabout 24000.

pedal procedures like bone marrow aspiration & biopsy, liver biopsy, frathecal chemotherapy and central venous catheter insertions were one daily. About 2500 patients were admitted for administration of fight profile chemotherapy and management of emergencies and Briblications. Critically ill patients were closely monitored and managed mithe CU. About 150 patients with CML were enrolled in the GIPAP. rooramme last year and are getting free Imatinib.

The new 4 bedded Bone marrow transplant started functioning in October

Autologous bone marrow transplantation following High dose chemotherapy for multiple myeloma was performed in 12 patients last

Academic activities

DNB programme started in Medical Oncology and the candidate is undergoing training. Post graduate residents in general medicine and rădiation oncology were given training in medical oncology. In addition, staffnurses were given training in patient care.

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Ongoing Research Projects

- Randomized, Controlled, Open-labeled, Multicentre, Compariso of Thalidomide versus High dose Dexamethasone for the treatme of Relapsed, Refractory Multiple Myeloma. (Funded by: Relian, Clinical Research services)
 - Principal Investigator: Dr. Sreejith G. Nair
- Efficacy and safety of XM01 compared to placebo and Epoel beta in patients with solid tumours receiving platinum-containing chemotherapy. A multinational, multicentre, randomized, placet and active controlled, double blind, parallel- group Phase III stud (XM01-21, XM01-22, XM01-23). (Funded by: Lambda Therapeur Research)
 - Principal Investigator: Dr. Geetha N.
- Protocol PIX 301: Pixantrone Vs. other chemotherapeutic agen for third line single agent treatment of patients with relapse aggressive non-hodgkins lymphoma. (Funded by: Quintile Research, India)
 - Principal Investigator: Dr. Geetha N.
- FM-CL 1 A phase I/IIa, Open label, dose –Escalation students to determine the safety, tolerance and preliminary activity intravenous high dose Flunhenazine HCL in patients with Advance Multiple Myeloma.
 - Principal Investigator: Dr. Geetha N.
- LYM-3001: A Randomized, Open-Label, Multicenter Study v VELCADE with Rituximab or Rituximab alone in Subjects wir Relapsed or Refractory, Rituximab Naive or Sensitive Follicula B-cell Non-Hodgkin's Lymphoma. (Funded by: Johnson)
 - Principal Investigator: Dr. Sreejith G. Nair
- Molecular Remission with Arsenic Trioxide in Acute Promyelocyti Leukaemia: Indian APML Study Group – IASG
- LYM-3002: A Randomized, Open Label, Multicentre Phase I Study of the Combination of Rituximab, C yclophosphamide, D xorubicin, VELCADE and Prednisone (VcR-CAP) or Rituximat Cyclophosphamide, Doxorubicin, Vincristine and Prednison (R-CHOP) in Patients.
- An open label, randomized, multicenter phase III trial of Dasatina





On the occasion of the inauguration of Bone Marrow Transplant Unit (6 October 2007)

(sprycel) vs. standard dose imatinib (400mg) in the treatment of subjects with newly diagnosed chronic phase Philadelphia chromosome positive chronic Myeloid Leukemia. (Funded by: Bristol-Myers Squibb India Pvt. Ltd.)

Principal Investigator: Dr. Geetha N.

Aphase II open label, randomized, Multicenter trial of GW786034 (Pazopanib) in combination with GW572016(Lepatinib) compared to Lepatinib alone a first line therapy in subjects with advanced or Metastatic Breast cancer with ErbB2 Fluorescence in situ Hybridisation (FISH) positive tumours. (Funded by: Glaxo Smithkline)

Principal Investigator: Dr. Santhosh Thyagu

Protocol SGL 2003: Phase II study of Z10-101 in advanced Blood and bone marrow cancers. (Funded by: Pharmaceuticals Research Association , India)

Principal Investigator: Dr. Santhosh Thyagu

Merica/Training attended Traceatha N.

aiding in Bone marrow transplant, Fred Hutchinson Cancer Centre,

proceetha N., Or, Prakash N. P.

of Annual meeting of the American Society of Hematology, Atlanta, Intel® States. 8 - 11 December 2007.

Dr Sreelith G. Nair

arriner, DM (Medical Oncology), Chennai. 2007.

Prakash N. P.

ining in Bone Marrow Transplantation, Christian Medical College,

PAEDIATRIC ONCOLOGY

Dr. P. Kusuma Kumary Additional Professor

Dr. Priya Kumari T.

Associate Professor

Dr. Anu Ninan

Lecturer

This division continued to work for the primary care of pediatric patie up to the age of 14 years registered in this centre.

Clinical Activities

Pediatric Oncology outpatient service functions six days a week. distribution pattern of Pediatric patients registered during the report year is given below.

Table 4: Distribution of pediatric patients registered

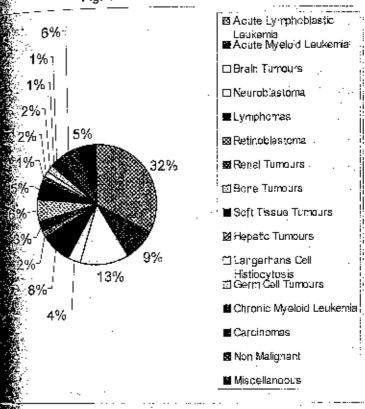
Case Diagnosis Number Percentage		
Number	Percentage	
180	32.6	
48	8.7	
5	0.9	
70	12.7	
45	8.1	
30	5.4	
21	3.8	
16	2.9	
32	5.8	
10	1.8	
11	1.9	
5	0.9	
	1.8	
8	1.4	
34	6.1	
 +	4.7	
		
	48 5 70 45 30 21 16 32 10 11 5	

Total outpatient visits

18539

Total number of inpatients 1056

Fig: 1: Distribution of Patients



As in Reprevious years, the most common malignancy reported was Acute Whiphoblastic leukaemias (32.6%).

All medigationts underwent detailed diagnostic workup and appropriate inerument were given,

Redailed Limour board with a multidisciplinary team consisting of Pediatric www.gists, Radiation oncologists, Pediatric Surgeons and Pathologists Was conducted every Monday at 2pm and major management decisions Were teken by this team.

We split ucted counseling sessions for parents of pediatric cancer periodic every day. Detailed counseling sessions were given every

Academic and Research activities

This division actively participated in the teaching and training programs of post graduates of Pediatrics and Radiotherapy, undergraduate media students, M.Sc. nursing students and B.Sc. nursing students.

Cultural Activities

We organized celebrations on Vishu, Onam, Deepavali and Christma New clothes were distributed to the children on festivals like Ona and Christmas. Sweets and toys were also distributed on various occasions.

Conferences attended

Dr. P. Kusumakumari, Dr. T. Priya Kumari

39th Annual Congress of the International Society of Pediatric Oncolo; (SIOP 2007), Mumbai. 1 – 3 November 2007.

Dr. P. Kusumakumari

Task force meeting on retinoblastoma, New Delhi. 9 April 2007.

Indian Academy of Pediatrics (IAP) National consenses on Hodgkir Lymphoma, Mumbai. 11 – 12 August 2007.

Indian Academy of Pediatrics (IAP) National consenses on Non-Hodgkir.

Lymphoma, Mumbai. 30 June – 1 July 2007.

Dr. T. Priya Kumari

14th European Cancer Conference (ECCO 14), Barcelona, Spain. 2 – 27 September 2007.



PATHOLOGY

Professor & Head Dr. Elizabeth K. Abraham Additional Professor Dr. Jayasree K. Additional Professor Dr. Rekha A. Nair Additional Professor Dr. Anitha Mathews Dr. Thara Somanathan Associate Professor Associate Professor Dr. Nileena Nayak Dr. K. Raveendran Pillai Associate Professor of Cancer research in Cytopathology Dr. T.R. Preethi Assistant Professor Assistant Professor of Dr. K. Sujathan Cytotechnology Sr.Cytotechnologist Mrs. V.S. Veena Cytotechnologist

rievements

Mr. K.S. Mani

Mr. K.S. Jayalal

Standardisation of FISH (Fluorescent In Situ Hybridisation) was done for detection of HER-2/neu amplification in Breast cancer, and BCR/ABL in Chronic Myeloid Leukemia.

Cytotechnologist

Introduced HPV (Human Papilloma Virus) detection by PCR method, as routine Molecular diagnostic test in Cervical scrape smears.

Conducted academic programmes with the following international faculties.

Dr. Jan W. Lowe, Specialist Breast Pathologist from University ital of North Tees, UK, spent one month during October – November ie Department. He had conducted weekly slide discussions and slide ninar on Breast Pathology.

Fredrick Bosman, Gastro Intestinal Pathologist from Lucerne, itzerland visited the Department and gave slide seminar and slide discussion on 'Inflammatory Pathology of Gastrointestinal Tract'.

I. DIAGNOSTIC SERVICES :: Work done at a glance

During the report year, a total of 30451 pathology reports were general and these include 11342 Surgical pathology, 13346 Cytopathology. 5763 Haematopathology reports. Among them 10267 were malign reports, (Table 5 & Fig. 2). Total number of Immuno histochemical staining done were 7612 numbers. Special/advanced tests like Frozen section (cases) and Molecular biology (28 tests) were also done (Table 6)

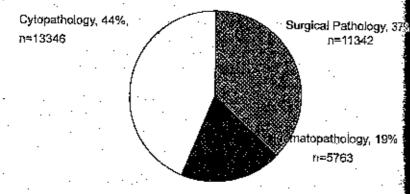
Table 5: Work done

	-w · · · · · · · · · · · · · · · · · ·			
<u> </u>	Surgical pathology	Haemato- pathology	Cytopa- thology	Tot
No. of reports	11342	5763	13346	304
Malignant	7017	979	2271	102

Table 6 : Special / Advanced tests

Immunohis- tochemical staining	Molecular tests	Frozen section diag.
7612	28	190

Fig. 2 : Total work done (n = 30451)

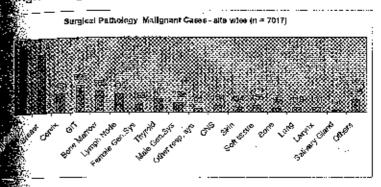


SURGICAL PATHOLOGY

Histopathological specimen of 11342 cases were processed during year under report, of which 7463 cases were surgical specimens of

and 3879 were review cases referred from other hospitals. Amono fallgnancy was reported in 7017 cases. The predominant sites of ancy were Oral cavity, Breast, GIT and Lymph nodes (Fig 3). The ad indicated includes 690 cases of second opinion (non registered) seriom out side Institutions / Hospitals also.

Eig.3 : Surgical Pathology : Malignant Cases (site wise)



hamenohistochemical (IHC) staining.

reasoning was done in cases, where there was diagnostic difficulty by gottine stains. Immunophenotyping was carried out on almost all Immunohistochemical tests were ed in the current year, among which 2511 tests were for assessing strogen & Progesterone receptor status and 537 for Her2neu marker ion in Breast cancer patients. Rest of the Immuno markers (4564) weigedone for proper classification of undifferentiated tumors.

Firezen section reporting:

Routilite reporting of frozen sections is being done in the operation theatre settliggA total number of 190 cases were reported, based on which major sumilsal decisions were taken.

TENEY OPATHOLOGY

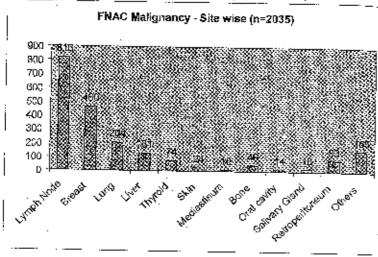
ine main samples examined for cytological abnormalities include, Fine mesde aspirations, Cervical smears, Body fluids and Sputum.

Sime Needle Aspiration Cytology

say line needle aspirations were performed and the major sites of aspiration were lymph node (1397), breast (1157) and thyroid(1072). Out

of this 2035 were malignant lesions. Among the malignancies, major were from lymph nodes (816) of which 226 were metastatic tumor Total number and split up of malignancies at various sites are depict in Fig. 4.

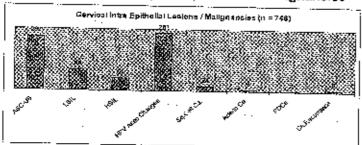
Fig.4 : FNAC Malignancy (Site wise)



Cervical Smear

6.132 Cervical Smears were examined in the reporting year among what 4599 cases were from different projects. Out of this, 746 were have epithelial lesions / malignancy (Fig.5) and 5386 were negative for it epithelial lesions. Second opinion on cervical smears were also give the smears referred from Peripheral centres (ECDCs).

Fig. 5 : Cervical intra Epithelial Lesions / Malignancies

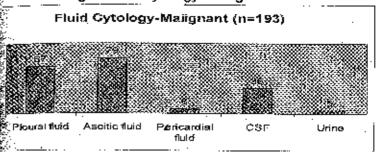


Sells: Atypical Squamous Cells of Undetermined Significance Significance Squamous Intra epithelial Lesion High grade Squamous Intra epithelial Lesion

Cotology

of 2389 effusions and other body fluid samples were processed reported year, which include 1109 samples of Cerebrospinal Fluid 419 ascitic fluid, 809 pleural fluid, 28 urine and 24 pericardial Among these, 193 samples were reported to have malignant cells.

Fig.6 : Fluid Cytology - Malignant



<u>utum</u> Cytology

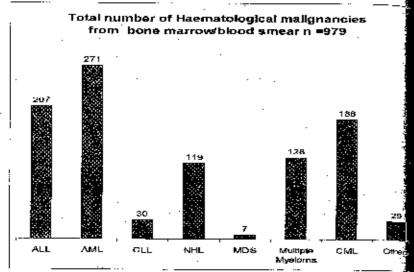
itimisamples from 1338 patients were studied. 3-5 morning samples were followed from each patient on consecutive days and 2 smears were pared from each sample. 181 malignancies were reported. These in 50 Non-small ceil carcinomas (Adenocarcinoma-25, Squamous principals) and 9 Small cell carcinomas.

EMATOPATHOLOGY

Haematopathological cases were studied during this year. These 3195 Bone marrow samples, 2428 Peripheral blood smears and Haematology slide reviews. 979 cases of malignancy were reported policide 159 cases of Precursor B cell lymphoblastic leukemia (B-48 cases of Precursor T cell lymphoblastic leukemia, 271 cases of provided leukemia (AML), 188 cases of Chronic Myeloid Leukemia (30 cases of Chronic Lymphatic Leukemia (CLL), 119 cases of Non-Miris Lymphoma (NHL), and 128 cases of Multiple Myeloma (MM)

cases.(Fig.7) In addition to special stains, Immunophenotyping was do in 124 cases of Acute leukemias

Fig. 7: Haematological malignancies from bone marrow blood smear



D. MOLECULAR PATHOLOGY

PCR based HPV DNA test was standardized and this service has be extended to patients registered in the Early Cancer Detection Clinic in November 2007 onwards. Cervical scrape smears obtained from work attending the early cancer detection clinics of the Community Oncolor division were referred for HPV analysis. 28 samples were processed during this two months period of which 5 samples were found to be positively oncogenic HPV.

II. TEACHING / TRAINING PROGRAMMES

Regular Courses undertaken.	Course
	Duration
DNB Course in Pathology	3 years
Postdoctoral Certificate Course in	•
Oncopathology for Pathologists	1 year
3. Cytotechnologists Training Course	1 year

Troitechnicians Training Course Manced Training Course in Sotechnology for Mancechnicians

6 months

9 months

term training programmes for B.Sc. (MLT) students

Cal orientation was given to 138 B.Sc MLT students of MG University, after one month each in the Department in batches.

Rathology students

postings were given to MD Pathology students of Kottayam, Alleppey and Trivandrum Medical Colleges.

MD Radiotherapy, DNB Surgical and Medical Oncology

Regislar postings were given, to MD and DNB students of Radiotherapy RCC and Medical college, and DNB students of Medical Oncology and Stripical Oncology.

is of echnology/Immunohistochemistry Training

nts on training on Histotechnology and Immunohistochemistry were

Ongeing Research Projects

FIST grant for development of infrastructure. (Funded by: Department of Science and Technology, Government of India) Principal Investigator: Dr. Rekha A. Nair

Adjuvant Tamoxifen in Breast cancer Long against shorter. (ATLAS).
Funded by: Clinical Services Unit, Oxford, UK)

Co-investigator: Dr. Elizabeth K. Abraham

Multicentric project on evaluation & validation of Molecular markers in Oral cancer. (Funded by: Department of Biotechnology, Govt. of India)

Co-investigator: Dr. Elizabeth K. Abraham

Micro RNA Profiling in Leukemias and Lymphomas, (Funded by: Department of Biotechnology, Government of India)

Principal Investigator: Dr. Rekha A. Nair

Micro RNA Profiting of cancer breast and Colon. (Funded by: Department of Biotechnology)

Principal Investigator: Dr. Rekha A. Nair

- Co-investigator: Dr. Jayasree K.
- TOCS Project Follow up Programme for Oral cancer Prevent 6. (Funded by: International Agency for Research on Can France)

Co-investigators: Dr. Elizabeth K. Abraham, Dr. Th Somanathan

- Organisation of a community based cluster randomized control trial for the early detection of Breast Cancer, Thiruvananthapus District. (Funded by: International Agency for Research on Can France)
 - Co-investigators: Dr. Elizabeth K. Abraham, Dr. Th Somanathan
- Study of Galectin-1, Galetin-3, T Antigen and B CI-2 Expresion Breast Cancer (Funded by: Kerala State Council for Science, Technology Environment, Government of Kerala) Principal Investigator: Dr. Sujathan K.
- Tumour suppressor genes in Nasopharyngeal carcino an evaluation. (Funded by: Kerala State Council for Scien Technology and Environment, Government of Kerala) Principal Investigator: Dr. Jayasree K.
- Pattern of care and survival studies on cancers of cervix, female breast and head and neck. (Funded by: Indian Council of Media Research, New Delhi). Co-investigator: Dr. Jayasree K.
- Assessment of the role of Tyrosine kinase EphB4 in the wnt patho by RNA interference and its significance in colon cancer; toward novel cancer therapeutics. (Collaborative study with Centre cellular and molecular biology, CCMB) Co-investigator: Dr. Jayasree K.
- Molecular markers as indicators of clinical profile, tumos characteristics and treatment outcome in squamous cell carcing of the larvnx. Co-investigator: Dr. Jayasree K.
- Human Papilloma Virus associated cancers in Natural Background Radiation area of Kerala: Evaluation of HPV genotypes in relation radiation exposure levels. (Funded by: Department of Epidemiology

and Preventive medicine. Kagoshima University, Japan) Ço-investigator: Dr. Jayasree K.

evaluation of early detection of cervical cancer precursors by Visual rspection with Lugol's lodine (VILI), Visual Inspection with Acetic acid (VIA) and magnified VIA (VIAM) in Kerala, India. (Funded by: MRC and Bill Gata Foundation through ACCP)

Co-investigator: Dr. Thara Somanathan

Study of ZD1839 250mg or 500mg (IRESSATM) given either continuously or concomitantly with Cisplatin plus Radiotherapy for the treatment of patients with previously untreated unresected ate stage III/IV Non-Metastatic Head and Neck Squamous Cell Sarcinoma. (Funded by: Quintiles Research (India) Pvt. Ltd. gangalore)

ico-investigator: Dr. Nilsena Navak

phase III randomized, stratified, parallel-group, multi-center, comparative study of ZD 1839 (IRESSA) 250 mg and 500mg versus Methotrexate for previously treated patients with squamous cell garcinoma of the head and neck. (Funded by: Siro Clinpharm Pvt. Lid., Mumbai)

Co-investigator: Dr. Nileena Navak

Shiruvananthapuram Corporation Cancer Control Programme. Funded by: Thiruvananthapuram Corporation).

Co-investigator: Dr. Sujathan K.

District Cancer Control Programme, Thiruvananthapuram (Funded by: NCCP Government of India). Co-investigator, Dr. Sujathan K.

Merits. Conferences/meetings/training attended

Dr. Elizabeth K. Abraham

REGuide, University of Kerala, Thiruvananthapuram.

Reviewer, Indian Journal of Medical Research, ICMR

্রার্ট্রাট্রলেরতা, Indian Association of Pathologists & Microbiologists (Thirtyvananthapuram city br.)

ellowship for HER 2 Status in Breast Cancer at National Cancer Centre, ingapore. April 2007.

D) Jayasree K.

aning in Fluorescent In Situ Hybridization (FISH) and molecular Pathology firiques, Mayo Medical Laboratories, United States, September 2007

Practical Surgical Pathology CME Programme, Mayo Clinic, Roches Minnesota, United States. 13 – 15 September 2007.

Training in newer cytology techniques, FISH in cytology, MD Anders Cancer Center, Houston, Texas, United States, August 2007.

Dr. Jayasree K., Dr. Preethi T.R.

Prof. S. J. Nagalotimath Memorial 13th International CME in Pathologiange January 2008.

Dr. Jayaszee K., Dr.Anitha Mathews, Dr. Nileena Nayak, Dr. Preef T.R.

5th National CME in Pathology, Kozhikkode. 11-13 August 2007.

Dr. Rekha A. Nair, Dr. Nileena Navak

National meeting on guidelines for immunophenotyping of hemal lymphoid neoplasms and workshop on detection of MRD and analysis flow cytometric data. Tata Memorial Hospital, Mumbai. 13 – 15 Marg 2008.

Dr. Anitha Mathews

Observer trainee, Department of Neuropathology, National Institute Mental Health and Neurosciences (NIMHANS), Bangalore, May 2007.

Dr. Thara Somanathan

National Workshop on Oral Cancer, Kidwai Memorial Institute of Oncology & Govt. Dental College and Research Institute, Bangalore 2-26 May 2007. (as faculty)

Training course on early detection, prevention, and treatment of cervical pre-cancers, Ambilikkai, Tamil Nadu. November 2007.

Dr. Preethl T. R.

60th IAPM Kerala chapter meeting, Kozhikkode. August 2007. 61st IAPM Kerala Chapter meeting, Thrissur. February 2008.

Dr. Sujathan K.

Workshop and residential course on molecular diagnostics in Oncopatholog Tata Memorial Hospital, Mumbai, 12 - 18 October 2007.

27° Annual convention of the Indian Association for Cancer Research (IACR), The Gujarat Cancer & Research Institute, Ahmedabad, Gujarat 7 – 9 February 2008.

IMAGEOLOGY

Dr. K. Ramachandran	Professor & Head
pr. A.S. Krishnakumar	Additional Professor
Dr. M.Venugopal	Assistant Professor
pr. Jiji V.	Assistant Professor
Dr. Sumod Mathew Koshy	Lecturer

Diagnostic and interventional studies done during the period under report are as follows.

Table 7: Investigations done

Plain X-rays	20773
Special investigations using X-rays	14.3
Barium Meal	24
Barrum Swallow	180
Barium enema	13
Mammogram single	1689
Marnmogram Double	2082
CT Scan	10149
:CT & guided procedures	324
Ultrasound	10300
Doppler studies	188
USS guided FNAC	298

Academic Activities:

The functioning of our new 1.5 Tesla MRI unit with spectroscopy was the flighlight of this year's activity. The DNB programme in Radiodiagnosis has been in full swing. Two more candidates joined this year. Training and short term postings in various imaging modalities were provided to Radiologists and post graduates from various parts of Kerala. In addition to the daily Tumour Boards, the Division actively participated in monthly meetings of Trivandrum Radiology Club, Pulmonary Radiology Club in SUT and other centers.

BREAST MRI

Magnetic resonance imaging (MRI) of the breast has advanced rapidly since its introduction in the mid-1980s in the past 5 years, there has been widespread adoption of this technology in part due to a number of significant multicenter trials showing the efficacy of MRI compared with mammography and ultrasound. The underlying reason behind the rapid acceptance of breast MRI is the superior sensitivity of MRI for detection of breast cancer compared with mammography and ultrasound. Current efforts are directed toward improving the specificity of MRI to prevent unnecessary biopsy and to tailor treatment regimens that are consistent with tumor response. DCE-MRI is frequently performed in an attempt to improve the specificity of MRI in characterizing breast lesions.

The Regional Cancer Centre in Trivandrum handles many cases referred from peripheral hospitals for breast imaging. This includes referrals for mammography, ultrasound and MR mammography and image guided biopsy procedures. The Centre has a dedicated breast unit for work upof all cases and for treatment. We perform about 50 cases of breast MRI every month mainly as a problem solving modality.

Ongoing Research Projects

- A randomized single blinded placebo controlled multicentre phase Il study of Lapatinib in combination with concurrent radiotherapy and Cisplatin versus Radiotherapy and Cisplatin alone, in subjects with Stage III and IVA, B squamous Cell Carcinoma of the Head & Neck. (Funded by: Glaxo Smithkline) Co-investigators: Dr. K. Ramachandran, Dr. M. Venugopal
- An open label, prospective, multicentric study to evaluate the safety and efficacy of biomab-EGFR (Nimotuzumab) as induction and maintenance therapy in combination with radiotherapy plus. Temozofomide in Indian patients with Glioblastoma multiforme. (Funded by: Clinigene, Bangalore)
 Co-investigator: Dr. K. Ramachandran
- 3. A phase if open label, randomized, Multicenter trial of GW786034 (Pazopanib) in combination with GW572016(Lepatinib) compared to Lepatinib alone a first line therapy in subjects with advanced or Metastatic Breast cancer with ErbB2 Fluorescence in situ-Hybridisation (FISH) positive tumours. (Funded by: Glaxo Smithkline)

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Co-investigator: Dr. K. Ramachandran

- 4. An open label randomized Phase II Study of two different dosing regimens of capecitabine in combination with intravenous Docetaxel (Q3W) in patients with locally advanced and /or Metastatic Breast Cancer (Roche study) (Funded by: Quintiles Research , India)
 - Co-investigator: Dr. K. Ramachandran
- A randomized, double blind, placebo controlled phase II study
 of oral recombinant human lactoferrin (rhLF) in combination with
 Carboplatin and Paclitaxel (C/P) chemotherapy in patients with
 locally advanced and for metastatic non-small cell lung cancer
 (NSCLC). (Funded by: Reliance Clinical Research Services.
 Mumbai)
 - Co-investigator: Dr. A. S. Krishnakumar
- 6. A phase III randomized, double blind, multi centre parallel-group study to assess the efficacy of ZD6474 (ZACTIMA^{IM}) vs. Erlotinib (TARVEVA) in patients with locally advanced or Metastatic Non small cell lung cancer after failure of at least one prior Cytotoxic Chemotherapy. (Funded by: Astra Zeneca Pharma India Ltd) Co-investigator: Dr. A. S. Krishnakumar
- 7. A randomized, double blind, placebo controlled phase II study of oral recombinant human lactoferrin (rhLF) monotherapy in patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) who have failed 1 or 2 line chemotherapy. (Reliance Clinical Research Services, Mumbai) Co-investigator: Dr. A. S. Krishnakumar
- A phase 3, Double Blind, placebo-controlled study of maintenance pemetrexed plus best supportive care versus best supportive care immediately following induction treatment for advanced non-small cell Lung Cancer. (Funded by: Eli Lilly, India) Co-investigator: Dr. A. S. Krishnakumar
- H3E-MC-JMHO Study: A randomized phase III trial of Alimta (Pemetrexod) and Carboplatin in extensive stage small cell Lung Cancer. (Funded by: Eli Lilly , India) Co-investigators: Dr. A. S. Krishnakumar, Dr. Sumod Mathew Koshy

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10. A phase II, Open-label, randomized multicenter trial Pazopania combination with Lapatinib compared to pazopania monotheragand lapatinib monotherapy in subjects with FIGO stage IVs metastatic or recurrent cervical cancer with zero or one prochemotherapy regimen for advanced/recurrent disease. (Fundamental States Smithkline)

Co-investigator, Dr. A. S. Krishnakumar

11. A randomized controlled phase III trial picoplatin and best supportive care (BSC) vs. BSC alone in patients with small cell lung cancer, refractory or progressive within six months of completing first line, platinum-containing chemotherapy. (Funded by: Sign climpharm)

Co-investigator: Dr. A. S. Krishnakumar

- A randomized double blind phase III study to compare the efficacion and safety of AZD2171 when added to 5-fluorouracil, Leucovoring and Oxaliplatin (Folfox) or capecitabine and Oxaliplatin (Xelox) with the efficacy and safety of placebo when added to Folfox of Xelox in patients with previously untreated metastatic colorectal cancer. (Funded by: Astra Zeneca Pharma India Ltd.). Co-investigator: Dr. A. S. Krishnakumar
- Organisation of a community based cluster randomized controlled trial for the early detection of Breast Cancer, Thiruvananthapura

Co-investigator: Dr. M. Venugopal

14. Aphase 3 randomised double blind placebo-controlled multicentric phase III study to evaluate the efficacy and safety of GW786034 compared to placebo in patients with locally advanced and for metastatic renal cell carcinoma who have progressed following cytokine based first line treatment. (Funded by: Glaxo Smithkline)

Co-investigator: Dr. M. Venugopal

 Protocol PIX 301 Pixantrone Vs. other chemotherapeutic agents for third line single agent treatment of patients with relapsed aggressive non-hodgkins lymphoma. (Funded by: Quintiles Research, India) Co-investigator: Dr. M. Venugopal

- A randomized, Double blind, Parallel-group, Multicentre, Phase III study comparing the efficacy and Tolerability of Fulvestrant (FASLODEXTM) 500 mg with Fulvestrant (FASLODEXTM) 250 mg in postmenopausal women with Oestrogen Receptor positive advanced Breast Cancer progressing or relapsing after previous endocrine therapy. (Funded by: Quintiles Research, India) Co-investigator: Dr. M. Venugopal
- 7. Phase III study of vinflunine plus gemcitabine vs. paclitaxel plus gemcitabine in patients with unresectable locally recurrent or metastatic breast cancer after prior anthracycline-based adjuvant chemotherapy. (Funded by: Chiltern International Pvt. Ltd.) Co-investigator: Dr. Jiji V.
- 18. International randomized study to evaluate the addition of docetaxel to the combination of cisplatin-5-fluorouuracil (TCF) vs. cisplatin-5 Fluorouracil (CF) in the induction treatment of nasopharyngeal carcinoma (NPC) in children and adolescents EFC10339. (Funded by: Sanofi Aventis)

 Co-investigator: Dr. Sumod Mathew Koshy
- 19. A randomised open label, multicenter, phase 3 study of Epoetin Alfa plus standard supportive care versus standard supportive care in Anemic patients with Metastatic Breast Cancer receiving first line standard Chemotherapy. (Funded by: M/s, Parexel International Synchron)

Co-investigator: Dr. Sumod Mathew Koshy

Merits, conferences / meetings/workshops attended, papers presented.

Dr. K. Ramachandran

Examiner, DNB (Radiodiagnosis). National Board of Examinations. Examiner, MD (Radiodignosis). Sri Ramachandra Medical College and Research Institute, Chennai.

Meeting of subject expert committee for FIST programme of Department of Science & Technology, Indian National Science Academy, New Delhi. 27 – 29 June 2007.

Investigators meeting (Project: N407B1), New Delhi.February 2008.

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Dr. A.S. Krishna Kumar

International Teleradiology and Pacs conference, Bangalore, 21-22 April 2007.

RSNA conference, Chicago, USA. 25 – 30 Novermber 2007.

Annual meeting of the Indian Radiological and Imaging Association, Kerala Chapter, Thiruvananthapuram. 22 – 23 December 2007.

MERCK global investigators meet, Mumbai. 23 October 2007.

AMGEN global investigators meet, Mumbai. 27 October 2007.

Eli Lilly global investigators meet, Chennai. 4 December 2007.

PEREGRINE global investigators meet, Bangalore. February 2008.

Dr. M. Venugopal

Indian Radiological and Imaging Association National Conference, Bangalore. 8 - 11 January 2008.

CME on Pulmonology, Medical College, Thrissur. February 2008. Paper presented: 'Interstitial lung disease'

Dr. M. Venugopal , Dr. Jiji V., Dr. Sumod Mathew Koshy

Meeting on clinical and biomedical MRI, Sree Chitra Tirunal Institute for Medial Sciences & Technology, Thiruvananthapuram. 1 - 5 August 2007.

Dr. M. Venugopal, Dr. Sumod Mathew Koshy

Jyothirgamaya 4th National workshop on sonography. Sree Chitra Tirunal Institute for Medial Sciences & Technology, Thiruvananthapuram. 11 May 2007.

Dr. Jiji V., Dr. Sumod Mathew Koshy

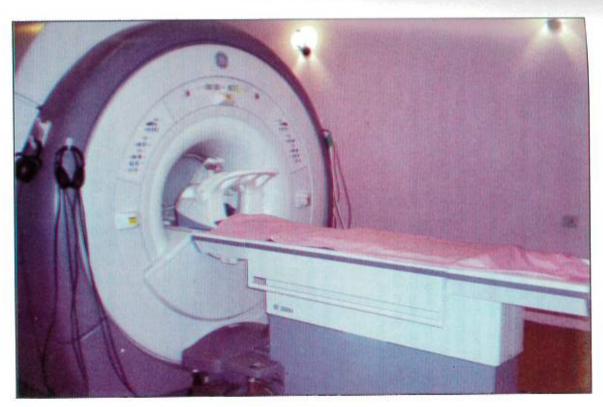
Workshop on pre-malignancies and cancers of the oral cavity, Regional Cancer Centre, Thiruvananthapuram. 7 November 2007.
Paper presented: Jiji, V. 'Advanced imaging in oral cancers'.

Dr. Sumod Mathew Koshy

Investigators meeting, Hong Kong, China. February 2008.



Anbumani Ramadoss, Hon'ble Union Minister for Health and Family Welfare, inaugurated the MRI Scanner on 24 November 2007.



MRI Scanner inaugurated on 24th November 2007

NUCLEAR MEDICINE

Dr. V.M. Pradeep

Additional Professor & Head

Dr. A. Sreekumar Associate Professor

Description of Work

Nuclear Medicine division provides diagnostic and therapeutic facilities using open radioactive sources. The center attracts a large group of patients from various districts of Kerala, South Tamil Nadu, Karnataka as well as Male and Sri Lanka. The work in Nuclear Medicine division includes in-vitro assays, various types of scans, and treatment for phyrotoxicosis and thyroid cancer as well as palliative treatment of bone pain. This is the only center in the state that provides high-dose therapy using radioactive sources. The division has also been recognized as a training centre for high dose therapy. The in-vitro assay section was the first of its kind to start functioning in the state in the early 1981. The division also participates in several teaching and other academic activities.

Thyroid Clinic

The major part of the work of Nuclear Medicine Department comprised evaluation and treatment of Thyroid disorders. Facilities for comprehensive diagnostic and therapeutic options for various thyroid disorders were available. These included thyroid scanning, ultrasonography, in-vitro assays, and radioiodine therapy. 12798 cases attended the thyroid clinics as new cases with direct referrals as well as follow-up cases. These consist of Ca Thyroid and Thyrotoxicosis as well as other cases that were referred for various investigations such as thyroid function tests, thyroid uptake and scan. 298 thyroid ultrasound scans were also done.

Thyroid scans were done with radiolodine (1-131), technetium (Tc99m). Large dose, whole body radiolodine scans were done for Ca Thyroid.

limmunoassay

The Laison chemiluminescence assay system added to the existing counters now performs well over 20,000 assays per year. This year the number of assays increased by about 4000 compared with last year.

Imaging-(Gamma Camera)

The acquisition of a Dual Head SPECT gamma camera (Infinia II GE) was the highlight of the year. Bone scanning for cancer patients was the

main work on this instrument. Dynamic renal studies including pediate renal evaluation were the second most important. MIBI imaging has been done routinely. Technetium for the purpose of these scans eluted from Molybdenum using Mo-To generator from BARC. Scanning for medullary Ca Thyroid using 99mTc(V)-DMSA is now a standard part of the workup.

Radionuclide therapy

Radionuclide therapy section of Nuclear Medicine is one of the larges in the country. Our Centre has recently been recognized by the Atomia Energy Regulatory Board as a training Centre for high dose treatment with pen radioactive sources. Radiolodine therapy is routinely give for Thyrotexicosis and Ca Thyroid. The division has a full-fledged radionuclide therapy ward with delay tank for the treatment of thyroid cancer. The division has facilities for bone pain palliation using 89-8 and 153-Sm.

Treatment for Thyrotoxicosis	184
Treatment for Ca Thyroid	 595

Table 8: investigations done

Immunoassays	 No.
Г3	2472
T4	2688
TSH	 3888
FT3	240
FT4	 384
ATG	648
AMC	 664
TG	3132
PTH	552
CALCITONIN	12
HCG	2004
AFP .	1080
CEA	2244
CA-125	1944
PSA	792
FSH	12
LH	10

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PRL	.12
TESTO	20
CORTISOL	10
GH	. 32
B2MU	282
CA 19-9	672
TOTAL.	23814
Gamma Camera	
LD-SCAN	2567
SD-SCAN	285
PT ,	499
99mTc Q4	788
BONE	2140
RENOGRAM	80
DMSA(Tumor)	. 48
DMSA(Kidney)	14
MUGA	22
Meckel's	3
MIBI(Tumor)	163
BIDA	9
TOTAL	6618

Morits, conferences attended, papers presented

Dr. Sreekumar A.

Examiner BSc. (NMT), Manipal University, Manipal. December 2007. SNM (southern chapter annual meeting, Hyderabad, 28 - 29 July \$2007.

ShAnnual conference of ANMP1., Udaipur, Rajastan, 28 – 30 September 2007.

Paper presented:

Retrospective analysis of clinico-pathologic parameters of solitary nodule hyroid: our experience with 453 cases'.

RADIATION PHYSICS

Dr. Raghu Ram K. Nair Dr. Thayal Singh Elias Mr. Raghu Kumar P. Mr. Saju B. Mr. Giri Purushothaman Ms. Zhenia Gopalakrishnan Ms. Divya K. T.	Additional Professor & Head Associate Professor Assistant Professor Assistant Professor Lecturer-Electronics Engineering Lecturer
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Routine Activities

Calibration and Quality Assurance of Radiotherapy equipments
Treatment Planning

Dose Computation

Radiation Safety in Radiotherapy, Imageology and Nuclear Medicine Participation in Intercomparison and external verification of dose output of treatment machines using TLD in BARC/IAEA programs.

Daily maintenance, checking and repair of all teletherapy and brachy therapy equipment

Intraoperative, intraluminal and mould brechytherapy using Microselectron HDR

Installation, acceptance and QA of; (1) a new aSi Flat panel digital Simulator; (2) Isocentric C-Arm and Table for HDR Brachytherapy

Table 9 : Patient Services:

Treatment gives:	No. of patients	
External Beam Radiotherapy Brachytherapy Conventional		7454
Interstitial Implantation Microselectron HDR	17	
Gynaec	1294	
Oesophagus	52	
Bronchus	3	
Others	46	1395
Total		8849

Simulator		3370
Mould Room Orfit Shell		
ont Shell	1269	
Bite Block	605	
8092c Gal ue	261	
Etectron Cut –outs. Head rest,		
Electron Cut –outs, Head rest, Leg rest, face rest, mould etc	382	2517

Academic Activities

Classes were conducted in Medical Physics and practical training imtrained to the following categories of students of:

Diploma in Radiological Technology (DRT), B.Sc. MLT; DMLT, B.Sc. Nursing, M.Sc. Nursing, MBBS, DMRT, DMRD, MDS(Oral Radiology), MD Radiotherapy, MD & Dip NB (Radiodiagnosis) and M.Sc Radiation Physics.

Training Programme

The three months Refresher programme in Imageology/Nuclear Medicine and Radiotherapy for Radiographers started in 1994 has covered 132 Trainees in Imageology/Nuclear Medicine and 33 trainees in Radiotherapy till March 2008. Two Dip RP students from BARC, Mumbai attended two months training in 2007.

M.Sc. Radiation Physics Programme started in collaboration with Calicut University. Classes of third semester commenced in July 2007 with eight students.

Ongoing Research Projects

- HBRA Project, Karunagappally: Cancer occurrence in the Natural Radiation Area of Kerala (Funded by: Health Research Foundation, Kyoto)
 - Principal Investigator: Dr. Raghuram K. Nair
- Software development of Radiotherapy Management System.
 Principal Investigator: Dr. Thayal Singh Elias
- Development of a latex packing balloon to reduce rectal and bladder dose in IC HDR Brachytherapy. (Funded by: Hindustan Latex)
 - Principal Investigators: Dr. Raghuram K. Nair, Mr. Raghukumar P.

Merits, Conference/meeting attended, papers presented Dr. Raghu Ram K. Nair

Examiner, MD (Radiodiagnosis) & DMRD. University of Kerala. Examiner, Ph D Thesis. Calicut University and Manipal University. Member, Board of studies in radiation physics, Calicut University. Research Supervision for the following Ph D programmes:

- Calibration, dosimetry and safety in brachytherapy techniques in the treatment of malignant diseases. Mr. P. Raghukumar, M.G. University, Kottayam.
- Development of a quality assurance protocol, dose measurement and radiation safety evaluation in CT Scanners, Mr. K. A. Davis, M.G. University, Kottayam.
- Modification of radiotherapy by physical parameters. Dr Sajeed A, University of Kerala.

CME on advances in medical imaging and interventional technology. Size Chitra Tirunal Institute for Medical Sciences and Technology. Thiruvananthapuram. 23 September 2007.

Paper presented: 'Recent Concepts in Radiation Protection'

Dr. Raghu Ram K. Nair, Dr. Thayal Singh Elias, Mr. Raghukumar P., Mr. B. Saju

Meeting of the Association of Medical Physicists of Kerala. 29 April 2007.

28* National Conference of the Association of Radiation Oncologists of India, Chennai. 29 November – 2 December 2007.

Mr. Raghukumar P.

Examiner, BSc (MRT), Mahatma Gandhi University, Kottayam.

Ph D scholar, M. G. University, Kottayam.

20* Kerala Science Congress, Thiruvananthapuram. 28 – 31 January 2007.

Paper presented: 'Development of a balloon for use in patients with' cancer of the uterine cervix to reduce rectal and bladder doses'

Mr. B. Saju

Ph D Scholar, Calicut University.

17" National Symposium on Radiation Physics, Saha Institute of Nuclear Physics, Kolkata. 4 – 6 November 2007.

Papers presented: Saju B, Santhosh VS, Babu BRS, Reghu Kumar P, Raghu Ram K, Nair, Divya K.T., Zhenia G, Shaiju, 'Design and

fabrication of Dosimetric Phantom for dosimetry.

Santhosh V.S., Saju B. Sushama P. Babu B.R.S. 'Monte Carlo simulation and beam characteristic studies'.

Sushama P., Santhosh V.S., Saju B., Babu B.R.S. 'Dosimetric studies on carcinoma breast treatments'

Mr. Giri Purushothaman

8th National Conference on technological trends, College of Engineering, Thiruvananthapuram. 30 November – 1 December 2007.

Mr. Rajesh P.R., Mr. Sunil Kumar S., Sreekala R.

11th National Conference of Association of Radiation Therapy Technologists of India, All India Institute of Medical Sciences, New Delhi, 5 - 7 October 2007.

Paper / Poster presented: Rajesh P.R., Sajeed A, Raghu Ram K. Nair, Sunii Kumar S, Raghu Kumar, P., Jayaprakash P.G. 'HDR Vs. LDR brachytherapy in the treatment of carcinoma of uterine cervix'.

Sunil Kumar S., Raghu Ram K. Nair. Hariharan S., Purushottam G. Kale, Aswin kumar, Jayaprakash P.G., Ravindran Ankathil. 'Chromosome aberrations following radiotherapy in patients with cancer of uterine cervix'.

Mr. Sunil Kumar S.

20[⊯] Kerala Science Congress, Thiruvananthapuram, 28 - 31 January 2007

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ANAESTHESIOLOGY

Dr. Rachel Cherian Koshy	Additional Professor and Head
Dr. Mary Thomas	Associate Professor
Dr. Venugopal A.	Associate Professor
Dr. Mal. ka Balakrishnar	Assistant Professor
Dr. Sudha P.	Assistant Professor
Dr. Viji Pilla:	Lecturer

The Department of Anaesthesiology runs 6 major and one minor theatre in addition to the pre anaesthetic clinic and anaesthesia in remote settings like endoscopy room, radiation suite and CT room.

Pre-anaesthetic evaluation is done 6 days a week. Anaesthetic service was provided for major cancer surgenes, minor procedures, diagnostic and therapeutic endoscopic procedures and central venous access in adults. Children requiring radiation, CT guided procedures and long term central venous access were also provided anaesthetics.

Round the clock coverage is provided for surgical emergencies. Intensive care and ventilatory support for post operative patients is also provided continuously. Acute pain service for post operative surgical patients is being provided for upto 72 hours after surgery by anaesthesiologists. Dr Rachel Cherian Koshy was appointed as a visiting faculty at the Milton Hershey Medical Center and Penn State University in USA for

six months.

Post graduate intake in this broad speciality department has been 4 per annum with no seat lying vacant for the third successive year.

Two temporary lecturers were appointed to offset the existing staff.

two temporary lecturers were appointed to offset the existing staff shortage. Post graduate teaching was carried out 2-3 days a week and Dip NB appraisals were conducted periodically.

CLINICAL WORK: SUMMARY

Pre-anaesthetic Assessment Clinic

No. of new cases seen	3196
No. of review cases seen	3310
Total	6506

Ansesthetics Administered	
Major cases	2473
Minor cases	289
Endoscopies	43
Total	2805
6.10ta	
Break up of major cases	
Head and neck	982
Breast	832
Gastro-intestinal	286
Gynae-urology	235
Esophagus	60
Extremity	108
Total	2473
9. Q.Lo. 37.	
Special Techniques	
TIVA	. 44
GA+EPIDURAL	391
Examples of Spinal Enjoyed	143
Compressional black	56
Combined Spinal Epidural Subarachnoid block LMA	103
Plexus and other blocks	12
Anticipated difficult airway	. 85
Enual associatebation	20
Blind nasal intubation	. 2
Fiberoptic intubation	3
Retrograde intubation	. 3
Tracheostomy	. 40
Preop Perop	10
	21
Post op Total tracheostomies	. 18
k: Total trachéostomies	49

Ongoing Research Projects

- A Comparison of ephedrine and ketamine in the prevention of hypotension following propofol induction.
 Investigators: Dr.Gopakumar, Dr. Venugopal
- Effect of Isoflurane anaesthesia on prolongation of QTc interval in breast cancer patients pretreated with anthracycline

- chemotherapeutic agents
- Investigators: Dr.Rajasree,O, Dr.Venugopal A.
- Comparison of Intravenous induction with propofol versus inhalational induction with sevoflurane: A prospective randomized control trial.
 - Investigators: Dr.Divya John, Dr.Rachel Cherian Koshy
- A Prospective double blind randomized controlled trial to study
 the efficacy of single dose pre- emptive Gabapentin to reduce
 post operative pain and opioid demand following head and neck
 surgery.
 - Investigators: Dr. Preethy Elizabeth Benoy, Dr. Rachel Cherian Koshy
- 5. Randomised double blinded study of efficiency of pre-operative oral clonidine in prevention of haemodynamic response to laryngoscopy and tracheal intubation.

 Investigators: Dr.Sweetline Subha, Dr.Rachel Cherian Koshy
- A prospective Double blind randomized control study to determine the efficacy of injection labetalot for controlled hypotension.
 Investigatos: Dr. Padmakumar Dr. Mary Thomas
- 7. Effect of small dose ketamine in prevention of pain on propopolinjection.
 - Investigators: Dr. Ranju, Dr. Mary Thomas
- Comparison between intermittent bolus dose of epidural buprenorphine versus infusion of bupivacaine for postoperative pain management.
 - Investigators: Dr.Rajesh Vijayan, Dr. Mary Thomas
- Randomised double blind controlled trial to compare effectiveness of post op analgesia of fentanyl and morphine via patient controlled iv delivery.
 - Investigators: Dr. Venu N, Dr. Mary Thomas

Merits, conferences / meetings attended, talks delivered Dr. Rachel Cherian Koshy

Visiting appointment as Assistant Professor (Anesthesiology). Millon Hershey Medical Center and Penn State University. January – July 2007.

Hospital Management Certificate Course, National Institute of Health and Family Welfare, New Delhi. August 2007

Talks delivered: 'Head and Neck cancers: challenges for the Anaesthesiologist'.

(Department of Anaesthesiology, Milton Hershey Medical Center, Pennistate University, Hershy, Pennsylvania June 2007.)

Advances in management of cancer pain'. (All India Radio, Trivandrum, September 2007)

Or. Rachel Cherian Koshy, Dr. Venugopal A.

CME and 31st annual conference of Indian Society of Anaesthesiologists (Kerala chapter), Kozhikkode. 26 – 28 October 2007.

📆, Venugopal A., Dr. Mallika Balakrishnan, Dr. Sudha P.

Respiratory Care Update', Stee Chitra Tirunal Institute for Medical Sciences & Technology, Thiruvananthapuram, 8 July 2007.

🐉 Dr. Mallika Balakrishnan, Dr. Sudha P.

CME on Pulmonary Critical Care Medicine, Department of Respiratory Medicine, Medical College, Thiruvananthapuram, 9 September 2007.

CANCER RESEARCH

Dr. Prabha Balaram Professor (on leave)

Dr. Ravindran Ankathil Additional Professor (on leave)

Dr. S. Kannan Additional Professor
Dr. P. Remani Additional Professor

Dr. K.M. Sathyan Lecturer
Dr. S. Hariharan Lecturer

Dr. T.T. Sreelekha Scientific Officer

The academic activities of the Research Division during the period 2007 - 08 was mainly concentrated on translational research as well as designing of new research aspects in cellular and molecular oncology. The identification and characterization of biologically active plant products and its exploitation as antitumor agents were also areas of active research. Other important activities of the division included conducting training programmes like doctoral course; M.Sc./MD/MDS dissertation works; short-term training for B.Sc, M.Sc and B. Tech students. The foremost important outcome of the research work from each laboratory during the report period was as follows.

Laboratory of Tumour immunology and Functional Genomics

Group Leader Dr. Prabha Balaram

Modulation of immune functions using medicinal plant products as a possible therapeutic measure has become fundamental principles of therapeutic approach. Ayurvedic praparations were used in a big way for this purpose. Preliminary studies reported by us in mice and humans imply that *Indukantha Ghritha* an ayurvedic rasayana prescribed for treatment of a number of diseases and also as a rejuvenating agent in humans by the ayurveda physicians is an immunomodulating agent preferably stimulating the TH1 type immune response. Presently have been evaluating the effect of rasayana Indukantha Ghritha when given as an adjuvant to oral cancer patients after the completion of the primary treatment for the debulking of the turnour. Immune response was measured by evaluating the effect of IG administration to lymphocyte response to mitogen and alterations in the effector T-lymphocyte

population. As of now, immunmodulation using plant products have not been tried in cancer patients and this study will tell us the efficacy of an immuno modulating agent which has been used in ayurveda for many wears and for which no particular side effect has been reported yet. If the drug is found as effective as was noticed in the experimental animals, it ້ພວມ[໔ give us a therapeutic mode with additional benefits and also show the benefits of activation of the immune system from various angles. Indukantha Ghritha is a polyherbal preparation consisting of 17 plant components prescribed by Ayurvedic physicians for various ailments in India. The immunomodulatory/anti-tumor activity has not been documented scientifically for most plants in order to justify their inclusion in the drug. We evaluated the immunomodulatory/anti-tumor potential of major plants - Aegle marmelos (AM), Piper longum (PL) and Piper Poliaba (PC) and identified the fractions responsible for the activity. Results obtained were significant and comparable with standard anticancer drugs. Toxicity profiling in mice for all the three plant drugs including LD ... liver and renal function tests using serum and histopathology of organs were morformed and the drugs were non-toxic to lymphocytes and upto 2g/kg closes. Frections responsible for the activity were characterized using Mash chromatography, GC/LC-MS, HPLC and the compounds such as kanthorhizzol, piperidine, caryophyliene, nerolidol, elemene, funebrene, Phdesmin were identified.

the tumor derived exosomes from some cancers have been demonstrated to suppress T cell function and induce apoptosis of T cells, thereby reducing the immune response of the patient resulting in Sefects in the growth control of the malignant cells. They could be responsible for a negative regulation of the signal transduction proteins in T-lymphocytes, which could lead to an impairment/enhancement of ficell function. Our results suggested that the role of circulating factors immunosuppressants in oral cancer. Moreover, it was observed that serum from oral cancer patients exert strong immunomodulatory effects on T-lymphocytes, thereby affecting the overall immune responses. The immune regulatory effect was seen to be closely related to the clinical response of the patients and hence could be a potential marker of prognosis.

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Patient Service:

Flow Cytometry - Immunophenotyping &

142 Cases

Stem Cell Enumeration

Ongoing Doctoral Programme: Research topics

- T cell signal transduction in correlation with immune response and response to therapy in patients with cancer of the uterine cervix.
- Molecular alterations in relation to radiation response in squamous cell carcinoma.
- Analysis of molecular alterations of epidermal growth factor receptor in GTD.
- Immunomodulatory activities of major plants used in the preparation of Indukantha Ghritha.

Laboratory of Cytognetics and Molecular Diagnostics

Group Leader Lecturer Dr. Ravindran Ankathil

Dr. S. Hariharan

The research areas concentrating by the Laboratory of Cytogenetics and Molecular Diagnostics are chromosome abnormalities seen leukemize patients, chromosome abnormalities seen in patients with genetic disorders and infertility, the identification of genetic susceptibility factors in familial and sporadic cancers, Mutation analysis of BRCA 2 general Susceptibility genes in lung cancer and mutation analysis of mismatch repair genes in colorectal cancer patients.

Patient Service:

 Bone marrow chromosome analysis carried out for leukemia patients

419 samples

 Peripheral blood lymphocyte, chromosome analysis carried out for patients referred from various other hospitals and genetic centres

78 samples

 Pedigree analysis carried out in familial cancer patients

20 Nos.

Ongoing Doctoral Programme: Research topics

- Genetic susceptibility studies in lung cancer.
- Molecular genetic analysis of germline BRCA2 gene mutations and pathobiology of BRCA2 gene mutated hereditary breast cancer.
- Role of Germline polymorphism of few low penetrance genes in familial breast Cancer.
- Genetics of colorectal cancer susceptibility.
- 5 Germline mutation analysis of mismatch repair genes in familial colorectal cancer patients.
- 6 Cytogenetic and Molecular cytogenetic analysis of AML patients.

aboratory of Cell cycle Regulation and Molecular Oncology

Group Leader Dr. S. Kannan

the mandate of our lab has been to decipher the basic molecular mechanisms underlying oral cancer development thereby enabling better adjagnosis and treatment of the disease. Cell cycle regulatory genes are frequently dysregulated in cancer. The analysis of the cell cycle revealed 253, p16 and cyclin D1 as good biomarkers for predicting prognosis n oral carcinoma. In our proteomic approach, we identified several Eproteins involved in the stabilization of p53 in oral carcinoma. Studies are underway to pinpoint each of these proteins. In addition, analysis of microsatellite markers showed that markers encompassing p16 gene are associated with oral cancer progression and disease recurrence. Currently we are also profiling cell cycle regulatory genes expression at the transcriptome level using TLDA. The preliminary results showed inolecular expression profile efficiently classify a group of patients with Spoor survival. The preliminary studies on the insolvent of Micro RNA in brai carcinogenesis and its profiting using Micro array is also being started in the current year and this expected to provide molecular basis of oral carcinogenesis and development of new targets as well as prognostic Signarkers for its therapeutic management.

Patient service

RT-PCR for BCR-ABL fusion transcript

64 patients

RT-PCR for PML-RARα fusion transcript Quantitative Real-Time PCR

17 patients34 patients

Ongoing Doctoral Programme:

Research topics

- Characterization of molecular alterations in p53 gene in oraginoma. (Thesis submitted)
- Characterization of molecular alterations in INK4A/MTS-1/ p16gene in oral carcinoma.
- Molecular studies on involvement of p14/ARF Gene in praise carcinoma.
- 4. Characterization of molecular alterations in the Retinoblastoma (Rb) gene in Oral carcinoma.
- Study on the identification of factor/s involved in over expression of cyclin D1 in oral carcinoma.
- Studies on the biology of carcinoma of buccal mucosa and tongue.

Laboratory of Glycobiology and Phytopharmacology

Group Leader

Dr. P. Remani

The need to find a safe and highly effective cure for neoplastic diseases remain a major challenge Plants have been a source of medicine substances for thousands of years and phytoproducts continue to play an essential role in medicine. We focused our studies on three medicinal plants. Solanum tritobatum belonging to the family Solanaceae, Alpinia galanga and Curcuma zedoaria belonging to the family Zingiberaceae. The petroleum ether extract of all the three plants exhibited cytotoxic activity against K-562 (Leukemia) cells, A-549 (Lung cancer) cells and KB (nasopharyngeal) cancer cells. The active compounds were identified by Gas chromatography Mass Spectroscopy (GCMS). Acute toxicity studies were carried out in experimental animals and it was found that none of the extracts exhibited toxicity up to 500 mg/kg bodyweight on Balb/c mice. Further studies are in progress to evaluate the antitumour activity of the active principles of these plants.

Ongoing Doctoral Programme: Research topics

- Anti-tumour properties of selected medicinal plants of Zingiberaceae.
- Cytochemical and immunological studies of Solanaceae plants.
- Telomerase as tumour marker in oral cancer as an indicator for staging and treatment outcome.

 Characterization and evaluation of anticancerous properties of compounds from selected medicinal plants.

Laboratory of stern cell biology

Group Leader

Dr. K.M. Sathyan

We are interested in elucidating the basic biology of stem cells. The specific alterations that lead to the formation of cancer stem cells and differences in the biology of cancer stem cells and normal stern cell are the major focus. This may lead to development of new drugs, which could directly target cancer stem cells. We are also re-evaluating stem cell associated genes as prognostic biomarker in oral carcinoma.

Laboratory of Biopharmaceuticals

Group Leader

Dr. T.T. Sreefekha

Drug development from natural products is an emerging area of medical research and polysaccharides from plant products have attracted significant attention in the recent time. Earlier studies on polysachharide isolated from *Tamrindus indica* (PST001) exposed that it has an antiproliferative effect on tumor cells (lymphoid cells) affecting the miliotic progression, invitro cytotoxicity experiments in solid tumor cell lines suggest that PST001 is a potential molecuse against solid tumors. Apoptosis and mitotic inhibition were evident in PST001 treated cancer cells. Apart from apoptotic evaluation cell cycle and cell cycle check point proteins were also assessed and the results are supporting the above findings. Further studies are going on to appraise the potential of PST001 as an anticancer drug.

Another area of research in this laboratory was the evaluation of molecular alterations in carcinigenesis. Lung cancer is one of the most frequent malignancies in the worldwide and the leading cause of the death. An increased incidence of female lung cancer is observed in the RCC clinic. In this background, we have undertaken a project to investigate the genomic alterations in female lung cancer patients. Blood and bronchial lavage were collected from both male and female lung cancer patients to analyze geneomic instability, mutational status of P53 & Ras genes, polymorphism of metabolic genes and the estrogen status in the sera in order to compare these parameters in male and female patients. Pretiminary results showed that a significant correlation

between estrogen levels and lung cancer both in male and female patients. Further evaluation is going on to formulate a molecular model for lung cardinogeneis.

Ongoing Doctoral Programme: • Research topics

Characterization of anti-tumor polysaccharides from mushrooms.

Training offered

- Three Months Training in Cytogenetics offered to Laboratory Technician, Priyadarshini Institute of Paramedical Sciences, Triyandrum.
- Two Months Training in Immunology and Molecular Biological Techniques for MD Microbiology Students, Medical College.
 Trivandrum

External Students Training Programme

Division of Cancer Research has conducted various training and education programmes for graduates and postgraduate students during this period. Fifty two (52) M.Sc students from various Universities and Colleges were carried out their dissertations work. In addition, as a common endeavor to develop research aptitude among graduate and postgraduate students, the division also actively participated in training programme in "Cancer Research and Methodology". Under this scheme a total of 93 students got two week long observation training in various aspects of cancer research and also demonstrated various advanced techniques using for cancer research to the students. The division has also provided short term theory and practical training on cytogenetics to 144 BSc (MLT) students of MG University and 4 cytotechnologists/cytotechnician students of Division of Pathology, Regional Cancer Centre Trivandrum.

Ongoing Research Projects

- FIST grant for development of infrastructure (2004 -2009).
 (Funded by: Department of Science, Technology and Environment, Government of India)
- Tumour suppressor genes in Nasopharyngeal carcinomal an evaluation. (Funded by: Kerata State Council for Science, Technology and Environment)
 Principal Investigator: Dr. Prabha Balaram
- 3. Immunomodulation of T cell signal transduction by exosomes

from oral cancer patients. (Funded by: Kerala State Council for Science, Technology and Environment)

Principal Investigator: Dr. Prabha Balaram

Influence of Indukantha Ghitha - an ayurvedic rasayana on immune responses and prognosis in oral cancer patients: a feasibility study. (Funded by: Kerala State Council for Science, Technology and Environment)

Principal Investigator: Dr. Prabha Balaram

5. Polysaccharides from Tamarindus indica as inhibitors of mitotic progression in malignant cell lines; elucidation of the target protein. (Funded by: Kerala State Council for Science, Technology and Environment).

Principal Investigator: Dr. T. T. Sreelekha

6 Genomic instability in lung cancer as an early prediction tool. (Funded by: Department of Science & Technology, Government of India)

Principal Investigator, Dr. T. T. Sreelekha

- 7 Cytogenetic studies on the effects of chronic low-level radiation in the residents of high background radiation areas (HBRA) in Kerala, India. (Funded by: Health Research Foundation, Japan) Principal Investigator: Dr. Ravindran Ankathil
- Genetic Susceptibility Studies in Lung Cancer. (Funded by: Department of Science & Technology, Government of India)
 Principal Investigator: Dr. Ravindran Ankathil
- Mode of INK4A/MTS1 Inactivation and over expression of R81 Genes in Oral Carcinoma. (Funded by: Department of Science & Technology, Government of India) Principal Investigator: Dr. Kannan S.
- 10. Characterization of pathways involved in the upregulation of cyclin
 D1 expression in oral carcinoma. (Funded by: Kerala State Council
 for Science, Technology and Environment)
 Principal Investigator: Dr. Kannan S.
- 11. Scheme Augmentation of R & D (SARD): Setting up of Real-Time PCR Facility. (Funded by: Kerala State Council for Science, Technology and Environment)
 Principal Investigator, Dr. Kannan S.
- 12. Study on the Significance of Micro-RNA Expression Pattern in Oral Carcinoma. (Funded by: Department of Biotechnology, Government of India)

- Principal Investigator: Dr. Kannan S.
- Cytotoxic and Immunological evaluation of active principles of two Solanaceae plants. (Funded by: District Development Office for Scheduled Castes, Thiruvananthapuram)
 Principal Investigator: Dr. P. Remani
- Antitumour properties of Alpinia galanga, a medicinal plant of Zingiberaceae. (Funded by: Indian Council of Medical Research, New Delhi)
 Principal Investigator: Dr. P. Remani
- Molecular dissection of TGFβ-Smad signaling pathway in oral carcinoma. (Funded by: Fast track grant for Young Scientists, Department of Science & Technology, Govt. of India)
 Principal Investigator: Dr. K.M. Sathyan

New equipments added to the facility

1.	l_yophiliser	-	2007

Microplate Spectrophotometer - 2001

Merits, Conferences / meetings attended, papers presented . Dr. P. Reman!

Received 'Rotary Club Award for Excellent Achievement'.

Dr. P. Remani, Dr. T.T. Sreelekha

Workshop on quality improvement in Research, University of Kerala, Thiruvananthapuram, 28 – 29 September 2007.

Dr. Remani P., Mrs. Lakshmi S., Mrs. Dhanya GS, Mrs. Baena Joy, Mrs. Padmaja G.

International Conference on New Horizons in Biotechnology, Thiruvanianthapuram. 26 – 29 November 2007.

Papers presented:

Lakshmi S., Dhanya GS., Beena Joy, Padmaja G., Remani P. 'Antitumour constituents from *Curcuma zedoaria* mizomes'.

Beena Joy, Lakshmi S. 'Antiproliferative properties of *Embelia ribes'.*. Dhanya GS., Lakshmi S., Beena Joy., Remani P. 'In vitro cytotoxicity of *Solenum trilobetum* on cancer cells'.

Dr. Prabha Balaram, Dr. Remani P., Dr. T.T. Sreelekha, Mrs. Lakshmi S., Mrs. Dhanya GS, Mrs. Beena Joy, Mrs. Padmaja G., Mr. Aravind S.R. 2nd International Symposium on Transalational Research on Natural Products and Cancer, Lonavala, Mumbai. 9 – 12 December 2007.

Papers presented: Lakshmi S., Dhanya GS., Beena Joy, Padmaja G., Remani. P. 'Inhibitory effect of an extract isolated from *Alpinia galanga* on Dalton's Lymphoma Ascites cells *in vitro'*.

Dhanya GS., Lakshmi S., Beena Joy, Remani. P. 'Cytotoxicity studies of Solanum tritobatum against Daton's Lymphoma ascitic cells'.

Aravind.SR, Baby Prathap.B, Prabha Balaram, Sreeteka.TT. 'Studies on the antitumor activity of PST 001 on cancer cell lines'.

Baby Prathap B, Aravind SR, Prabha Balaram, Sreeleka TT. 'Effect of Polysaccharide PST 001 in cell cycle regulatory proteins in cancer cell lines'.

Or, T.T. Sreelekha

National Seminar on Medicinal Plants. University of Burdwan, West Bengal. 15 – 16 March 2008.

Papers presented: Suraj K. George, Praveena Krishnan, Sreelekha TT., Aravind SR., Sunil Kumar S., Sulekha B., Prabha Balaram. 'Evaluation of anti tumor activity of *Piper chaba* in a murine ascitic carcinoma'.

Praveena Krishnan I., Suraj K. George, Aravind SR, Sunil KS, Cessal Thomas, Suresh Chandra Dutt, Sreelekha TT, Prabha Balaram. Influence of indukantha ghritha: an ayurvedic rasayana on immune responses and prognosis in oral cancer patients.

Aravind SR, Praveena Krishnan I., Suraj K. George, Prabha Balaram, Sreeleka, TT, 'Antitumor Activity of the Polysaccharlde PSP 001: an invitro evaluation'.

Dr. K.M. Sathyan

Awarded Ph D. University of Kerala, 2007.

Topic: 'Characterization of molecular afterations in Cyclin D1 gene in oral Carcinoma', (Guide: Dr. Kannan S.)

'Model Organisms and Stem Cells in Development and Disease'. National Centre for Biological Sciences, TIFR, Bangalore. February 2008. Annual Meeting of Society for Biotechnologists, India and National symposium on current trends in stem cell biology, Rajiv Gandhi Centre for Biotechnology, Thiruvananthapuram. 15 - 16 December 2007.

Dr. Kannan S., Dr. Sathyan K.M., Mr. Dileep Kumar U., Mr. Geo Francis, Mr. Deepak Roshan V.G.

27th Annual convention of the Indian Association for Cancer Research (IACR), The Gujarat Cancer & Research Institute, Ahmedabad, Gujarat, 7 – 9 February 2008.

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Papers presented: Dileep Kumar U., Geo Francis, Sathyan KM, Nalinakumari KR, Rejnish Kumar R., Kannan S. 'A comprehensive analysis of p53 gene alterations in oral carcinoma'.

Deepak Roshan VG, Sathyan KM, Shaji Thomas, Paul Sebastian, Kannan S. Expression profiling of cell cycle regulating genes revealed molecular heterogeneity between buccal and tongue carcinoma'.

Sujathan K, Thara Somanadhan, Remani P. 'Evaluation of Bcl 2 and p53 expression in breast cancer patients: their significance in predicting axillary lymph node metastasis'.

Mr. Praveen Kumar B.R., Mrs. Vijayalekshmi R.V., Dr. Hariharan S., Mrs. Sreeja L., Mrs.Santhi S., Dr. Ravindran Ankathil.

20th Kerala Science Congress, Thiruvananthapuram. 28 – 31 January 2008.

Papers presented: Praveenkumar BR, Vijayaleskhmi RV, Hariharan S., Sreeja L., Santhi S., Jayaprakash Madhavan, Raveendran Ankathil. 'The Intron Splice Acceptor Polymorphism (Ivs12-6t>C) in hMSH2 Gene and Risk of Colorectal Cancer'.

Suraj K. George, Sreekumar PK, Praveena Krishnan I., Geetha Parameswaran, Sulekha B., Prabha Balaram. 'Role of Zinc and Copper chelation in apoptosis mediated by Transition Metal Complexes'.

Syamala V, Kuttan R, Ravindran Ankathil. 'Mutation analysis of BRCA genes: a prospective strategy for early detection and better surveillance of breast/ovarian cancer patients'.

Mr. Rajesh R.

Awarded PhD, University of Kerala, 2008.

Regional Cancer Centre, Thiruvaranthapuram

Topic: 'Immunomodulatory activities of Rasayana: Indukantha Ghritha in experimental animals'. (Guide: Dr. Prabha Balaram)

Mrs. Sreeja L.

Received Travel Grant for attending 12th World Lung Cancer Conference, Seoul, Korea. September 2007.

MOLECULAR MEDICINE, DRUG DEVELOPMENT AND CHEMO-INFORMATICS

Dr. Lakshmi...S

Lecturer

The Division of Molecular Medicine, Drug Development and Chemoinformatics was founded on the understanding that basic research in molecular and cellular biology is fundamentally important to the advancement of the medical sciences. The educational programmes of the division ranging from training graduate, post graduate and doctoral students involved a close participation of basic and clinical scientists in every step of the educational process. A goal of such a programme has been to train tomorrow's scientists to be better prepared to direct their basic molecular and cellular research toward issues of medical relevance. Importantly, molecular medicine trainees would also be more attuned to biomedical sciences, which could facilitate their recognition of clinically relevant findings arising through serendipity. The Division sought greater, more comprehensive understanding of human biology and disease, which formed the primary goal of biomedical research.

Human Resource Development

This division has been an important training center in cell and molecular biology for postgraduate students from various colleges. This year 5 M Sc Biotechnology & Biochemistry and one MPhil Biotechnology theses were done in the division. A large number of graduate students in Life Sciences and Biotechnology also visited the division during the report year. One MD thesis was awarded this year.

Ongoing Research Projects

- Validation of p16 ink4a expression as a marker for oncogenic HPV infection in the uterine cervix. (Funded by: Kerala State Council for Science, Technology and Environment)
 - Principal Investigator: Dr. Lakshmi S.
- Expression levels of estrogen receptor cofactors in breast carcinoma. (Funded by: Indian Council for Medical Research, New Delhi))
 - Principal Investigator: Dr. Lakshmi S.
- Gene environment interaction and susceptibility to breast cancer. (Funded by: Department of Science and Technology, Government of India).

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Principal Investigator: Dr. Lakshmi S.

Ongoing Doctoral Programmes:

Research topics

- Role of estrogen receptor co-regulators in breast cancer.
- Role of signal transducers and activators of transcription in breast carcinogenesis.

Conferences/meetings/workshops attended, papers presented,

Dr.Lakshmi S., Mr. Binu K. A., Ms. Prabha Pillai

Advances in computer aided drug discovery and design methods, Rajiy Gandhi Centre for Biotechnology, Thiruvananthapuram. 20 - 22 August 2007.

Annual Meeting of Society for Biotechnologists, India and National symposium on current trends in stem cell biology, Rajiv Gandhi Centre for Biotechnology, Thiruvarianthapuram. 15 -16 December 2007.

Ms. Prabha Pillai

National Seminar on Bioactive Compounds from Marine Organisms. Cochin University of Science and Technology, Kochi. 14 - 15 March 2008.

Paper presented:

Regional Cancer Centre, Thiruvarianthapuram

'Marine yeasts as source of immuno-stimulants for Penaeus monodon'.

CANCER EPIDEMIOLOGY AND CLINICAL RESEARCH

Dr. Alevamma Mathew

Additional Professor of

Statistics and Epidemiology & Head

Mrs. Padmakumary Amma G Lecturer in Bio-Statistics. Dr. Kalavathy M.C

Lecturer in Epidemiology

Dr. Preethi Sara George

Lecturer in Bio-Statistics (Oct. 2007 -)

Dr. Sajeevkumar N.K.

Lecturer in Bio-Statistics(Apr.-Oct. 2007)

The division runs cancer registries (hospital and population based), conducts surveillance and epidemiological studies as well as cancer control programmes, provides statistical analytical support to the research studies undertaken at RCC and teaches bio-statistics and epidemiologic methods to postgraduate students and professionals at RCC, conducts short term courses in Biostatistics & Epidemiology and guides students under the Kerala and Mahatma Gandhi universities for doctoral research programmes in Statistics and Epidemiology.

J. Ongoing Research Projects

- District Cancer Registry, Kollam. (Funded by: NCRP-ICMR, Bangalore)
 - Principal Investigator: Dr. Aleyamma Mathew
- Population Based Cancer Registry. (Funded by: NCRP-ICMR, Bangalore)
 - Principal Investigator: Dr. Aleyamma Mathew
- Development of an atlas of cancer in India. (Funded by: NCRP-(CMR, Bangalore)
 - Principal Investigator: Dr. Aleyamma Mathew
- Hospital Based Cancer Registry, Regional Cancer Centre, Thiruvananthapuram (Partially funded by: Indian Council of Medical Research, New Delhi).
 - Principal Investigator: Dr. Aleyamma Mathew
- Rural Cancer Registry, Thiruvananthapuram, Kazhakuttam and Chirayinkil community development blocks. (Funded by: Finnish, Cancer Society, Finland).
 - Principal Investigator: Dr. Aleyamma Mathew.
- Thiruvananthapuram Corporation Cancer Control Programme. (Funded by: Thiruvananthapuram Corporation). Co-investigator: Dr. Kalavathy, M.C.
- Pattern of care and survival studies on cancers of cervix, female

breast and head and neck. (Funded by: Indian Council of Medical Research, New Delhi).

Co-investigator: Dr. Aleyamma Mathew

- District Cancer Control Programme, Thiruvananthapuram (Funded by: NCCP, Government of India).
- Feasibility study for a prospective life-style and dietary cohort in Thiruvananthapuram.

Part A: Logistics of conducting a cohort study;

Part B: Detailed characterization of the Indian diet and

Part C: Evaluation of follow-up and end-point ascertainment for conducting a cohort study.

(Funded by: National Cancer Institute, USA)

Principal Investigator, Dr. Aleyamma Mathew

- Risk factors of Bladder & Kidney Cancers: A case-control study. Principal Investigator: Dr. Aleyamma Mathew.
- Nutritional factors and risk of breast cancer: a case-control study.

Principal Investigator, Dr. Aleyamma Mathew.

2. Cancer statistics summary report of Hospital Cancer Registry (HBCR) of RCC (2006)

A total of 9441cancer patients (4834 males and 4607 females) were reported in 2006. The commonest site of cancer was oral cavity (17.0%) and lung (12.2%) among males. In females, the commonest sites were breast (30.1%) and thyroid cancer (11.0%) (Tables 10-13).

Table 10: Number (#) and relative proportion (%) of ten leading sites of cancer (Male) 2006

ICD-10	Site	#	%	Rank
C00-06	Oral cavity	817	17.0	1
C09-10, C12-14	Pharynx	256	5.3	5_
C15	Oesophagus	218	4.5	8
C16	Stomach	229	4.7	6
C32	Larynx	223	4.6	7
C33- C34	Lung	591	12.2	2
C70- C72	Brain & nervous system	168	3.5	9_
C73	Thyroid	. 163	3.4	10

C81-C85 & C96	Lymphoma	284	5.9	4
C91- C95	Leukaemia	383	7.9	3
	Totai	3332	66.9	•
C00-C96	All Sites	4834		

Table 11: Number (#) and proportion (%) of ten leading sites of cancer (Female) 2006

ICD-10	Site Cancer (Female)	#	. %	Rank
				
C00-08	Oral cavity	387	8.4	- 4
C33- C34	Lung	108	2.3	10
C50	Breast	1386	30.1	1
C53	Cervix uteri	473	. 10.3	3
C54	Corpus uteri	130	2.8	8
C56	Ovary .	213	4.7	6
C70- C72	Brain & nervous system	114	2.5	9
C73	Thyrold	509	11.0	2
C81-C85 &	Lymphoma			-
C96	- сунпринина	155	3.4	- 1
C91- C95	Leukaemia	256	5.6	5
can coc	Total	3736	81.1	
C00-C96	All Sites	4607		

Table 12. System-wise distribution (%) of patients (2006)

Male %	<u> </u>	Female %
3.5	Brain & Nervous System	2.5
23.0	Oral Cavity & Pharynx	. 9.6
3.4	Thyroid	11.0
17.6	Respiratory System	3.0
0.2	Breast	30.1
9.2	Esophagus & Stomach	2.5
9.3	Other Digestive Organs	. 4.7

Male :4834	Total : 9441	Female:4807
6.2	. All Others	4.0
5.9	Lymphoma	3.4
10.0	Leukemia & Myeloma	7.0
4.6	Bone, Coπnitissue & Skin	2.7
4.3	Reproductive System	16.8
2.9	Unnary tract	0.8

Table 13. Number & relative proportion of Cancer sites by gender (2006)

	1.		Males		les	fotal	
ICD-10	Site	# 1	%	#	%	#	0.33 0.70 4.46 1.78 0.71 0.71 4.08 0.46 0.41 1.01
C30	Па .	17	0.4	14	0.3	31	0.33
C01	Base of longue	63	1.3	3	0.1	66	0.70
C02	Tangue	287	5.9	134	2.9	421	4.46
C03	Gum	97	20	71	15	138	1.78
Ç04	Cloor of mouth	57	1.2	10	0.2	67	0.71
C05	Palate	· 54	1.1	12	0.3	56	, 0.7
C06	Other mouth.	242	-5.0	143	9.1	385	4.08
G07	Parotid gland	23	0.5	20	0,4	43	0.46
C08	Salivary gland	7	0.1	3	0.1	10	0.11
C09	Torsil	35	0.7	4	0.1	39	0.41
C10	Oropharynx	90	1.8	- 5	0.1	95	
G11	Nasopharynx	37	8.0	13	0,3		0.53
C12	Pyriform sinus	67	1.4	7	0.2		0.78
C13	Нурорпагулх	60	1.2		0.5	+	0.59
C14	Pharyrx unspecified	4	0.1	0	0.0		0.04
C*5	Oesophagus	218	4.5		1.3		2.96
C16	Stomach	229	4.7	_52			2,98
C17	Smail intestine	12	0.2		_		
C18	Colon	73	1.5				
C19	Rectosigmoid colon	20	0.4		_		
C20	Rectum	137	2.8				2.40
C21:	Artus & anal canz	12					C.19
C22	Live: "	109	2.3	31 21	0.9	130	1.38

C23								
C24 Other billiary fract 12 0.2 5 0.1 17 9.18 C25 Pancreas 64 1.3 34 0.7 98 1.04 C26 Cher digestive organs 1 0.0 0.0 0.03 1 0.01 C30 Nasal cavify 10 0.2 3 0.1 12 0.3 56 0.38 C31 Accessory sinus 24 0.5 12 0.3 56 0.38 C32 Larynx 223 4.6 9 0.2 232 2.48 C33 Trachea 1 0.0 1 0.0 2 0.02 C34 Lung 590 12.2 107 2.3 697 7.38 C37 Thymus 1 0.0 0 0 1 0.01 C38 Feart & mediastinum 3 0.1 5 0.1 8 0.08 C40 Bone of limos	C23	Galf bladder	Ð	0.2	9			0.19
C26					5		17	
C26 Other digestive organs 1 0.0 C 0.3 1 0.01 C30 Nasal cavity 10 0.2 3 0.1 13 0.74 C31 Accessory sinus 24 0.5 12 0.3 36 0.38 C32 Larytix 223 4.6 9 0.2 232 245 C33 Trachea 1 0.0 1 0.0 20.02 232 245 C34 Lurg 590 12.2 107 2.3 697 7.38 C37 Thymus 1 0.0 0 0.0 1 0.01 C37 Thymus 1 0.0 0 0.0 1 0.01 C38 Heart & mediastinum 3 0.1 5 9.1 8 0.08 C40 Bone of ilmos 43 1.0 23 9.5 89 0.73 C41 Orber bone 18 0.4		Pancreas					98	1.04
C30	_	Other digestive organs	<u> </u>			0.3		
C31 Accessory sinus 24 0.5 12 0.3 36 0.38 C32 Larynx 223 4.6 9 0.2 232 2.46 C33 Trachea 1 0.6 1 0.0 2 0.02 C34 Lurg 590 12.2 107 2.3 697 7.38 C37 Thymus 1 0.0 0 0.0 1 0.01 C38 Feart & mediastinum 3 0.0 5 0.1 8 0.08 C40 Bone of ilmos 43 1.0 23 0.5 89 0.73 C41 Other bone 18 6.4 7 0.2 25 0.26 C43 Skith melanoma 20 0.4 17 0.4 37 0.39 C44 Skith orbin 70 1.4 34 0.7 104 1.10 C47 Peripherai nervous system 1 0.0 <t< td=""><td></td><td>Nasal cavity</td><td><u> </u></td><td></td><td></td><td></td><td></td><td></td></t<>		Nasal cavity	<u> </u>					
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C44 Other bone 18 6.4 7 0.2 25 0.26 C43 Skin melanoma 20 0.4 17 0.4 37 0.39 C44 Skin other 70 1.4 34 0.7 104 1.10 C47 Peripheral nervous system 1 0.0 3 0.0 1 0.01 C48 Rotroperitoneum 14 0.3 5 0.1 20 0.21 C49 Connective tissue 68 1.4 45 1.0 113 1.23 C50 Breast 8 0.2 1386 30.1 1394 14.80 C51 Vulva 14 0.3 14 0.15 C51 Vulva 14 0.3 14 0.15 C52 Vagina 15 0.3 15 0.16 C53 Cervix uteri 473 10.3 473 5.01 C53 Jtorus unspecified <th< td=""><td>C38</td><td></td><td></td><td>0.1</td><td></td><td></td><td></td><td></td></th<>	C38			0.1				
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C53 Cervix uteri 473 10.3 473 5.01 C54 Body utorus 130 2.8 130 1.38 C55 Utorus unspecified 9 3.2 9 0.10 C56 Ovary 218 4.7 218 2.31 C57 Other genital organ 5 0.1 5 3.05 C58 Placenta 1 0.0 1 3.01 C60 Penls 34 0.7 34 0.36 C61 Prostate 143 3.0 143 1.51 C62 Tests 28 0.6 28 0.30 C63 Other genital organs 3 0.1 3 0.03 C64 Kidney 53 1.1 22 0.5 75 0.79 C65 Renal pelvis 1 0.0 2 0.02 0.02 C66 Ureter 1 0.0 1 0.0 2		Vulva			14	0.3	14	0.15
C54 Body atorus 130 2.8 130 1.38 C55 Utorus unspecified 9 3.2 9 0.10 C56 Ovary 218 4.7 218 2.3: C57 Other genital organ 5 0.1 5 3.05 C58 Placenta 1 0.0 1 3.01 C60 Penls 34 0.7 34 0.36 C61 Prostate 143 3.0 143 1.51 C62 Test:s 28 0.6 28 0.30 C63 Other genital organs 3 0.1 3 0.03 C64 Kidney 53 1.1 22 0.5 75 0.79 C65 Renal pelvis 1 0.0 0 0.0 1 0.01 C66 Urder 1 0.0 0 0.0 1 0.0 C67 Urinary blacder 87 1.8 <td< td=""><td></td><td></td><td></td><td></td><td>15</td><td>0.3</td><td>15</td><td></td></td<>					15	0.3	15	
C55 Utorus unspecified 9 0.2 9 0.10 C56 Ovary 218 4.7 218 2.3: C57 Other genital organ 5 0.1 5 0.05 C58 Placenta 1 0.0 1 0.01 C60 Pents 34 0.7 34 0.36 C61 Prostate 143 3.0 143 1.51 C62 Test:s 28 0.6 28 0.30 C63 Other genital organs 3 0.1 3 0.03 C64 Kidney 53 1.1 22 0.5 75 0.79 C65 Renal pelvis 1 0.0 0 0.0 1 0.01 C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary blacder 87 1.8 13 0.3 100 1.06 C69 Eyo 5					473		473	
C56 Ovary 218 4.7 218 2.3: C57 Other genital organ 5 0.1 5 0.05 C58 Placenta 1 0.0 1 0.01 C60 Penls 34 0.7 34 0.36 C61 Prostate 143 3.0 143 1.51 C62 Test:s 28 0.6 28 0.30 C63 Other genital organs 3 0.1 3 0.03 C64 Kidney 53 1.1 22 0.5 75 0.7s C65 Renal pelvis 1 0.0 0 0 1 0.01 C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary blacder 87 1.8 13 0.3 103 1.06 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3ra	C54	Body utorus			130		, 130	, 1.38
C57 Other genital organ 5 0.1 5 0.05 C58 Placenta 1 0.0 1 0.01 C60 Penls 34 0.7 34 0.36 C61 Prostate 143 3.0 143 1.51 C62 Tests 28 0.6 28 0.30 C63 Other genital organs 3 0.1 3 0.03 C64 Kidney 53 1.1 22 0.5 75 0.79 C65 Renal pelvis 1 0.0 0 0.0 1 0.01 C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary blacder 87 1.8 13 0.3 103 1.06 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3rain 160 3.3 412 2.4 272 2.88 </td <td>C55</td> <td>Uterus unspecified</td> <td></td> <td></td> <td>. 9</td> <td>0.2</td> <td>9</td> <td>0.10</td>	C55	Uterus unspecified			. 9	0.2	9	0.10
C58 Placenta 1 0.0 1 0.01 C6C PenIs 34 0.7 34 0.36 C61 Prostate 143 3.0 143 1.51 C62 Tests 28 0.6 28 0.30 C63 Other genital organs 3 0.1 3 0.03 C64 Kidney 53 1.1 22 0.5 75 0.79 C65 Renal pelvis 1 0.0 0 0.0 1 0.01 C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary blacder 87 1.8 13 0,3 103 1.08 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3rain 160 3.3 112 2.4 272 2.88	C56				218	4.7	218	1 2,31
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C63 Other genital organs 3 0.1 3 0.03 C64 Kidney 53 1.1 22 0.5 75 0.7s C65 Renal pelvis 1 0.0 0.0 0.0 1 0.01 C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary blacder 87 1.8 13 0.3 100 1.06 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3rain 160 3.3 412 2.4 272 2.88	_	Prostate	143	3.0			· 143	1.51
C64 Kidney 53 1.1 22 0.5 75 0.79 G65 Renal pelvis 1 0.0 0 0.0 1 0.01 C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary blacder 87 1.8 13 0.3 100 1.06 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3rain 160 3.3 412 2.4 272 2.88		Test:s	28	0.6			28	0.30
C65 Renal pelvis 1 0.0 0.0 0.0 1 0.01 C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary blacder 87 1.8 13 0.3 100 1.06 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3rain 160 3.3 412 2.4 272 2.88		Other genital organs	3			.	3	0.03
C66 Ureter 1 0.0 1 0.0 2 0.02 C67 Urinary bladder 87 1.8 13 0.3 103 1.06 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3rain 160 3.3 112 2.4 272 2.88		Kidney'	53	5.15	22	0.5	75	0.79
C67 Urinary blacder 87 1.8 13 0.3 103 1.06 C69 Eyo 5 0.1 5 0.1 10 0.11 C71 Brain 160 3.3 112 2.4 272 2.88			1	0.0	. 0	0.0	1	0.01
C69 Eyo 5 0.1 5 0.1 10 0.11 C71 3rain 160 3.3 112 2.4 272 2.88		Urete:	1	0.0	1	0.0	2	0.02
C71 Brain 180 3.3 112 2.4 272 2.88			87	1.8	13	0,3	100	1.08
C71 Brain 160 3.3 112 2.4 272 2.88		Ξyο	5	0.1	. 5	0.1	. 10	. 0.11
C72 Spina cord 8 0.2 2 0.0 10 3.11			160	3.3	112	2.4	272	2.88
	C72	Spina cord	8		· 2	0.0		2.11

070 -	Thyrologiand .	·163	3.4	509	11,0	572	7.12
C74	Agrenal gizad	. 11	0.2	9	02	20	0.24
C75	Other enuggrine gland	21	0.2	3	0,1	5	0.05
C78	I.I defined sites	0	0.0	. 1	0.0	- 1	0.01
G77	Secondary ymphriodo	110	2.3	34	07]	144	1.53
C78	Secondary respiratory & digestive	35	0.7	43	3,9	78	0.83
C79	Secondary other sites	49	1.0	35	0.8	84	0.89
C80	Primary urknown	43	0.3	26	0,6	69	0.73
C81	Hodgkins disease	- 64	1.3	41	0,9	105	3.11
C82	Follou ar NHL	32	3.7	26	0.3	58	0.61
C83	Diffuse NHL	134	2.8	63	1.4	197	2.09
C84	T-cell lymphoma	20	0.4	9	0,2	. 29	0.31
C85	Other NEL .	28	0.6	(1	0.2	39	0.41
Ç90	Vijit pie myeloma	98	2.0	67	1.5	185	î.75
C91	Loukernia, ymphoid	162	3.4	97	2.1	259	2,74
092	Loukemla, myeloid	173	3.6	4:1	2.4	284	3.01
C93	Loukemia, monocytic	23	0.5	30	0.7	53	0.56
C94	Other specified loukeemia	2	0.0	0	0.0		2 32
C95	Laukemia Unspecified	23	3,5	18	0.4		0.43
C96	Other lymphoid neoplasm	9	0.1	5	0.1	11	0.12
	All sites	4934	100.0	4607	100.0	9441	100.00

3. Population Based Cancer Registry (PBCR),

Thiruyananthapuram Taluk (2005)

The PBCR provided data on cancer incidence and mortality covering a population of nearly 1.1 million in the Thiruvananthapuram Corporation (urban population) and adjoining 10 panchayats (rural population). The ten leading cancer sites in the Thiruvananthapuram taluk are given in Tables 14 & 15.

Table 14: Leading cancer sites: Thiruvananthapuram Taluk - Urban (2005)

Rank		Male (n=429)			Female (n= 467	<u>') :</u>
	ICD-10	Site	# (%)	ICD-10	Site	# (%)
1	C00-08	Oral cavity	56 (13.05)	C50	Breast	186 <u>(35.5)</u>
	C33-34	Lung	45 (10.72)	C53	Cervix utori	38 (8.1)
${}$	C61	∃ Prostate	29 (6.76)	CC0-06	Oral cavity	23 (6.2)
4	C32	Larynx	25 (5.83)	.C73	Thyroid	27 (5 5)

5	C9, 10,12-	Pharynx	22 (5,13)	C56	Ovary	21 (4,5)
· [:	14	1 . 1	40.14.00	001		
· · · · · · · · · · · · · · · · · · ·	091-095	Letikemia	18 (4 20)	~	Corpus uten	18 (3.9)
<u>-</u>	016	Stomach	15 (3.50)	l	Lung	13 (2.8)
j - δ	C81-C85,	ELymphoma !	15 (3.50)	C81-85,	Lymphoma	12 (2.5)
_	C96			C96	· .	
	C15	ณีsophagus	14 (3.26)	C70-C72	Brain & nerves	11 (2.4)
10	C70-C72	Brain & nerves	13 (3.03)	091-095	Leukernia	10 (2.1)

Table 15; Leading cancer sites; Thirtryananthapuram Taluk -Rural (2005)

Rank	Ī	Male (n≖179)		Female (n=187)				
!	ICD-10	Site	# (%)	ICD-10	Site	# (%)		
[1	C81-C85, C95	Lymphoma	27 (15.1)	C50	Broast	50 (26 7)		
2	C33-34	Lung	26 (14.5)	C53	Cervix uterl	26 (13.9)		
3 :	COO 06	Oral cavity	22 (12.3)	C00 06	Oral cavity	14 (7.5)		
4	C9 10, 12-14	Pharynx	10 (5.6)	C73	Thyroid	. 11 (5.9)		
5	C18	Stomach	9 (5.3)	C91-C95	Leukemia	. 9 (4.8)		
ි ර	C70-C72	Brain& nerves	9 (5.0)	C56	Overy	8 (4.3)		
7	C15	Esophagus	8 (4.5)	C81- C85,C98	_ymphema	7 (3.7)		
Ø	C32	Larynx	7 (3.9)	C54	Corpus uten	4 (2.1)		
9.	C21-C95	Leukemia	6 (3.4)	C33-34	Lung	2(1.1)		
ΥC .	C81	Prostato	4 (2.2)	070-072	Brain & nerves	2(1.1)		

4. District Cancer Registry, Thiruvananthapuram

The district cancer registry, Thiruvananthapuram is implemented to evaluate the District Cancer Control Programme (DCCP), Thiruvananthapuram. The cancer registration area covers the entire-Thiruvananthapuram district. The total population of the district is more than 32 lakhs (34% urban & 66% rural). An active case finding methodology was adopted for recording cancer cases in Thiruvananthapuram district by visiting the hospitals, laboratories and death registration offices in the entire district and record the necessary information using a standard proforma. All cases diagnosed from January 2005 onwards were collected for estimating annual cancer incidence and mortality rates.

5. Thirtuvarianthapuram Corporation Cancer Control Programme Cancer awareness classes and cancer detection camps in the above area were conducted regularly. Conducted 19 cancer awareness and early detection training programmes for health workers and 19 awareness

early detection training programmes for health workers and 19 awareness programmes for common public. House-to-house visits were conducted by the trained volunteers and they had motivated (Table 16).

Table 16. Cancer detection camps in Thiruvananthapuram Corporation

$\neg \uparrow$		Breast ca		Cervical cancer screening			Oral cancer screening		
SI No	Place & Date	Scree- ned	Ca.	Scree- nad	Pro-ca ncers	. Ca.	Scree- ned	Pre- can ters	Ca.
	Sasthamangalam 05/04/07	290	1	25	0	0	290	8	0
-: 2	Nernom 22/04/07	130	0	20	0		130	4	1
3	Kuravankenam 12/05/07	125	0.	28	4	0	125	3 	0
— <u>:</u> -	Poojappura 27/05/07	146		25	. 1	0	146	4	Ű
5	Pallichal 09/06/07	215	. 1	45	0	1	2:5	6	1
6	Pattom 24/05/07	202	0	38	0	l 0 ⊦.——	202	3	0
7	Kannamthura 27/07/07	290	. 1	23	2	a	290	13	
8	Valiyathura 29/07/07	212	0	65	. 6	0	212	15	т-
9		53	0	19	3	. C	L	3	└
10	+	471	1	• 17		0	+ 171	17	
11	· 	210	Ç	26	3		210	18	
12		53	, (28			ļ.———		-1
13	<u> </u>	130	(32	2	1_1	130	<u> </u>	<u> </u> -
1.4	Katakambaily	90	 :	26	3 · · · · · · · · · · · · · · · · · ·	.]_0	90	! 4 <u> </u>	

15		124	1	43	. 2	1	124	3	. 0
16	Muttaca 25/11/07	131	0	30	í	0	131	2	0
17	Jagatiny 15/12/07	33	٥	16	0	ļo	. 33	3	0
18	Thrikkannapuram . 20/12/07	82	ŕ	.19	0	0	82	2	1
19	Karimatom colony 22/12/07	32	٥	20	. 1	í	32	0	0
20	Valiyasala 30/12/07	211	0-	46	0	, 1	211	8	2
21	Kalady 17/01/08	39	. 0	16	.0	ō	39	. 0	0
22	Poonkulam 18/10/07	38	0	3.0	. 0	็อ	38	ō	0
23	Poundukadavu 20/01/08	225	1	48	. 2	1	225,	3	1
24	Pappanamcode 08/02/08	188	0	42	1	0	· 168	2	.0
25	Karumom 10/02/08	154	ſ	31	G	g:	· · 154	3	0
26	Pongummoodu 24/02/08	29	D	. 08	1	.0.	. 29.	. 1	0
27	GH Peroorkkada 01/03/08	86	a	46	1	1	. 86	1	П
	Pattom 02/03/08	. 98	ĵ	14	0	. 0	98	<u> </u>	0
11. 24.1	Pappanamoode 30/03/08	78	. 0	31			. 78	2	o'

5a. Papsmear Screening Programme in a Peripheral hospital

Cervical cancer screening is being conducted twice a week in a peripheral government hospital in Thiruvananthapuram Corporation (Women & Children Hospital, Thycaudu). A total of 1285 Pap-smears were collected from the above hospital during the period under reported. A total of 8 high-grade squamous intra-epithelial lesions were obtained.

6. District Cancer Contro! Programme, Thiruvananthapuram (also include Kollam & Pathanamthitta districts) : summary of the report (2007-2008)

During the period under report, a total of 284 medical/dental doctors, 9275 health workers/ volunteers and 2262 High School students from the districts of Thiruvananthapuram, Kollam and Pathanamthitta were

trained under this programme. A total of 114 cancer detection camps (93 in Thiruvananthapuram and 21 in Kollam) were conducted. A total of 235 cancer cases were obtained from the above three districts through cancer detection camps/ early cancer detection clinics.

In Thiruvananthapuram district, 6647 men and women were screened for oral cancer (69 oral cancer cases, 262 pre-cancerous lesions of oral cavity (mainly include leukoplakia and submucous fibrosis)), 6820 . women were screened for breast cancer (67 breast cancer cases, 743 benign breast lesions (include fibroadenoma, fibrocystic disease and fibroadenosis)), and 5773 women were screened for cervix cancer (24 cervix cancer cases and 430 pre-cancerous lesions of cervix (low and high-grade squamous intra-epithelial lesions, atypical squamous cells [ASCUS]) and a total of 10 other cancer sites were detected during the period under report. In Kollam district, 5113 men and women were screened for oral cancer (20 oral cancer cases, 222 pre-cancerous lesions of oral cavity), 664 women were screened for breast cancer (21 breast cancer cases, 131 benign breast lesions) and 4243 women were screened for cervix cancer (9 cervix cancer cases and 140 pre-cancerous lesions of cervix during the period under report. In Pathanamthitta district, 58 men and women were screened for oral cancer (4 oral cancer cases, 17 pre-cancerous lesions of oral cavity), 57 women were screened for breast cancer (5 breast cancer cases, 22 benign breast lesions), and 4D women were screened for cervix cancer 6 cervix cancer cases and 20 pre-cancerous lesions of cervix at the Regional Cancer Centre, Thiruvananthapuram during the period under report.

7. Cancer Registry Reports published

- Hospital Based Cancer Registry, Regional Cancer Centre, Thiruvananthapuram, Annual Report for the year 2005, Published in August 2007.
- ii. Population Based Cancer Registry Regional Cancer Centre. Thiruvananthapuram, Annual Report for the year 2005, Published in October 2007.

8. Ongoing doctoral programmes

Research Topics

- Risk factors of breast cancer: A multivariate analysis.
- Risk estimates of bladder cancer: multiple logistic regression model.
- Risk factors of kidney cancer, a matched case control study.

4. Performance status and quality of life of ovarian cancer patients

Merits, conferences/workshops attended, papers presented, talks delivered

Dr. Aleyamma Mathew

Chairman, MSc. Bio-statistics Core-Committee, Mahatma Gandhi University, Kottayam.

Research Guide in Epidemiology, University of Kerala, Trivandrum.

Research Guide in Epidemiology, Mahatma Gandhi University, Kottayam.

External Examiner and dissertation referee in MSc Bio-statistics, Mahatma Gandhi University, Kottayam.

Ph D thesis examiner, International Institute for Population Sciences (Deemed university), Mumbai.

Reviewer, Indian Journal of Cancer, World Journal of Surgical Oncology, Journal of Gastro Enterology & Hepatology and Statistics in Medicine. Member, Doctoral Advisory Committee, Achutha Menon Centre for Health Science Studies, Sree Chitra Tirunal Institute for Medical Sciences and Technology, Thiruvananthapuram.

Dr. Aleyamma Mathew, Dr. Preethi Sara George

40th Annual Conference of the Society of Statistics, Computer and Applications, St. Thomas College, Pala, Kottayam, 16 - 18 November 2007.

Invited talk: Aleyamma Mathew. 'Time-trend and age-period-cohort modeling of breast cancer incidence in Trivandrum'.

Preethi Sara George. 'Extension of Cox Proportional Hazard Models'. 25th Annual National conference of Indian Society of Medical Statistics (ISMS), Manipal University. 29 November- 1 December 2007.

Paper presented: Aleyamma Mathew. 'Time trend and age - period-cohort imodeling of cervix cancer incidence in Trivandrum'.

Preethi Sara George. 'Some statistical models on recurrent data'.

Dr. Aleyamma Mathew, Dr. Kalavathy M.C.

National Conference on 'Emerging Issues in Public Health'. Sree Chitra Tirunal Institute for Medical Sciences and Technology, Thiruvananthapuram. 11 – 13 January 2008.

Papers presented: Aleyamma Mathew. 'Physical activity and lanthropometric factors and breast cancer risk: a case-control study in south India'.

Kalavathy, MC. 'Papsmear findings among pre and post-menopausal women attending a maternity hospital: a comparative study.

COMMUNITY ONCOLOGY

Dr. Ramani S. Wesley

Professor & Head

Dr. Gigi Thomas

Associate Professor Lecturer

Dr. R.Jayakrishnan Mr. C.Sreekumar

Social Investigator Gr.I

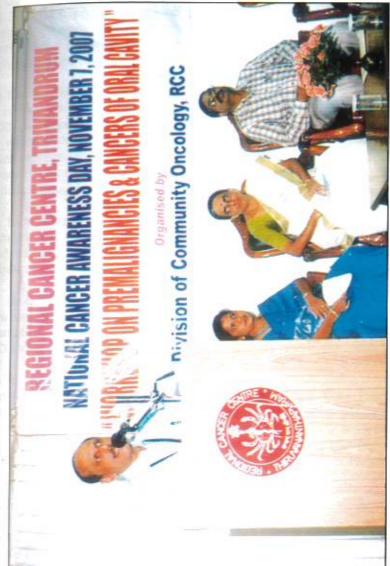
The major activities of this division were centered around human resource development, primary and secondary prevention of common cancers through cancer education and detection camps and early detection clinic functioning in RCC.

Human Resource Development

- Trainer Trainee Programmes: Through 80 programmes, 7830 trainers were educated as given in Table 17.
- b) Cancer Awareness: Through 87 cancer education programmes 8274 persons were trained using LCD projection of slides
- c) International School of Colposcopy: Through video conferences 242 gynecologists were trained in colposcopy, cryotherapy, LEEP, VIA, VILI. 26 gynecologists were given one week hands on training at RCC. 30 general practitioners, 510 nurses, 24 health workers and 102 paramedicals were given one day orientation programme at RCC.

Table 17: Details of Trainer Trainee programmes

SI. No	Categories	No. of programmes	No.trained
1	Nurses	13	510
2.	Doctors – Modern Medicine Doctors-Homeopathy	2	200 175
3.	Dentists/Dental Students	2	170
4	Community Volunteers	2	264
5	Paramedicals(BSc MLT)	6	102
6	Health Supervisors and workers	1	74
7	Student representatives & teachers	32	3361
B	Bank/Factory/ Technopark/VSSC	5	- 1106
9	Laypublic and NGOs	13	1894
10	Tribal volunteers	- 4	149
10	Total	80	7830



2 Generation and distribution of health education materials

a) 30 stides, photo albums on oral precancers, oral cancers and Keolposcopy were prepared for training. The health education materials generated during previous years were distributed among community yolunteers and other target groups.

b) Training Manuals, Modules and Atlas

in connection with the National Cancer Awareness Day on November 7th 2007, a workshop on oral premalignancies and cancers was conducted in which 135 dental professionals participated. A training manual twas prepared for training the doctors and dentists in early detection of precancerous lesions, benign lesions and cancers of oral cavity. Two articles in magazines were brought out.

3. Exhibitions

Fifteen exhibitions were conducted which were viewed by about three jakh people, the majority of whom were lay public, school teachers and students.

🕮 4. Health Mela

We have participated in health melas by conducting camps, distributing pamphlets, creating awareness through LCD projection and showing CD's with documentary.

5. Antitobacco programmes and campaigns

On May 31st 2007, in collaboration with IMA Trivandrum Branch and Regional Cancer Association, an open forum was organised in connection with World No Tobacco Day based on the current year's theme "Tobacco Free Youth". The Minister for Law and Parliamentary Affairs, Shri M. Vijayakumar had inaugurated the function at Regional Cancer Centre. The minister also inaugurated a new movement titled "Strategic Movement Against Rising Tobacco Threat" (SMART) during the function. After the inaugural function, a play on tobacco hazards was conducted by the students of Loyola College, Trivandrum followed by a magic show by Sri Abhin Raj. In continuation to the observance of World No Tobacco Day, 73 programmes were conducted in different parts of Kerala State through which 6350 persons were given awareness on tobacco hazards.

6. Conduct of clinics

- a) Early cancer detection clinic A total of 3123 persons with warning signals of cancer were evaluated. A total of 99 oral cancers, 52 breast cancers, 20 cervical cancers and 64 other cancers were detected, 366 oral precancerous lesions and 490 benign lesions of the breast and 102 cervical precancers were detected and kept under surveillance during this year.
- b) Dysplasia clinic Out of 366 cases of oral precancers, there were 184 leukoplakia, 182 Oral Sub Mucous Fibrosis and 236 patients had other benign oral lesions. Patients having Leukoplakia were treated by chemoprevention or by excision. Precancerous conditions like Oral Sub mucous Fibrosis and Erosive Lichen Planus were given medication and kept under close follow up.
- c) Colposcopy clinic 1886 colposcopies, 250 colpo directed biopsies, 1815 papsmears, 81 LEEP diathermic excisions and 2 cryotherapies were done for cervical precancers, 165 Low grade lesions, 39 high grade lesions (CIN 2&3) and 26 invasive cancers were detected through this clinic.
- **d) Breast screening clinic** Propagation of breast self examination and clinical evaluation of breast disease and referral for mammography were done for 542 patients.
- e) Tobacco Cessation Clinic In the current year 275 patients had undergone treatment in the Tobacco Cessation Clinic. Among the tobacco habitués, 81% were smokers, 12% were tobacco chewers and 7% had both the habits. They were given behavioral counseling and for patients with severe nicotine dependence. Nicotine Replacement Therapy was also given.

7. District Cancer Control Programme(DCCP)

The District Cancer Control Programme was started in April 2006 by the division of Cancer Epidemiology and Community Oncology. During this academic year, 62 cancer and anti tobacco awareness programmes were conducted for DCCP in Trivandrum and Kollam districts. Under the DCCP, 5445 subjects were screened last year. 32 cancer cases and 731 precancer cases were detected through community based screening programmes.

8. Peripheral Early Cancer Detection Programmes through ECDCs, and Village level comprehensive cancer control programmes

Early Cancer Detection Clinics (ECDC): The peripheral centres and candar centres were referring patients with precancers and cancers to the ECDC of RCC for confirmation of diagnosis, colposcopy, LEEP, cryotherapy etc. Technical guidance and assistance were also given for the nodal centres of RCC. The main stay of peripheral cancer detection programmes was through 78 cancer detection camps through which 8650 people were screened. 36 oral cancers, 12 breast cancers, 20 cervical cancers and 4 cancers of other sites were detected. 252 oral precancers, 180 cervical precancers and 192 other precancers were detected. A weekly cervical cancer detection clinic was conducted at Mangalapuram for the women residing in the control area of Breast Cancer Screening project. Out of 318 women screened, 29 cervical brecancers were detected.

Ongoing Research Projects

Evaluation of early detection of cervical cancer precursors by Visual Inspection with Eugol's Iodine (VILI), Visual Inspection with Acetic Acid (VIA) and magnified VIA (VIAM) in Kerala, India. (Funded by: IARC and Bill Gate Foundation through ACCP)

Principal Investigator, Dr. Ramani S, Wesley

Evaluation of 3 treatment methods (Cryotherapy, Loop Electrosurgical Excision Procedure (LEEP) in the management of precancers of cervix. (Funded by: IARC and Bill Gate Foundation through ACCP.)

Principal Investigator: Dr. Ramani S. Wesley

Satellite training centre for training health professionals in colposcopy, visual screening strategies, cryotherapy. (Funded by: IARC and Bill Gate Foundation through ACCP.)

Principal Investigator: Dr. Ramani S. Wesley

Cervical cancer screening using VIA, VII.I for women in the control area of Trivandrum Breast Cancer Screening Project. (Funded by: IARC, France)

Principal Investigator: Dr. Ramani S. Wesley

A Multi Centre Phase II Randomised Double – Blind Placebo controlled chemo prevention study to determine the clinical efficacy

- and safety of Curcumin in Oral Premalignant Lesions. (Funded by: Department of Biotechnology, Government of India) Co-investigator: Dr. Gigi Thomas
- Randomised controlled trial of oral cancer screening by mouth examination in Kerala, India. (Funded by: International Agency for Research on Cancer, France)
 Co-investigator: Dr. Gigi Thomas
- Estimation tobacco attributable mortality in Kerala, India. (Funded by: International Agency for Research on Cancer, France)
 Co-investigator: Dr. Gigi Thomas
- Organisation of a community-based cluster randomized controlled trial for the early detection of Breast Cancer, Thiruvananthapuram District. (Funded by: International Agency for Research on Cancer, France)
 Co-investigator: Dr. Glgi Thomas
- District Cancer Control Programme, Thiruvananthapuram. (Funded by: Ministry of Health & Family Welfare, Government of India) Co-investigator: Dr. Gigi Thomas
- Tobacco Cessation Centre Project. (Funded by: WHO Regional Office, New Delhi)
 Principal Investigator: Dr. R. Jayakrishnan
- Tobacco awareness programmes among high school / higher secondary school students of Pathanamthitta, Kerala State, (Funded by: District Cancer Centre Society, Kozhencheny) Principal Investigator; Dr. R. Jayakrishnan

TABLE 18. DETAILS OF CANCER DETECTION CAMPS

SI.				Total	Cancers		Precancers	
No:	Date	Place	Organized through	Screened	Oral	Officers	Oral	Cer vical
1	13/4/07	Vatť yporkavu	DCC2	54	-	0	1	4
, 2	20/4/07	Vazhuthaceud	DCCP	.132			. 5	.3
3	21/4/07	Venpakal	DCCP -	·60	v -	. 4	ţ	1
- 4	23/4/07	Psojappura .	Hindusthan Latex	105.	<u>.</u> -	. 0	2	7
5	25/4/07	Pangappara	DCSP	48	-	1	. 3	1

94

700								
Б	30/4/07	Arattopuzna	Kayamkulam Panchayath	122	2		15	. 3
ž.7	12/5/07	Puthenthops	DCCP	89	-		-	· · 2
	21/5/07	Vithura	DCCP	52	3		. 3	-
ğ: 9	25/5/07	Venpakai	DCCP	64	-	-	.6	1
10	28/5/07	Poonthura	DCCP	145	. '	-	15	. 2
£,11	3/8/07	Puthukurichi	DCCP	111	1	-	3	3
12	23/6/07	Peringaloor	Marihoma Sevika Sangham	200	. 1		4	3
.13	25/6/07	Peringammala	DCCP	38	1	1	-	
514 5	4/7/07	Vellanad	Tharkemma Memorial Samskerika Samithi	98	1	-	3	. 2
, 25	7/7/07	Pathukurichi	DCCP	82	_ 1	1	3	2
16	11/7/07	Chitharaa	Chithara Panchayath	134	1	-	δ	8
17	13/7/07	Perumpa- zhuthdor	DCCP ·	33	-		. 1	,
18	14/7/07	Venpakal	DCCP	38	1	-	13	. 1
<u>419</u>	25/7/07	Balaramapuram	DCCP	119	,	-	-	. 6
[*] 20	27 <i>171</i> 07	Palakkad	Tribal Project	108	-	2.	10	. 2
21	28/7/07	Palakkad	Tribal Project	70	-	-	4	· 1
22	28/7/07	Ma:ayinkil	DCCP	13	_	-		-]
23	30/7/07	Palakkad	Tribal Project	31	+ 2	-	7	3.
24	4/8/07	Kachanj	DCCP	196		-	4	4
25	8/9/07	Neyyardam	Marthoma Sevika Sangham	110	-	`, <u>.</u>	2	6
26	15/9/07	Vamanapuram,	900 9	55	٠ -	-	2	
-27	19/9/07	Vellarada	DCCP	14		-	-	1
28	28/9/07	Adichanallogr	Adichanalloor Panchayath	37	ı.		-	-
29	1/ <u>1</u> 0/07	Palakkati .	Tribal Project	189		-	8	. 2
 -	8/10/07	Aruvikkalra .	DOCP .	137	,		3	: 3
31	15/10/07	Nedumangad	DCCP :	119		-	: 7	4

32	17/10/07	Akku am	Airforce	126	2		2	
-	19/10/07	Vanamboof	DCCP	78	-		10	14
34	 	CHC Akkulam	Airforce	85		-	 -	<u> </u>
35	 	·		· · · ·			1 1	3
36		+	DCCP	50	-	-	2	
<u> </u>		Kulathupozha	DCCP -	140	. 2		5	5
37		Valiyaka'ungu	DCCP	43		-	<u> </u>	
38	 	Vithura	DCCP .	18	1	-	2	
39		Edamala	DCCP	56	<u> </u>		3	2
40		Vamanapuram	DCCP	92	0		2	13
41	26/11/07	Mylem .	DCCP	117	1	-	2	
	30/11/07	Kattaxkada	DCCP	. 151	-	-	-	3
43	3/12/07	Palode	DCCP	99	-	-	3	1
44	5/12/07	Sroekariam	DCCP	45	-	-		2
45	8/12/07	Killmandor	DCCP	-223	-		11:	2
48	14/12/07	Konniyoar	DCCP	117:	1			
47	17/12/07	Neyyatinkara	DCCP	63		-		
48	22/12/07	Undancode	DCCP	93	-			 i
49	29/12/07	Vavvakavu	DCCP	· 56	-	-	3	3
50	14/1/08	Valiyavila	DCC.P	79	-		- 1	3
51	21/1/08	Mariyapuram	DCCP	32:	-			3
52	23/1/08	Karamana .	NSS Karayogam	117	1	 -	. 5	5
53	25/1/08	Bharathanoor	Kerala Mahila Samakya Society	144	. 2	-	4	4
54	27/1/08	Сћегри	Govt. of Kerala	40	- 1	-	2	
55	28/1/08	Cherpu	Govl. of Kerala	32	1		- 2	-
56	28/1/08	Mulliyavila	DCCP	131		-	-	2
57	15/2/08	Kallaor	200P	37	-		-	2
58	18/2/08	Neduvanvila	DCCP	40	-	<u> </u>		
59	20/2/08	Edavacode	DCCP	. 73	_			
60	23/2/08	Puthukurichl	DCCP	108	-1			
61	16/2/08	Puthaor	Cashew . Factory (C.F.)	654	_ 1		13	

96

62	21/2/08	Puthcor	Kareeora C.F.	254			. 5	-
63	25/2/08	Vattavila	0 007	87	-	-		. 3
64	27/2/08	ESI Percorkada	DCCD	88		-	-	2
85	28/2/08	Nilamel	Naseer C.F.	220	4.		9:	-
36	29/2/08	Parandoce	DCCP	52	-	-		-
57	5/3/08	Anchalumbodu	Kailas C.F.	327	-	-	7	-
68	7/3/08	Kalluvathukkal	Vaishnay C.F.	- 150	-	-	2	
69	.8/3/08	Thirumela	State Bank of Travancore	95	1	1	5	7
70	8/3/08	Kottiyam	Prakash C.F.	358	2	-	3:	
71	12/3/08	Aryanad .	DCCP	32	-	-	-	-
72	15/3/08	Neyyattinkara	DCCP	53	-	-	· -	
-73	19/3/08	Irichiyam	DCCP	48	1	,		1
74	24/3/08	Koliam	Kalakode PHC	135	-	-	-	9
75	25/3/08	Kundara	Govt, of Kerala	168	1	1	5	3
76	26/3/08	Kulappadam	Kalakkodo PHC	102		1	10	3
77	25/3/08	Paruthanppara	KSEDC	304	-	-	1,	
78	27/3/08	Umayanel cor	Sun Food, C.F.	285	1	-	9	
			TOTAL.	9650	36	13	252	180

TABLE 19 DETAILS OF CANCER AWARENESS PROGRAMMES. THROUGH COMMUNITY ONCOLOGY DIVISION

	SJ. Na	Dato	Place	Organised through	No. Atten- Ded	Type of participants
	1	94/04/97	RCC	RCG	12	Medical records students
		09/04/07	Peroorkada	Public Health Nurse Training Centre	24	Nursing students
L	3	9/4/07	R00	RCC	6	Nursing students
L	4	09/4/07.	RCC	RCC		Nurses
	5	1: 41	Upputhara	Tobacco - Cessation Clinic	47	Tribes
Ľ	6	11/4/07	Kattappana	· ·	24	Tribes
يوديا	. 7	12/4/07	Infosys, Technopark	Technopark	250	Software Engineers

<u></u>	8 16/4/07	RCC	TDD-10	·	
\vdash	 -	la C	DG:HS		Norses
	9. 24/4/07	Technopark	Technopark	300	Software Engineers
1	0 27/4/07	Punalur	Social Service Society	75	Laypublic
1	1 28/4/07	Technopark	Tordid, Technopark	204	Software engineers
1	2 11/5/05	RCC	Nursing Division RCC	30	BSc.Nursing students
\vdash	3 14/5/07	RCC	DGHS	25	INUISES
1	4 18/5/07	RCC	ROC	20	BSc Nursing Students
18	5 31/5/07	RCC	IMA and RCA and RCC	65	Members of FRA'i
16	9 31/5/07	RCC ·	MA, RCA and RCC	225	rtighschool & College stadants
	4/8/07	Thirumale	RCA	63	
	7/6/07	Kaudiar	Christ Nagar School	220	Studenis
19	9/8/07	Vamanapuram	Topacco Cessation Clinic		Laypubile
	19/6/07	RCC	Nursing Division, RCC	30	State Level Nurses
	24/6/07	Kozhloode	Tobacco Cessation Clinic	45	MSW students
	25/6/07	Kozh code	Tobacco Cossation Clinic	52	NSS volunteers
23	26/6/07	Koznicode .	Tobacco Cessation Clinic	85	College students
24	28/6/07	Kodunganoor	BV8 School Kodunganoor	ſ I	Students
	28/5/07	Kottayam	RCC		3,Sc MLT Students
	30/6/07	RCC	RCC		Nurses
-	5/7/07	Balaramapuram	RCA		H S Students
28	10/7/07	RCC	IDA .		Dontal Surgeons
29	17/7/07	RÓC	DGHS	90	State Love: Fead nurses
	21/7/07	RCC	Lisay Hospital	,,	B.Sc MLT students
	29/7/07	Kotlayam	MCF Kottayam		Gynecologists .
32	1/8/07	Vilavoc/koriam	ASRAYA	49 1	-sycublic
	6/08/07	RCC	DGHS	20.8	State Love! Nurses
		Kasargode	Tobacco Cessation Crinic		aypublic
35	17/08/07	Kasargode	Tobacco Cessation clinic		leachers .
					NAV IDIO

37 19/9/07 Assergade Tobacco Cessation Clinic 43 Students 38 24/09/07 RCC DGHS 25 State Level Flead nurses 40 11/9/07 Pathamamthitta Tobacco Cessation Clinic 124 h S Students 41 11/9/07 Pathamamthitta Tobacco Cessation Clinic 16 H S Students 42 12/9/07 Pathamamthitta Tobacco Cessation Clinic 106 H S Students 43 20/9/07 RCC DCCP 30 Staff nurses 44 21/9/07 RCC DCCP 30 Staff nurses 44 21/9/07 RCC SME Koltayam 20 Staff nurses 45 27/9/07 RCC SME Koltayam 20 Staff nurses 46 7/10/07 Trichur Gov. of Kerala 170 Laypublic 47 4/10/07 RCC DGHS 30 Senior Level Nurses 48 17/10/07 Akkulam Airforce 126 Staff 49 19/10/07 Kariavattom Kariavattom: University 126 Students 50 26/10/07 RCC Nursing Division, MCH 139 B.Sc Nursing students 51 30/10/07 RCC Nursing Division, RCC		<u> </u>	6 18/8/07	Kasargode	Topacco Cessation Clinic		ales I :
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	Ļ	67	19/12/07	Pathanam thi:ta	" .	60 /	1 S Students

-	68 21/12/	07 PTP Nagar	ASRAYA		76 ELITE womer
	69 1/1/08	, sondyam	Little Flower Hospital		12 B.Sc MLT Students
_	70 3/1/08	rangaman	SME Angamali		24 B.Sc MLT students
- 10	71 5/1/08	ESI Hospital	ESI		30 Doctors
	2 8/1/08	Angamali	SME Angamali		B.SC MLT
7	3 15/1/08	Trichur	Nirmala College	-	students
7	4 15/1/08	(Thumpumthura)	Tobacco Cessation Clinic	1(3 MSW Students High School students
7	5 15/1/08	Pathanamthitta (Maroor)		7	7 H S Students
76	6 16/1/08	Pathanamthitta (Kadambanad)	((*))	13	6 H S Students
77	16/1/08	Pathanamthitta (Mannady)	1		7 H S Students
-	31/1/08	Perumathura	Mahila Samakya Society	21:	Women
79	4/2/08	RCC	DGHS	20	volunteers Nurses
	6/2/08	Medical College Hospital, TVM	Nursing College	145	BSc Nursing
81	7/2/08	/BN, Technopark	Technopark	220	Students
82	12/2/0/8	Pathanamthitta (Parakode)	Tobacco Cessation Clinic, Community Oncology division		H S Students
83	13/2/08	Pathanamthitta (Kadamanitta)	9.65	85	High School
	13/2/08	Pathanamthitta (Mylapra)		92	Students High School
85	12/3/08	Kothamangalam	,	44	students
86	13/3/08	Pathanamthitta (Neriamangalam)		98500	Tribes Tribes
87	14/3/08		X.	50	High School Students
			TOTAL	8274	o loud to Ita

Merits, conferences / workshops attended, papers presented, talks

Dr. Ramani S. Wesley

Programmes through electronic media:

Kairali

Breast cancer and cervical cancer

Sri. M. Vijayakumar, Hon'ble Minister for Law at the inauguration of One month Anti tobacco campaign STRATEGIC MOVEMENT AGAINST RISING TOBACCO THREAT (SMART) 3/2 Sri. M. VIJAYAKUMAR (Hon. Minister for Lim & Prisonmentsy afters. Got of Neural to B

in connection with 'World No Tobacco Day' (31 May 2007)



Stage show (Anti-tobacco campaign) on 'World No Tobacco Day' (31 May 2007)

Amritha TV Boordarshan Sakhi Programme Kootukari Programme Panel discussion 2 programmes

n, Gigi Thomas

National Workshop on Oral Cancer, Kidwai Memorial Institute of Oricology & Govt. Dental College and Research Institute, Bangalore, 24 26 May 2007. (as invited speaker and faculty)

gon Annual Conference of Indian Academy of Oral Medicine and Radiology, Chennai, Tamil Nadu, 21-23 December 2007.

Paper presented: 'Tobacco associated oral lesions'.

oral Cancer Conference, Organised by Indian Dental Association, Thiruvananthapuram, 10 July 2007.

Paper presented: 'Mortality reduction in Oral Cancer: evidence based approach'.

Dr. R. Jayakrishnan

Talks aired in All India Radio and telecasted in Doordarshan in connection. With World No Tobacco Day, 31 May 2007.

§ 'World Assembly on Tobacco Counters Health' (WATCH), 2 – 5 Весембег 2007, New Delhi, India.

Paper presented: 'Tobacco use pattern and awareness on tobacco Registation among adolesent students in rural Kerala, India'.

National Conference ол Emerging Issues in Public Health. Sree Chitra Tirunal Institute for Medical Sciences and Technology, Thiruvananthapuram. 10 –13 January 2008.

Paper presented: 'Tobacco Dependence among the distinct tribal population in Kerala, India'.

6th National Tobacco Cessation Centres Meeting, Cancer Institute (WIA), Chennai: 11 – 12 October 2007.

Mr. Sreekumar C

CRETT fellowship for training, Arizona Cancer & Research Centre, United States, June 2007.

Resident Medical Officer

Dr. Prasanth, C.V.

Resident Medical Officer

Dr. Latha P.T.

Lecturer in Sociology

Mrs. Kumari Thankam

Nurse in Charge, Palliative Care

The Division of Palliative Care continued to have multifaceted activities carried out through its staff and volunteers. On January 30th 2008, one day CME titled 'End of Life issues and the role of the Team' was held. Rev Peter Speck and Patricia Atkinson from UK were the main speakers. Another CME, 'Challenges in Palliative Care' was held on 18th February 2008 and the main speaker was Dr. Robert Twycross, Emeritus Professor at Oxford. On May 16th 2007 the first oral morphine (capsule) manufacturing unit was inaugurated by the Hon. Health Minister.

World Palliative Care day was celebrated on 6th October 2007 and on this day a decorated vehicle was flagged off by the Health Minister carrying the Palliative Care message to different parts of the city. Tele-medicine link between the RCC and Pain and Palliative Care Centre Adimali was inaugurated on this day by the Health Minister.

The addition of a pneumatic compression pump has greatly boosted our lymphoedema services.

Table 20: Patients seen and ancillary supports

New	2836
Old	2030
	5010
Teleclinic with Adimali	40
Ancillary Supports	
Psycho-social support and Counseling	240
Breast Prosthesis provided	378

Regional Cancer Centre has been recognized as training centre by the Indian Association of Palliative Care for the Certificate Course in Palliative Care



Smt. P.K. Sreemathy Teacher, Hon'ble Minister for Health. (16 May 2007) Inauguration of Morphine Capsule manufacturing Unit by



"Santhwana Sandesa Yatra", the vehicle rally was flagged off by Smt. P.K. Sreemathy Teacher, Hon'ble Minister for Health on 'World Palliative Care Day' (6 October 2007)

Regional Cancer Centre has been authorized to carry out training Regional to carry out training peen authorized to carry out training

Merits, Conference/training attended

Cherian M. Koshy

reculty and Examiner, IAPC Certificate course. widyapeedam. February 2008.

aning programme for National faculty in Palliative Care, Bangalore. November 2007

aining programme for National faculty in Palliative Care. koznikkode, February 2008.

ត្រី P.T Letha

SW students trained garticipated as faculty for various in-service training programmes

Mrs. Kumari Thankam

Helen Passant Real Nursing Award , Cancer Relief India. 2007. Cancer Relief India Scholarship to participate in International Palliative Care Seminar, United Kingdom, May 2007

DENTAL CARE

Dr. Nalinakumari K.R. Assistant Professor

This division provides a variety of treatment modalities for the or health of cancer patients.

Clinical Activities

- 1. Minor surgical Procedures like oral biopsies.
- 2. Basic procedures like
 - a). Oral prophylaxis (scaling)
 - b). Conservative therapy
 - c). Dental extractions
 - d). Occlusal adjustments
- Therapeutic management of pre cancerous oral lesions. 4. Management of osteoradionecrosis
- 5. Pre and Post radiation care of teeth including neutral Fluoride
- 6. Reconstructive procedures like construction of maxillofacial
- Management of oral problems of patients undergoing chemotherapy like utcers, spontaneous bleeding, toothache, etc
- 8. Management of temperomandibular problems and trismus.

Patients attended

Total No of patients seen		
No. of post radiation	•	2115
No. of post radiation care patients No. of post radiation care new cases No. of scaling done		644 1551
No. of scaling done No. of Maxillofacial prosthesis		367
Prosthesis		29 12

Pre & post radiation care of teeth.

In the pre-radiation care we try to eliminate all the conditions such as caries tooth, root stumps, poor oral hygiene etc. within the oral cavity which are liable to pose a problem during the next 5-10 years after radiation therapy especially in the head & neck region. This includes

adures like oral prophylaxis, conservative therapy, dental extractions anaroral hygiene instructions for better maintenance during radiation ament. Post radiation care includes mainly neutral fluoride therapy, ocated to all patients undergoing in the head and neck region. Neutral hide get application is one of the best possible ways to protect the eath from sensitivity, post radiation caries, etc. Currently about more 1500 patients are undergoing fluoride therapy of which nearly 400 new cases. This treatment should be continued for about 2-3 years kmore from the day of radiation. Patients who are undergoing this гару have less complaints of oral cavity than those who do лоt. Post adiation mucositis is managed by using smoothing, protecting and anti microbial oral rinses and ointments.

🐸 gre- surgical oral care

the pre surgical oral care, conditions such as caries tooth, root stumps por oral hygiene etc. within the oral cavity which is liable to pose a beliem during and after surgery and fater radiotherapy in almost all cases especially in the head and neck region are eliminated. The same procedures which are mentioned in the pre radiation dental care are continued. In the post surgical period, sometimes maxillofacial prosthesis s advocated for correcting deformities of the face.

Post chemotherapy oral care

the burning sensitivity after chemotherapy is managed by the use of smoothing, protecting and antimicrobial oral rinses and pintments. Post chemo dental caries also occurs in some cases and are managed by reutral fluoride gel therapy, conservative therapy and proces oral hygiene Sinstructions.

ễObservational training

Practical orientation was given to the final year BDS students of School of Dentistry, University of Dundee, Scotland, United Kingdom, who visited the Department in batches during the period, 5-07-07 to 10-07-07; 6-08-07 to7-08-07 and 16-08-07 to17-08-07.

Conference attended

Dr. Nalinakumari K.R.

3" meeting of the Kerala Academy of Oral & Maxillo-facial Pathologists, Kochi. 11 August 2007.

NURSING SERVICES

Mrs.Flower Augustine Mrs.Geetha S

Nursing Superintendent Grill Nursing Supervisor

Mrs.Aleykutty P.M

Nursing Supervisor

Nursing Division has been responsible for providing quality patient care at the out patient & Inpatient units of RCC. Nurses provided support and guidance to patients and relatives so also rendered palliative care. service to patients. Our area of service was extended to the Sone marrow transplantation unit, which was started during the year under report International Murses day was commentorated by a panel discussion on Delivering Quality, Servicing Communities, Nurses Leading to Primary Fleahh Care*. Nurses took Nurses day Pledge.

1. Educational Activities

Division Offered Clinical Experience and Orientation/Observation Update to Nursing Students from Govt, as well as private institutions.

- Clinical Experience for M.Sc. Nursing Students (Community Speciality) of College of Nursing, Trivandrum from 9th April to 14th April 2007 (8 Students) (6)
- Orientation Lipidate for B.Sc. Nursing Students of St. Gragorious College of Nursing, Perumala on 9th April 2007 (23 Students) and (c)
- Orientation Update for B.Sc. Nursing Students of Little Flower Hospital, Angamaly on 27th April 2007 (22 Students) and 28th April
- Clinical Experience for B.Sc. Nursing Students of College of Nursing, Trivandrum from 9th May 2007 to 11th May 2007 (30 Students) and 14th May 2007 to 19th May 2007 (30 Students)
- Orientation Visit for G.N.M Students of S.K.P.School of Mursing
- Orientation Visit for B.Sc. Nursing Students of Alshifa Collge of Nursing, Perinthalmanna on 2nd August 2007(25 Students) and 3nd
- Orientation Visit for M.Sc. Nursing Students of PSG College of Nursing, Coimbatore on 29th November 2007 (10 Students).

fraining Programmes Conducted

- *Oncology Nursing -A Professional Challenge" for Regd. Nurses sponsored by DGHS, Govt. of India from 18th - 25th April 2007
- "Management Techniques for Nurse Managers" for Senior Level Nurses sponsored by DGHS, Govt. of India from 14th -- 23rd May 2007
- "Oncology Nursing ~ A Multidisciplinary Approach" for Regd. Nurses sponsored by DGHS, Govt. of India from $18^{\text{th}} - 28^{\text{th}}$ June 2007
- "Quality Care an Update for Nurse Managers" for Senior Level Nurses sponsored by DGHS, Govt. of India from 16th -26th July 2007
- *Advanced Practices in Oncology Nursing" for Regd. Nurses sponsored by DGHS, Govt. of India from 6th - 16th August 2007
- "Update on Managerial Skills for Nurse Managers" for Senior 6. Level Nurses sponsored by DGHS, Govt. of India from $3^{\rm rd} - 13^{\rm lh}$ September 2007
 - "Nursing Insight in Oncology" for Regd. Nurses sponsored by DGHS, Govt. of India from 19" - 29th September 2007
- .. g. "Ward Management -- A Critical Approach" for Senior Level Nurses sponsored by DGHS, Govt. of India from 3^{-d} − 13^{ll} October 2007
 - "Cancer Nursing Update" for Regd. Nurses sponsored by DGHS, θ. Govt. of India from 29th Oct - 8th Nov 2007
 - "Update on Ward Management Techniques" for Senior Level 10. Nurses spansared by DGHS, Govt. of India from 26th November - 6" December 2007
- "Oncology Nursing -- A Speciality" for Regd. Nurses sponsored by DGHS, Govt. of India from 7th Jan - 17th Jan 2008
- "Role of Nurses for a Comprehensive Management" for Senior 12. Level Nurses sponsored by DGHS, Govt. of India from 4* February - 14th Fabruary 2008

Nursing Assistant Training Course

7th Batch Nursing Assistants Training Programme Commenced on 15

Merits, Conferences/meetings attended

Mrs. Beena Koshy

Secured 1st rank in M.Sc. (Nursing), University of Kerala, January

Mrs. Shijikumarl N.G., Mrs. Anupama B

Seminar on Comprehensive Management of Patients with Head & New York Cancer, Bangalore. 21 - 22 September 2007.

Mrs. Bensamma Varghese; Mrs. Jessy Thomas

2nd Congress of Asia Pacific Enterostomal Therapy Nurses Association Mumbai. 22 - 22 November 2007.

Mrs. Aniamma Joseph

Meeting in connection with solid waste manangement and dioxin emission control, National Institute for Interdisciplinary Science & Technology, Thiruvananthapuram, 22 October 2007.

Mrs. Flower Augustine, Mrs. Sophiya Lilly

10^{ct} National Oncology Nursing Conference, Tata Memorial Hospital. ♣ Mumbai, 3 – 9 December 2007.

CLINICAL LABORATORY SERVICES

Dr. Thomas Abraham Mrs. Gangadevi C Mrs. J. Usha

Scientific Officer Gr. I. Technical Officer Technical Officer

Clinical Laboratory Services is dedicated primarily to support fients attending the Regional Cancer Centre for treatment. Its activities relude specimen collection for outpatients, processing, analysis and signing of various tests for both out-patients and inpatients. About 1 Milion tests are being carried out annually. One doctoral level scientist. Brechnical Officers and 14 lab technicians and 5 supportive staff work hethe division.

and following groups are part of the Division.

ghlebotomy

គីខ phlebotomy lab provide services mainly to outpatients of this Centre. the services include blood collection and provision of containers for urine. Billebotomy lab carries out approximately 1.5 lakh collection related procedures annually. It also provides instruction for specimen collection ke 24-hour urine collection for creatinine clearance.

Ticken system was introduced for those who come for collection of blood samples and this improved the efficiency of the lab. Patient throughput auicker as it avoided delay between patients and the patient flow sould be controlled. The patients know that they are in the process and that they are not forgotten. Thus optimizing patient flow improved the patient service and created a more relaxed atmosphere for both patients and staff. Many patients would prefer to be anonymous; they do not want their name to be called publicly. Phlebotomy staff also reported moticeable improvement in their working conditions after introduction of the system. Improvement in quality and reduction in turn around time were the markers of efficiency. Average turn around time is about 1.2 hours for haematology and 1.5 hours for Clinical Chemistry and Coagulation profile.

Clinical Chemistry

Clinical chemistry lab processes, analyses and reports about 400,000 tests annually. The lab has started carrying out additional investigations for the patients. This includes Total CO., Lipase, Lipid profile, C-reactive protein, Gamma glutamyl transferase(GGT), Bilirubin conjugated Bilirubin unconjugated, Magnesium, Serum Iron, Total Iron binding

Fully automated high through-put clinical chemistry analyser (Vitros 950) was added this year. This racilitated the improvement in the quality as

Measurement of Bilirubin and its fractions in blood specimens. The concentration of each of the different forms of serum bilirubin provided additional diagnostic information for clinicians when compared to the total bilirubin atone. Assay for determination of Bilirubin conjugated and Bilirubin unconjugated were added in the current year. This further as well.

Special tests like serum immunoglobulin estimation, Serum electrophoresis etc. are also being carried out.

Urine analysis section analyses and reports about 10, 000 samples (Sugar, Protein, pH, Specific gravity, Ketone, Urobilinogen, Deposits etc.) each year. A urine analyser system installed in the clinical lab is a used for routine urine analysis.

Hematology

Hematology section carried out about 0.5 million tests in the current year. This includes automated haematology (Haemoglobin, Total WBCs Platelets, PCV, RBC etc.). Differential count and Reticulocyte count were carried out by microscopy. Daily QC analysis is also being carried out for automated haematological analysis.

The department has been a participent in the External Quality Assurance Services Bio-Rad Laboratories, USA for Clinical Chemistry proficient festing programme. Daily QC analysis is also done for clinical chemistry as well as for hematology. The department has been actively supported and collaborated in several clinical research projects.

Table 21: Investigations carried out

carri	ed out
Biochemical Investigations Sugar	No.
Urea	43657
Creatinine	32638
	37086

Uric Acid	21640
Bilintioin	22637
Other Bilirubin fractions (Direct bilirubin, Conjugated & Unconjugated bilirubin, Delta bilirubin & Neonatal bilirubin)	2461
SGOT(AST)	21837
SGPT(ALT)	22910
Alk. Phosphatase	19379
Gamma Glutamyl transferse	. 87
Total Protein	13973
Albumín .	140 3 2
Globulin	13707
C- Reactive protein	127
Cholesterol .	714
Lipid profile	295
(Cholesterol, HDL, LDL&Triglycerides) Sodium (Na*)	29656
Potassium (K*)	29656
Chloride	563
Total CO ₂	295
Calcium .	18606
Phosphorous	1721
Magneslum	505
Iron	57
Total Iron binding capacity	59
Creat, Clearance Test	2103
LDH	4026
Amylase	297
Lipase	34
CSF (sugar & protein)	. 203

Serum immunoglobulin assay (IgG, IgA & IgM)	63
Serum Electrophoresis	·
Haematology Investigations	
Tracilistology CBC	·
(Haemoglobin, WBC Count & Platelets)	124963
Unieremai Count	<u> </u>
Reficulocyte count	11622
ESR	
Coagulation parameters	3515
Dieeoling Time/Clotting Time	 -
Prothrombin Time	3384
APTT	1797
Urinalysis	521
Urine Routine	
(Sugar, Proteiл, pH, Specific gravity, Ketoлe, Urobilinogen, Deposits etc.)	9160
Bence-Jones Protein	
	L 209

Human Resource Development

The Clinical Laboratory provides training to graduate and post-graduate students from various Colleges and Universities in clinical laboratory related techniques. Short term industrial training was given to B.Tech students and Graduate and Post-graduate students in various Biological

in the current year, 15 Biochemistry post-graduates underwent intensive training for 3 -6 months in biochemistry laboratory. Three M.Sc. students Biochemistry/Biotechnology completed their M.Sc. project dissertation and one B. Tech (biotechnology) student completed their B. Tech. project dissertation in the division during the current year. Training was given to 6 B.Sc. MLT students for a period of 3 to 6- months in the department during the current period. Short term training upto one month was also given to 25 B.Sc. Biotechnology/ Microbiology students, 4 B.Sc MLT students and 5 B. Tech (biotechnology) students.

BLOOD BANK

Dr. K. Vijayalakshmi igi, pajayalakshmi

Assistant Professor

Resident Medical Officer

Rajesh R. Chandran Resident Medical Officer(From 17-08-2007)

was patients of RCC require blood and blood products at some stage of their treatment. The Blood Transfusion services of this division andions to meet the requirements of not only the patients of RCC but also patients from hospitals in and around Trivandrum. With cent pareintage component separation of collected blood units and assisted mystate-of-the-art facility for Apheresis , Blood Bank Division services of als Hospital is at par with any of well functioning blood bank in Kerala. Algam of dedicated Doctors and Technicians work incessantly to meet the eyer increasing demand for Blood and blood products. As a token of anition of the importance of staff requirement in this division , two segnanent staff members in the form of one Assistant Professor and Resident Medical Officer were appointed during the report year in addition to the already existing post of one Resident Medical Officer. The number of technicians were increased from 4 to 7.

Routine Activities:

- Collection of Blood from Voluntary Donors and Replacement ·Donors.
- Separation of collected whole blood into blood components like Red Cells, Platelets and Plasma after conducting tests for transmissible diseases.
- Issue of blood products like PRP.PRC to Cancer patients on Chemotherapy.
- Issue of blood products like PRC, FFP to patients during Surgery.
- HIV, HbsAg Blood Grouping Tests on all patients awaiting Surgery/ before Surgical procedures and interventions like Endoscopy, Central Line Insertion, Bone Marrow Biopsy.
- Platelet Pherasis for Patients requiring large doses of Platelet Concentrates.
- Stem Cell Pheresis to harvest Pluripotent Stem Cells on patients awaiting Stem Cell Transplantation after high dose Chemotherapy.

Academic Programmes

Monthly classes were conducted for Senior level Nurses from Directorate of Health Services.

Two weeks training to students of BSc MLT Course from School

Two weeks training to students of Msc Biochemistry course from University.

Observership in "Good Blood Bank Practices" offered to technical stem of Terumo Penpol and Hindustan Latex Limited.

Table 22 : Blood Collection Details

Volum	itary			
Male	<u> </u>	Replac	ement	
66 (0.5%)	Female	Male	Female	Total
	<u>/(0.05%) </u>	13942 (97.7%)	248 (1.7%)	14274

Figure 8: Blood collection details

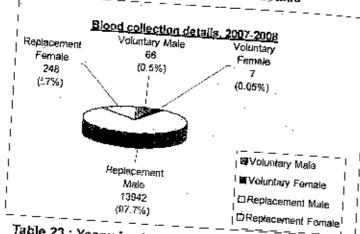


Table 23: Year wise break up of donours (1998-

ĺ	Year	1998	1999	1 2000 	TOO	ak uj	of de	onours	(1998	3-2007	")
ĺ	No of	4000	Ento	- Ed 20	2001	2002	2003	2004	2005	2006	2007
Ī	donors	ـــــــــــــــــــــــــــــــــــــ		5102	5255 -——[7282	7001	9145	9646	12329	2007 14274
		-									

Table 24:Laboratory tests done on Donors b

Liny	ests do	ne on Don	ors bloo	ď
Number of tests dopp 1 1/07/	<u>∃BsAg</u>	HCV	VORL	Malaria
Positive tanta	14274	14274	14274	4.4034
	10 FI WIT	12 (0.08%)	<u>2 {0.01</u> %} }	

Table 25 : Blood Component Preparation

3 34					
ie blood	PRC	PRP	PC	FFP	SDP
	13990	12220	1792	1792	Ĭ
<u>m_</u> ———	·				

Table 26 :Blood Component Issue

Table 24 (blood component leade								
	Whole blood	PRC	PRP	PC	FFP	SDP		
To RCC		11064	12190	1617	1322	559		
ற்றுக் Hospitals	j	983	30	10	63	14		
Total		12047	12220	1627	1385	573		
8						~~ ——		

Figure 9: Blood product issue to patients

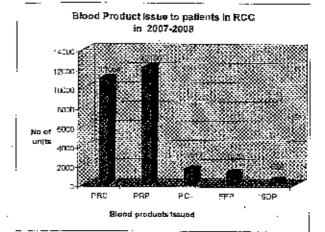


Table 27: Laboratory tests done on patients blood

zs		•			
Blood Grouping	HIV	HBsAg	Cross Match	Coomb's Test	
7868	7888	7868	13672	43	
80			~		

Conferences / Training / CME Attended

🗗 Vijayalakshmi, Dr Jayalakshmi , Dr Rajesh, 🛮 Ms Sumi. S R.

ME on "Leukoreduction in Transfused Blood " at SCTIMST , Aug

Mr Rajesh R. V. , Ms. Sumi S R.

Regional Cancer Centre, Toiruvavanthapuram

CME on "Newer Trends in Transfusion Medicine" at KIMS, Dec 2007. Dr Vijavalakshmi attended two week training on "Cryopreservation of Stem Cells and Blood Banking Techniques at CMC Vellore in Nov 2007.

Regional Cancer Contre, Thintvarianthapuram

CLINICAL SERVICES AND MEDICAL RECORDS

Mr. R. Raveendran Nair Administrative officer (Clinical Services) Mrs. D. Chandrika.

Medical Records Officer Mr. V. Surendran Nair Public Relations Officer

This division is entrusted with:

Front Office management Medical Records maintenance

Cancer Care for Life scheme Patient accounts & billing. Patient welfare services

Pharmacy Vehicles 1 4 1

Other patient related services

Annual Report 2007-2008

The patients referred to RCC for consultation, investigation treatment and follow up were registered. The cases referred just for investigation purpose were not registered. The following table shows the hospital statistics for the reporting period 2007-2008.

Table 28 : Hospital Statistics 2007-08

No.							
1	New case registered	Numbers					
2	Review cases*	11327					
3_	Total patients(New + review)	139818					
4	Daily average	151145					
_ 5	Average attendance per patient	504					
6	No. of in patient admissions	13					
7.	Total bed occupancy	9966					
8	In Patient bed**	93387					
_9	Average bed occupancy	_ <u>278</u> _					
10	Percentage of bed occupancy	256					
11 [Average length of stay	92_					
12	Hospital death	9					
13	Telemedicine consultation	<u>_675</u>					
Amelo L.		2209					

^{*}Follow up at peripheral centers, telectinic, palliative care, consultation from clinic to clinic, review

the work load has increased to 224 percentage during 1982 - 2007-08. gram shows the pattern from 1982 to 2007-2008.

Fig. 10: New Patients registration (1982-2007)

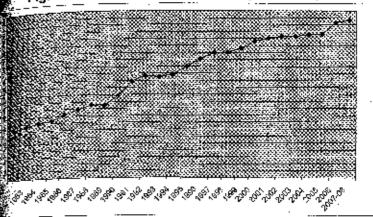
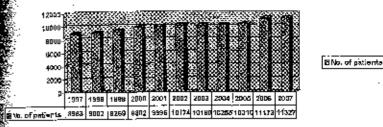


Fig. 11 : Absolute numbers of new patients registration (1997-2007)



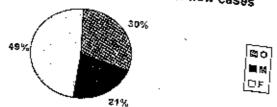
every new patient reported to RCC was assessed and categorized ecording to O, M & F.

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Affordable to pay fully MS Affordable to pay partially Not affordable to pay but a little (Radiation totally free)

^{**} Day care chemo ward, cubicle CT ward and other admissions not meant for overnight stay are not included. 4 beds for Bone Marrow Transplantation were added in November 2007.

Fig. 12 : Category wise distribution of new cases



During this report period, 1272 requests were received from patients for re-considering the income category since they could not afford the treatment cost. A designated committee reviewed all application on monthly basis and resolved to change 455 application from 'M' to 'F' 54 application from 'O' to 'F', 306 application from 'O' to 'M' and for 84 patients concession for treatment were given. The table shows age/sex distribution of patients.

Table 29: Age, Sex distribution of Patients (2)

Age Group		4100	tion of Pa	tients ()	2007-081	
· - — :— :	. <u> </u>	%	Female		¬——-	n
0 -14	310	6%	701 -	<u>i,%</u> _	Total	Percentage-
15-24	221	.⊢∠ <u>~</u> .	<u> </u>	470	511	i 5%
25-34	·+	<u> 4%</u>	<u> </u> 318	5%	539	
	<u> 297</u>	_ 5%	514	9%	- -	<u>5%</u>
35-44	580	10%	990		811	7%
<u>45</u> -54	1130	20%	~~ ———	18%	<u> 1</u> 570	14%
55-64	1537		1343	24%	2473	22%
65-74	i———+	27%	1220	21%	2757	:
$\frac{35}{75+}$	<u> 1177 </u>	21%	786	14%	t——— <u>—</u>	24%]
-——— <u>-</u> —_	422	7% T	301		1943	17%
Tota!	5674	100	5853	_5%	<u>. 723</u> j	6%
_Percentage	50%	- <u></u> -		<u>_100j</u>	11327	100 i
<u></u>	- 	<u>_</u> _L	50%	Ţ	100%	_

Every new patient was registered in the site specific clinic. The distribution of patients in various specialty clinics is as follows:-

Table 30 : Site specific clinic wise distribution of patients

	r ———— <u> </u>	TO STRIBUTION
<u>Clinic</u>	<u>Ν</u> σ.	Percentage
<u> </u>	1550	14%
<u> </u>	2222	———— <u> </u>
<u>c</u>	1879	<u>20%</u>

D 1936 17% Ε 2568 23% F 511 4% G 661 6% Total 11327 100%

(Évmpho reticular system, bone, and CT

Head and Neck cancers

Breast and CNS

Genito urinary and others NOS

Respiratory and Gastro intestinal

Patient less than 14 years of age
Thyroid
Compared to previous year, percentage wise distribution of cases gnained same except 1 % increase in A, D, E clinics and decrease C, F & G clinics.

Table 31 : Religion wise distribution of new cases-2007-08

Male	%	Female.	%	Total No	Percentage
3379	60%	3495	62%	6874	60%
1182	20%	1032	18%	2214	20%
1113	20%	1126	20%	2239	-20%
5674	50%	5653	50%	11327	100%
	3379 1182 1113	3379 60% 1182 20% 1113 20%	3379 60% 3495 1182 20% 1032 1113 20% 1126	3379 60% 3495 62% 1182 20% 1032 18% 1113 20% 1126 20%	3379 60% 3495 62% 6874 1182 20% 1032 18% 2214 1113 20% 1126 20% 2239

Table 32 : Clinic wise break up of patients

Clinic	New	Review*	Total	Average/day
·A	1550	24328	25878	- 86
В	2222	. 21762	23984	90
_ C	1879	26048	27927	93
Ð	1936	21122	23058	78
E E	2568	17001	19569	. 65
F	511	14856	15367	51
G · .·	.661	7410	8071	27
_so		7291	7291	24
Total	11327	139818	151145	504

For review visits 75% of the patients maintained regular appointment While analyzing previous year's data, it is seen that the patient attendance has increased in all clinics.

Table 33 : Clinic wise distribution of inpatient admission

Citat		New Mew	of inpatient as	dmission
Clinic		New Admission	Repeat	
<u>A</u> →	2141	498	Admission 1643	Percentage
	1674	1021	653	<u>21%</u>
0	1470	1023	447	<u>17%</u> 15%
<u>-</u>	1653		616	13%
-	1067	265	794	17%
G Total	645		802	11%
<u></u> _	<u>9966</u>	5011	4955	6%``
HAdmissian	f		_ <u></u>	<u>_1</u> 00%?

^{**}Admission to palliative care, surgery, also included.

In fotal admissions 21% belongs to lymphoreticular system clinic (A). The present bed capacity is inadequate to accommodate all needy admitted patients in time. Minimum waiting period for getting payward has been

Patients are coming to RCC from different hospitals on referral basis. The majority of patients were from teaching hospitals, eminent private doctors and private hospitals. The following table shows distribution of reference for the year 2007-2008.

Table 34 : Distribution of cases referred

Keferred from	No.					
Teaching Hospitals (MCH)	3809	Percentage				
District/ General hospitals	681	33.69				
Other Govt, hospitals		6.0%				
VSSC/ECHS/ESI/CGHS/	536	<u>4.</u> 7%				
Railway hospitals	524	4.6%				
ECDC and peripheral centers	113					
Other Cancer Centers		1.0%				
Private doctors	42	0.4%				
Private hospitals	823	7.3%				
	4467	39.4%				
gional Cencer Centre, Thirtuvarianthapuvan:						

<u>_</u>	Overseas	43	0.4%
, —	Self/RCC	289	2.6%
	Total	11327	100%
	 '		

IN LCC, 25% of patients reported from Trivandrum district and 15% outside Kerala. The table shows the distribution of new patients iding to geographical area.

Table 35: New patients by geographical area.

District	Number	Percentage
Trivandrum	2790	25%
Kollam	2121	19%
Pathanamthitta	636	7%
Alapuzha	659	6%
Kottayam	268	2%
Jdukši	- 145	1%
Ernakulam	481	. 4%
Trichur	487	4%
Palakkad	413	3%
Calicut	378	3%
Malappuram	598	5%
Wayanad	59	1%
Kasargode	130	1%
Kannur	434	4%
Others *	. 1728	15%
Total	11327	100%

The others include Tamit Nadu, Karnataka, Lakshadeep, Male etc. During the period 2007, 11317 cases were registered and classified according to ICD-10. Out of them, 88% had confirmed diagnosis of malignancy

RCC has signed MOU with number of organisations such as ESI, ECHS; CGHS, VSSC, Railway etc. to provide treatment on credit basis. The following table shows the distribution of patient undergone treatment during the reporting period.

Annyal Report 2007-2008

Table 36: Distribution of patients undergone treatment

Type of Treatment	Total Patient	Reporting Period	Percentage	Pravious Year
Radiotherapy	5957	4478	41%	1479
Chemotherapy	7295	4361	40%	2934
Surgery	2942	2!13	19%	829
Total	16194	10952	100%	5242

Supportive treatment, hormone etc not included. Combination treatment not calculated separately.

The following table shows leading 1st ten sites of cancer by sex.

Table 37 : Leading 1st ten sites of cancer by sex -2007

			~8	i remarks of califord by SeX -			-2007		
	Total				Male		Female		—
Rank	Site	Na	%	Site	No	%	Site	No	
<u> </u>	Breast	1427	14.32	ung	697	13.69	Breast	1411	28.96
li	Leukem/a	912	9.15	Leukemia's	555	10.90	Cervix Uteri	502	10.30
<u> l'i </u>	Lung	820	8.23	Tongue	328	8.45	⊢ T∩yraid	485	9.95
IV	Thyrola	627	6.29	Lymphomas	310	6.09	Loukemla	357	7.33
<u>, V</u>	Cervix Utori	502	5.09	Mouth (BIV)	235	4.62	Ovary	237	4.88
_VI	Lymphomas	467	4.69	Larynx	234	4.60	Lymphomas	157	3.22
VII	Tangue	463	4.65	Ossophagus	228	4.48	Mouth (BM)	136	2.79
VIII	Vicuth (BM)	371	3.72	Stomach	220	4.32	Tongue	135	2.77
IX.	Secondaries	342	3.43	Secondaries	213	4.18	Secondaries	129	2.65
× į	Oesophagus .	315.	3.46	Brain	153	3.01	Body of Uterus	128	2,63
	Total	6246		Total	3173		Total	3677	
	Grand Total	9963	63%	Grand Total	5091	62%	Grand Total	4872	76%

The following table is the site wise distribution of cases classified according to ICD-10

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Selo 38 : Site/sex wise distribution of new cases-2007 (ICD-10)

(č)10 (č)00	SITE	MALE	%	FEMALE	%	TOTAL	
	LID			I WIND IN-		COIME	%
E08UU 1	LIF	8	0.16	21	0.43	29	0.29
© 01	BASE OF TONGUE	38	0.78	4	0.08	42	0.42
2 02	TONGUE	290	5.70	131	2.69	421	4.23
C03	GUM	408	2.12	79.	1.62	187	1.88
©04	FLOOR OF MOUTH	63	1.24	7	0.14	70	0.70
3 05	PALATE	42	0.82	15	0.31	57	0.57
6 06	OTHER PARTS OF MOUTH	235	4,62	136	2.79	371	3.72
©07	PAROTIO GL. MAJOR	28	0.55	22	0,45	50	0.50
8038	SALIVARY GL.	4	0.08	4	0.08	8	0.08
<u>(</u> 309	TONSIL	30	0.59	4	.80.0	34	0.34
C:10	GRO⊃HARYNX	134	2.83	8	0.12	140	1.41
© 11	VASOPHARYNX	39	0.77	19	0.39	58	0,58
% 12	PYRIFORM SINUS	70	1.37	. 8	0.16	78	0.78
1 (§13	HYPOPHARYNX	52	1.02	30	0,62	82	0.82
© 14	PHARYNX, ORAL CAVITY ETC.	6	0.12	2	0,04	8	0.08
Ç .15	OESOPHAGUS	228	4.48	87	1.79	316	3.16
G16	втомАСН	220	4.32	71	1.46	291	2.92
2 017	SMALL INTES.	9	0.18	7	0.14	· 16	0.16
2 C18	COLON	8 6	1.69	54	1.11	140	1.41
C19	RECTOSIGNO:D	19	0.37	16	0.33	. 35	0.35
(C20	RECTUM	121	2.38	86	1.77	207	2.08
Ç21	ANUS & ANAL CANAL	11	0.22	В	0.16	19	0.19
C22 .	UVER	117	2.30	24	0.49	141	1.42
€C23	GALL BLADDER	7	0.14	50	0.21	17	0.17
C24	OTH,BILIARY TRACTS	22	0.43	- 6	0.12	28	0,28
C25	PANCREAS	77	1.51	37	0.76	114	1.14
C28	OTH, LL DEF, DIGESTIVE ORG,	. 1	0.02	2	. 0,04	3	0.03

		- Co	р Теген	·	_	_									
		C3	OFEFF			. 1	0 0	.20	7	10					
		_ C3	1 ACCESSSORY SINUSES		7	3		.61		12		21).2(
		С32			- -				<u> </u>	_'2	U. —	25	4	3 6	1,43
		C33	TRACHEA		+	_23		60		5	0.	10	23	9 -	.4¢
		C34	LUNG		┿-	697	 -	04		3	0.0	16		_+	.40 Q5:
	<u>.</u>	C37	THYMUS		╁-	2	 -		<u> </u>	23	2.5	2	820		23
		C38	HEART,MEDIAST,		┿-	- <u>-</u> 2		╌╃╌		1	0.0	2	. 3	_	
	-	C40	BONE OF LIMBS		_		0.2	o		5	0.1		15	0.1	_
	. } —	C41	OTHER BONE	,		43	0.8	4	1	9	0.39	;+-	20	 	
	 -		SKIN,MELANOMA			19	0.3	7	2	01-	0.41	+	62 39	0.6	
	<u> </u>	44	SKINIOTHER		<u>-</u> -	18	0.3	<u>, </u>	10	0	0.21	╁╼╌	28	0.3	-40
	 -	47	PER/PHINERVES &			70	1.37	Γ	30	3	0.74	 -	26 106	0.2	- Jo
	ļ. <u>.</u>		ANS			1	0.02		-	-		 	1	1,00	-4.
	 -	48	RETROPERIT.			13	0.26	╁━	20	┥-				0.01	
	<u> </u>	49	CONN.TISS, ST		_	7	1.32	 -	<u>20</u> 70	 -	0.43		33	0.33	
	C	·	BREAST		1	6	0.32	-	1411	 	1.44		37	1.38	, single
	C5	╼┾	W <u>l</u> vA			-			9		8.96	142	╼╌╠╌	4.32	Į,
	CS	┷╬	/AGINA		_	-		_	27		0.18		9	0.09	
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	C55		ORPIJS LITER!		_	1			128			50)	+-	5.04	de
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	C57		ARY	\perp	_			<u> </u>	237		49 86	24	╣	.24	į.
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ļ	C61		DSTATE	——	51	_	57 97		╌┤			29	0.,		1
Ĺ	C62	TES		-	7	0.5		_	- _		<u>- _</u>	151	1.8	2	Ì
	C63	OīH N ∩	.UNSPED. MALIG. ORGN.		2	0.0		_	<u>-</u> -		<u> </u>	27	0.2	7	*
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Regional Cancer	A	
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	1111 (A.R.	o.gomosarami

. [GRAND TOTAL	5682		5635	- "]	11317	
		. :					· ·
R69	D/agnosis deferred other toan above	495	.ā	472		967	
]	TOTAL	96		291		387	
001	Vesicular Mole	•		102	35,05	102	26.36
D37- D48	Neopalsm- Uncertain or unknown behaviour (all ¹ sites)	34	35.92	39	13.40	73	18.86
D10- D36	Berige Neoplasms (ail sites)	51	53.17	. 112	38.49	163	42.12
D00- D09	in situ neoplasms-(a" sites)	11	15.46	38	13.06	49	12.60
	TOTAL	5091		4872	٠.	9963	
C90- C96	LEUKEMIAS - INCL,M,M	555	10.90	357	7.33	912	9.15
C81- C85	LYMPHOMAS	310	6.09	157	3.22	. 467	4.69
C77- C80	M.Ņ ILL.DEFINE SECONDARY & USS	213	4.18	129 [.]	2.65	342	3.43
C76	ILL, CEF.SIT	. 12	0.24	4	0.08	16	0.16
€C75	OTH,ENDO,G	. 1	. C.02	3	0.06	4	0.04
C74	ADRENAL GL	. 9	0.18	. 8	0,16	-47	0.17
C73	THYROID	142	2.79	485	9.95	827	6.29
8072	MN,SC & OTHER CNS.	4	0.08	2	0.04	6	0.06
0.0 0.7	arain.	153	3.01	1:0	. 2:26	263	2.64
670	MEN-NGES		-	1.	C.02	. 1	0.01
069	EYE & AC VEXA	11	0.22	8.	C:18	. 20	0.20
(368	O'TH,URLORG	6	0.12	2	0.04	8.	0.08
897	URI.B; ADDER	102	1.22	:1	0.23	113	2.00
665 666	URETER	2	0.04	1	0.02	3 -	0.03

Pharmacy

During the reporting period the pharmacy handled medicines in amount of Rs.20,79,08,443/-.12,09,978/- have been issued free to cancer patients belonging to low socio-economic status and treatment protocol recommended by academic forum of the Centre. They are ALL-107, Lymphoma-70, GCI 6, Wilm's turnour-7, Testicular-5 and Dysgerminoma-2. Other medicing worth of Rs.2,78,380/- were also issued free of cost to poor patients Cancer Care for Life scheme

During the period ,155 new patients reported for treatment under Cancer care for Life scheme. Of this, 147 had confirmed diagnosis malignancy. Out of this 100 patient belong to scheme-I, 31 patient belongs to Scheme II, and 16 patients belonged to Scheme III. Average amount spent per patients is Rs.76,350/-. Rs.1,12,24,376/-† was spen towards the cost of investigations, treatment etc.Rs.33,54,090/-† was collected through new memberships. † - Unaudited figure

Student training:

1. 22 students of MA/MSW from various universities were posted 1 week in this section for training in clinical service activities.

We acknowledge with thanks Board of Directors, SDM, California, St Sirdi Sai Trust, Madhyamam, Melam Masala, Asraya, Care Plus, Pra thyasa and various individuals who have helped for the treatment/ welfare of poor patients. The Mar Gregories Karunya Nilayam, Kottayam has sponsored the treatment cost of 100 patients in the Paediatric Oncol-Conferences attended

Mr. Raveendran Nair R.

Silver jubilee conference of the National Institute of Personnel Management, Kovalam, Kerala, 6 -10 September 2007.

8[⊪] annual National Medical Records Conference (MEDRECON 2008). Madras Medical Mission, Chennai, Tamii Nadu, 6 – 11 February 2008.

Public relations activities were centered around awareness and exposure management. Apart from public relations activities, this office has been supervising the security wing, telephone exchange, information counter and help desk. Health communication through print

electronic media was another area of activity. Co-ordination of raising activities of the Centre with the support of the philanthropic sation and viewers of 'Mukthi', the cancer awareness programme rali TV is being continued. The Centre had launched a unique "Akshayapathram" the poor patient's welfare fund for food nedicine. Free food is being served to more than 200 poor patients lating the ward since November 2007 and this programme is going outsuccessfully. A brochure on Akshayapathram has been printed and alsigibuted among well wishers.

Public Relation activities were instrumental in enhancing the CCL Shership with the unique campaign focused on NGOs and other and itable organizations. As part of advertisement, display boards and negraings were installed in RCC and its outreach centres at Palachat a្យវិទី:Ernakulam.

- Cancer Care for Life campaign were conducted at Ayyankunnu-Kannur, Rotary Club-Trivandrum, Orbit-Vazhuthacaud, and Chikitsa Sahayi- Vallanad, Trivandrum.
- "Mukthi" in Kairati is continuing as the longest cancer awareness programme in Television,

The Centre, its doctors and scientists have sufficient exposure to the media in the form of articles, talks, interviews, phone in programmes etc. Sublic function and VIP visits were managed and coordinated.

Awards/Honours

Mr. V. Surendran Nair

Non the Best Science Journalist Award instituted by Kerala State Council for Science, Technology and Environment. Elected as the Joint secretary, Public Relations Society of India.

LIBRARY AND INFORMATION SERVICES

M.Chandrakumaran Nair Senior Library & Information Office

Access to information rather than possession has become prime for today in view of the increasing availability of virtual information resources and progress in network technologies. The division continued all activities to provide effective information support for patient management research and PG programmes, training, research projects and for other academic activities of the Centre. We are moving with a mission to establish up-to-date infrastructure facilities which will support timely dissemination of information. The library is carrying out a wide spectrum of information services to the users to update themselves with latest

Progress in collection of library resources

As in previous years, high priority has been accorded to the subscription to journals and 11 journals were added for the calendar year 2007 in the context of increasing academic programmes. Library subscribed to 115 journals of which 80 titles were international. The following are the additions to the resourceful collection during the report year and all the materials have been technically processed and added to the databases.

Table 39: Collection Development

	/	. •	
	Document type	Additions	Collection as on
- 1	Books, monographs and Sackvolumes Current Journals	471	March 2008
ļ	Reprints and reports CD ROMs/DVDs	201	115
	esad gga-	26	<u>5657</u>

iP based access to journals

IP based full text access to more number of journals were provided during the year. In addition to Elsevier's Science Direct service, John Wiley. Blackwell, Oxford etc also provided IP based access to their journals in their online platforms. More than 100 free online journals in the Centre's

es of interest were selected from various sites and made available favourites group with sufficient notification for wide use.

Julia Library Services

we sait of digital library, the work relating to digitization of publications Centre since 1981 is in fast progress. The division continued its library services like, RCCL Current Contents, Onconews, Press ings. Conference Alert, Reprint Service etc., on intranet. Full text CD/DVD resources were added to the CD mirror server digital system for multiuser access.

யுந்தோy Hours

order to meet the demand arised out of the increasing academic wities, working hours of library has been extended to 8 pm during mesteport year.

giblication of Annual Report

division continued the compilation and editing work of Annual report the Centre. The work relating to the publication of the report for 2006-English and Hindi was completed and copies were distributed to e concerned.

Borary Committee

he Library Committee met three times during the report period and decisions were taken on various issues relating to the library. The major issues discussed were the Upgradation of digital library services. hysical verification of books and other materials done, and Revision website etc.

information sharing and Access to Deinet

h order to meet the increasing demand for information requirements, the division continued its interaction with national/international organizations/ agencies. In the case of journals not available in the library, more than 200 reprints were collected on request from the authors concerned free of cost. Library also renewed subscription to membership to Delnet.

Access to INIS/Cochrane

RCC continued the free access facility to International Nuclear Information System(INIS) database of IAEA which now carries about 2.9 million abstracts and indexed records and a comprehensive collection over 8 lakh full text documents including Nuclear Medicine, Radiation Physics, Energy and Environment. The Cochrane library, the Evidence-based

health care database, is also accessible freely with the sponsorships

External users/ Project students / Frainces

There has been heavy use of library materials by students and trainer who come from various institutes in India for project work and training A number of PG students and researchers from Medical Colleges University Departments and other organizations visited the library reference and consultation. Library also continued to provide audio visual support to all the programmes conducted.

Workshops/ Seminars/ Training attended Mr. M. Chandrakumaran Nair

Seminar on Knowledge Resource Management (KRM2007), Take Memorial Hospital, Mumbai, 3-4 August 2008.

Libraries on the Agenda: International Seminar on Library advocace Max Mueller Bhavan, New Delhi, 13 - 14 March 2008.

Mr. Vishnu.V

Training programme on biomedical information retrieval for medical information professionals/medical librarians, New Delhi. 23-27 Juli

INFORMATION SYSTEMS

Mrs. Neelima N. Systems manager Systems analyst Mr. Rajesh P. Mr. Shail J. Systems analyst

missidivision continued to provide quality services in maintaining camputers and in building the Hospital Information System.

NERASTRUCTURE

Wardware: Xeon Servers 6 Nos

Pentium IV Server 7 Nos. Personal Computers -300 Thin clients 80

Software: Application Server • Oracle 10 g

Database | Oracio 10 g, Ingress 6.4

Reports Oracle Reports Enterprise Linux 3.0, Operating Systems

Windows 2003.

Windows 2000, Windows XP

Eirowall. Trend Micro

Network:

Connected the entire campus with 400 access points.

Quring the report year, the division maintained 22 modules of Hospital information System. In addition to this, applications were developed ទែក Surgical Oncology (Doctors Logbook), Microbiology Lab and Chemotherapy ward.

Telemedicine Applications

CME Programmes transmitted to various centers across India through alelemedicine network

E		
Continuing Medical Education Programmes	-	30
Panel Discussions	-	19
Nurses Training programmes		12
Talks by doctors of RCC		15
CANCER AWARENESS (Through Media).	· -	03

Reception OP and IP Billing Laboratory Information (including Credit Card System Clinical Laboratory acceptance) Imageology (Radiology) Consultation Pathology Consultation notes Nuclear medicine Case sheet images Service ordering and Pharmacy scheduling Ward Management Purchase & Central Store Reports viewer Service Ordering and Chemotherapy Management & Scheduling scheduling Radiation Treatment CSSD Microbiology Scheduling Surgical scheduling and management

Major CME programmes Received

- AROI annual conference from RCC, Ahmedabad
- Multi modality Head and Neck cancer care in new millennium; TATA Memorial Hospital, Mumbal.
- Teleconference of National Board for the DNB Students and

Follow-up of Patients through Onconet

Patients returning home after initial treatment from RCC could communicate their post treatment problems and results of investigations from nodal centers. The doctors at RCC could also be able to render advice on a real time basis for terminally ill patients who require only palliative care. Besides helping patients for follow-up visit, the online facility boosted the confidence of the cancer patients by providing counseling. Apart from RCC patients, the public as well as doctors of other institutions also availed services of ONCONET.

Patients attended Telemedicine Clinics:

ш	Follow up consultation	linics;
Ü	Early Cancer Detection	1265
		955

Visite of ogy Clinic William French and Kochi Fork Concer D Kannur and Kochi Early Cancer Detection Centres.

Research Projects

Bevelopment of data management system for oncology with special reference to RCC. (Funded by: CDAC, Government of

grincipal Investigator: Mrs. Neelima N

ONCONET: cancer care for rural masses'. (Funded by: Ministry of Information Technology, Government of India; ISRO; C-DAC, តី(ivandrum)

GARUDA" - National Grid Computing Initiative'. (Funded by: CDAC, Pune; ERNET, Government of India)

gonference/meeting attended

Mrs. Jayanthy J.K.

peysloping Applications for GARUDA (DAG07), Jawaharlal Nehru Dilversity, New Delhi. 4 - 6 October 2007.

Garuda Partners Meet, Bangalore, 3 - 4 March 2008.

EARLY CANCER DETECTION CENTRE (ECDC), ERNAKULAM Dr. Latha, A

Smt. C.Radha

Cytopathologist

Smt. Mercy Joseph

Sr. Gr. Cytotechnologist

The overall activities of the Early Cancer Detection Centre, Ernakulan

Cancer screening clinic every day at ECDC, Emakulam.

Cancer screening camps in rural and urban areas with assistants from non-Governmental and Governmental organizations. Cancer awareness programmes to public and members 3.

Monthly follow up clinics of RCC treated patients at ECDE 4

Telemedicine facility for Cancer Patients, awareness classes in 5. public and videoconferencing.

В.

Provide Cytology, and Haematology diagnostic facilities for materials send from other medical centers and also from ECDC 7.

Colposcopy for patients of this centre as well as from referral

Table 41: Resume of work done

	Resume	of work dor	le	
$\frac{1}{2}$	Persons screened	Centre	Camp	****
3.	Cervical sinear	7206	2950	Total 10156
4.	Oral Smear	3256	1375	4631
5.	Fine Needle Aspiration Cytology	383	48	432
6.	4	2183	507	2690
7.	Colposcopy	68		66
8.	Body fluids	3		3
J 4	Peripharal Blood Smear	124	26	150
- -	Cancer Detection Camp	18	2	20
<u> </u>	Awareness Class	37		37
		. 34	_ _	

Table 42: Gynaecological cytology

SING.	Lesion	Centre	Follow up	Camp	Total
	Normal	324	127	. 379	830
	inflammation	1133	442	585	2160
	Atypical glandular cell	147	: 37	40	224
14	Trichomonas Vaginalis infection	480	122	223	825
A 5.	TV with Dysplasias	85	28	. 40	153
6.	Fungal infection	59	20	38	117
	Fungai Infection with atypia	20	4	4	28
8.	Human Papil oma Virus Infection	3		1	· 4
9.	Human Papilloma Virus with atypia	2			2
10.	Heroes Simplex Virus	10	8	5	23
41.	Viral infection with Dysplasias	5	5	3	14
12.	Mixed infection	71	23	28	122
13.	Mixed infection with Dysplasias	19	16	20	55
4.	Mild Dysplasia	13	12	6	31
15.	Moderate Dysplasia	4	2	2	8
15.	Severe Dysplasia	2	2		4
17.	Carcinoma In-situ	2	. 1	: 1	4
18.	Autolytic atrophy	2		•	2
19.	Invasive Squamous Cell cardinoma	13			13
20.	Adenocarcinoma	8	2		· 10
21.	Radiation changes	2			2
	Total	2404	852	1375	4631

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			haecological	Cutolows

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Total 383 49	Į	4.	Malignancy	╼╼		01	 - -			Total			- <u>-</u> -	╆╼-	
SPUTUM	. [Total				-	╼╼╁						╀╍	
1. Benigh S7 1. Benigh 226 2. Suspicious 2. Suspicious 3. Malignancy 9 3. Malignancy 6 4. BREAST			SPUTUM	<u> </u>		363		49						╂╼╼	
2. Suspicious 1. Benign 226 3. Malignancy 9 3. Malignancy 6 BREAST 1 otal 232 BODY FLUIDS NIPPLE DISCHAGE 1. Benign 656 75 Benign 144 2. Suspicious/atypia 49 1 Suspicious 2 3. Malignancy 117 4 Total 116 THYROID ASCITIC FLUID 1. Benign 657 286 Malignancy 1 2. Suspicious/atypia 75 4 PLEURAL FLUID Benign 7 3. Malignancy 24 Benign 7 4. Total 756 270 Malignancy 1 5. Europe PERIPHERAL BLOOD SMEAR Malignancy 2 Benign 17 2 5. Secondary 9 2 Total 18 2 7. Total 4 10 10 2	E	1.				 1				OTHER S	SITE			-	
3. Malignancy 9 3. Malignancy 6 Total 66 Total 232 BREAST		2.	Suspicious	╼┾		24			_1.	Benign		 ,	226		
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BODY FLUIDS	В					66		[_		otal					
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2. Suspicious/atypia 49 1 Suspicious 2 3. Malignancy 117 4 Total 116 Total 822 80	1.	1 _B	enina	- , -	_			_ [-	I	IPPLE D	SCHA				
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LYMPHNODE	3. — 1			7	24	├- -		- -	<u> </u>	URAL FL	UID	_			74
LYMPHNODE PERIPHERAL BLOOD SMEAR		Tota	il	 ;	756	<u> </u>		 	ber	ign	L	7	_		13
Benign 243 12 Benign 17 2 Malignancy 9 2 Total 18 2 Primary 9 2 Total 18 2 Total 4 18 2	[LYM	PHNODE	<u> </u>	50		2/0	├	Mal	gnancy					13
Primary 9 2 Total 18 2	<u>. 1</u>	Beni	gh	2	4 <u>9</u> [<u> </u>	L PE	RIPHERA	AL BL	00n	Sila	EAD	
Primary 9 2 Total 18 2 Secondary 61 4 18 2	<u>. l</u> i	Malig	nancy	L 2	77		12		0011	Sur t		<u>171</u>	3191	<u> </u>	1.3
Secondary 61 4 1018 2 1018	_ [F	o/i/na	ary		╗┪		╼┪		Susp	icious				<u>- ~</u>	
Total	_[5	3000	ndary					نـــــ	Total			18	_	-,	100
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		_	<u>-</u>	31	<u>₹</u>		18	1				- -	_	-1	-

EARLY CANCER DETECTION CENTRE (ECDC), PALAKKAD

Dr.I.B.Sulekha Medical Officer

Early Cancer Detection Centre, Palakkad, one of the peripheral enters of RCC, Thiruvananthapuram is located at Kanjikode, 8 km east palakkad town.

main activities of this Centre are:

reating cancer awareness among the public and screening them for warning signals of cancer. The screening is being done at the centre for referred cases and patients coming voluntarily) and by conducting cancer detection camps in various places with the help of voluntary organizations.

Every Thursdays the staff nurse attends, Gynaec OP, District Hospital, Balakkad to take PAP smear with the permission of the Superintendent and co-operation of staff of Gynaec OP.

alliative care treatment was also given by the centre...

our staff attend exhibitions conducted in Palakkad with the posters available in this institutions.

Detected cancer cases were referred to RCC or other institutions for expert management.

Table 44: Resume of work done

Đ.	No. of persons screened	:	8923
	a) ECDC	:	1964
Se .	b) CAMP	: . •	6959
12.	No. of smear taken	:	2411
U. 80	a) ECDC	:	682
	b) CAMP	:	1729
₿3.	No.of camps conducted	: -	36
ે4.	No. of Railway passes issued	;	188
	No. of Medical Certificates issued for pension	:	146
6.	No. of Awareness classes conducted	1 .	39
7.	Total cases referred	:	106
:	a) To RCC	:	871
:	b) To other institution	:	19
8.	No. of home visits conducted	:	8
9.	No. of pain clinical registered	: .	23
10	I. No. of Telemedicine consultation	j.,	39
11	No. of exhibitions conducted in Palakkad	3 .	3
_			

Table 45: Details of cytological specimens screen(

SI.No.	Nature of Specimen	gical specimer	is screer	ifno 🖔
1	Cervical smear	ECDC	CAMP	
2.	Oral Smear	609	1686	10
3.	Sputum	- - 18	10	
4.	Breast (FNAC)	- <u>18</u>[1	
5. 6.	Thyroid (FNAC)	- 19 	8.	ان - از
	Lymph node (FNAC)	Nii	9	
8	Nipple Discharge	- 8 	3	4
P	Fluid		1	
J 	FNAC other sites			
	Scrape smear others	+ 3 -	- 11 -	16
L <u> </u>	Total	500		
Table 40		682	1729	2418

Table 46: Details of Gynaecological specimens screening

SI.No	o. Nature of Specimen	a ser apecu	apecimens screening			
1.	Normal		· [CAMP		
2.	Inflammation	- -	155	736	8	
3.	Fungal Infection	- 	75	469	7/	
4.	Squamous Metaplasia	<u>-</u>	8	22	3	
5.	Trichomonas Vaginalis Infection	_ -	20	20	4	
6.	Herpes Simplex Viral Infection	<u>- </u>	53	199	<u>-</u>	
7.	Human Papilloma Virus Infection		3	2		
8.	Endocervicitis	<u>-</u>	1	71	<u>`</u>	
9.	Glandular Cell Atypia	2	9	120	149	
10.	Mixed Infection	<u> </u>	9	54	73	
11.	Mild Dysplasia	26		57	83	
12.	Moderate Dysplasia	 3	3[3		
13.	Severe Dysplasia /Ca-in-situ	<u> </u>		.1		
4	Squamous celi carcinoma	2		2	<u></u>	
5	Poorly Differentiated Carcinoma	3		-		
6.	Adeno Carcinoma					
7	Total	1		- -	- , , , ,	
lonal G-	Centre Trippens at	682	172	- 29	2411	

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Regional Cancer Centre, Tritruvarenthapuram .

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Table 47: Non-Gynecological Smears

<u> </u>	Lesion	ECDC	CAMP	TOTAL
	1. Oral Smears			
<u>.</u>	Normal	15	7 "	22
<u> </u>	Pre malignant	3	3	6
₽	Malignant	Nil	NI.	N3
	Total	18	10	28
	2. Sputum Cytology	·		
8. 8.	Non Malignant	19	1	19
<u> </u>	Malignant	NI NI	Nil	Nil.
ب	ctal · ·	18	1	,8
 -	3. Breast (FNAC)			
"	Benigr	15	7 7	22
—۔	Malignant	4	1	. 5
	Total	19	8	27
	4. Thyroid			
	Benign	Nil	9	9
	Malignant	Vil	Ni.	Nil
	Total	NII.	9 }	9
	5, Lymphnode (FNAC)			
	Bonign	5 .	2	7
	Malignant	3	1	7
	Total	8	3	11
	6. Nipple Discharge			
	Berign	1	1 '	.2
	Malignant	v		
	Total	-	1 .	2
	7. Fluids		· . <u></u>	
	Benigr	.1	.1	.2.
	Malignant	1		·
	Total	1		1
	8. Other Sites	1		
	Ben.gh	4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 15
	Walignant	1 1.		
	fotal	5	11	13

Pain clinic

New cases registered	:	23
Step I	;	4
Step II	:	2
Step III	:	17
Number of follow up cases	:	57

NATURAL BACKGROUND RADIATION CANCER REGISTRY (NBRR), KARUNAGAPPALLY

Dr. P.Jayalekshmi Lecturer & Officer-in-charge

Natural Background Radiation Cancer Registry was started in 1990 with a special purpose to study the health effects of natural radial to present in the sea coast of Karunagappally taluk of Kollam district Kerala. Statistical analysis of the data using Epicure showed there was no increased cancer incidence with regard to radiation levels. Study now centered on the biological effects of background radiation and also in-depth dosimetric measurements. Follow up of mortality and morbidity of the radiation cohort and control cohort was also continuing by including the whole Karunagappally taluk as cohort I and cohort II. Migration survey was conducted in this regard during the current year.

Cancer registry covering whole Kollam district was initiated last year and the registration was strengthened, covering more than 200 sources including 71 panchayats, 1 corporation and 2 municipalities More than 2500 cancer cases were identified in 2007.

Cancer control activities, Pain and palliative care clinics and review check ups were regularly done with the aid of tele-linking facilities Rehabilitation services and home care of the advanced patients were

6256 female cashew workers were screened for cancer detection in Kollam district, among them 9 cancer cases were identified and more. than 300 persons were identified with pre-cancerous conditions. CLINICAL ACTIVITIES

Table 48: Clinical activities and patient services

Desc.	- Patient Sen	Vices	•
Patient services Follow-up clinics conducted for treated cancer patients.	No	No. of persons aftended	
Cancer awareness classes	7	558	
Field clinics Cervical screening camps	8 23	3016	٠.
Regional Center Centre, Thousand	31	8216 3120	

Oral scrape & Sputum	. 84	84
ancer cases detected	10	
itenis attended in pain clinics	_	1400
deer Training Programme	1	104
Care Services	79	. 79

ioing Research Projects

Dosimetric studies in High Background Radiation Area. Karunagappaily. (Funded by: Health Research Foundation, Kyoto, Japan)

Co-investigator, Dr. Jayalekshmi P.

District Cancer Registry: Kollam, (Funded by: NCRP-ICMR. Bangalore)

Principal Investigator: Dr. Javalekshmi P.

Cytogenetic studies in High Background Radiation Area, Karunagappally. (Funded by: Health Research Foundation, Kyoto, Japan)

Co-investigator: Dr. Javalekshmi P.

Human Papilloma Virus associated cancers in Natural Background Radiation Area of Kerala: Evaluation of HPV genetypes in relation to radiation exposure levels. (Funded by: Department of Epidemiology and Preventive Medicine, Kagoshima University, Japan)

Co-investigator: Dr. Jayalekshmi P.

Thyroid nodularity studies in High Background Radiation Area. (Funded by: Health Research Foundation, Kyoto, Japan) Co-investigator: Dr. Javalekshmi P.

Cancer control projects and Pain and palliative care projects: LAD.

Cancer detection among cashew workers of Kollam, Kollam Jilla Panchayat.

Conference attended, paper presented

Dr. Javalekshmi P.

National Conference on 'Emerging Issues in Public Health'. Sree Chitra Tirunal Institute for Medical Sciences & Technology, Thiruyananthapuram. 11 - 13 January 2008.

Paper presented: 'High natural radiation and cancer in Karunagapally'.

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NON-ACADEMIC STAFF STRENGTH

ADMINISTRATIVE STAFF

Position ADMINISTRATIVE STAFF				
Logition	No.		 -	
Registrar Controller of Finance Administrative Officer Administrative Officer (Clinical Services) Accounts Officer Purchase Officer Public Relations Officer Asst. Administrative Officer Asst. Accounts Officer Asst. Internal Audit Officer Junior Personal Assistant Office Assistant Sr. Gr. Office Assistant Cashier Gr. I Cashier cum Receptionist Telephone Operator	1	cum Receptionist Clerk Gr. I Clerk Typist Coding Clerk Clinical Records Assistant Dark Room Assistant Gr. I Driver Sel Grade Driver Sr. Gr. Driver Senior Helper Senior Animal Housekeeper Hospital Attender Helper Despatcher Security Guard (Daily wage) Gardner	No. 1 7 8 3 1 9 1 1 3 2 13 2 6 6 2 14 7 1	
TECHNICALA		_	г	

TECHNICAL AND SCIENTIFIC STAFF

- AMERICA STAFF				
No.	Position			
1	TEAL	No.		
	Cytotechnologist	2		
1	Social Investigator Gr 1	-		
1	Social Investigator C- C-	1		
7	Library 4	1		
- 1	Library Assistant Gr.(1		
T	Library Assistant	4		
2	Audio Visual Operator	-		
6	Dietitias Car	· 1		
4		1		
7		121		
2	Staff Nuise Grade I			
3	Head Numer C.	36		
	Todo Murse Gr.1	4		
	1 1 7 1 2 6 1 2	1 Social Investigator Gr.1 7 Library Assistant Gr.1 1 Library Assistant 2 Audio Visual Operator 6 Dietitian Gr.1 1 Staff Nurse 2 Staff Nurse Grade I		

Position	No.	Position N	٥.
Head Nurse	13	Systems Manager	
Radiographer Sr.Gr.	6	Protocol Nurse	
Radiographer Sel.Gr	15	Pharmacist	:
Radiographer	26	Pharmacist Gr.1	
Lab. Technician	17	Mould Room Technician Sr.Gr	
Lab.Technician Sr.Gr.	2	Anaesthesia Technician Gr.1	
Lab.Technician Sel.Gr.	6	Theatre Technician Gr.1	
RIA Technician	1	Data Entry Operator Gr.1	:
RIA Technician Sr.Gr	3.	Data Entry Operator	
Asst.Programmer	1	Research Assistant	
Systems Analyst	1	Project Assistant	•

ENGINEERING STAFF

Position	No.
Chief Maintenance Engineer	1
Maintenance Engineer	1
Supervisor (Electrical)	1
Supervisor (Electrical) Sr.Gr	3
Electrician Gr.I	1
Electrician	3
Electronic Technician	1
Electronic Technician Gr.I	1
Technical Assistant	1

Best Wishes

RCC BID FAREWELL TO THE FOLLOWING STAFF MEMBERS DURING 2007-2008

1.	Smt, Annamma Jacob	Nursing Supervisor
2.	Smt, Leela M,	Technical Officer
3.	Smt, T.G. Radhamani Amma	Technical Officer
4.	Srt, Thankappan Nair K.	Telephone Operator cum
5. 6. 7.	Sri. Nandakumaran Nair Sri. Sahadevan B. Sri. Appakutty As a ri	Receptionist Gr. I Clerk Security Guard Helper

RCC wish them a very happy and prosperous life

ACCOUNTS 2007-2008

REGIONAL CANCER CENTRE SOCIETY BALANCE SHEET AS ON

Previous Year	Sch	Liabilities	
Rs Ps 689000792,10 7663109,40 64507405,98 494273,00 38516435,86 31452894,10 30000000,50 36615272,40	III V	Capital Fund Specific Funds CCL Fund Adv. Received For Research Projects Secured Loans CURRENT LIABILITIES AND PROVISIONS Current Liabilities -others Provision For Gratuity Tractitors For Goods Supplied	Current You Rs 792984549.8 11153609.0 67860596.9 484581.0 0.00 39116368.64 26500000.00
346723291.37 254973474.22	VI JF	Provision For Depreciation	38053479.25 403457584.28 1379807768.70

X/V Significant accounting policies

XV Notes on accounts

Schoules I to XIV form an integral part of this Balance Sheet.

Dr.K. Ramachandran Director

Thiruvananthapuram, 23.12.2008

TRIVANDRUM (Reg. No. 587/81) 31st MARCH 2008

Previous Year	Sch No.	Assets	Current Year
Rs F	s		Rs Ps
686946848.6	γ̈́ VI	Fixed Assets	780930636 08
2250164.0	0	Capital Work-in-progress	0.00
139441987.0	0 VII	Investments	124735449.00
		CURRENT ASSETS AND LOANS AND ADVANCES	
23964102.0	0 A	Closing Steck	25617884.00
12408919.5	7 Vill	Advances Others	11038579.40
23132602 3	B[IX ;	Invostigation Fees Receivable	55294071.92
428811.7	7 X	Balance With Banks	2091824.16
887400.38	5 XI	Cash In Hand	629025.43
368512638.51	1 X:1	Income & Expenditure A/c	379270328.73
1254973474.22	<u> </u>	TOTAL.	1379607768.70

Vide our report of even date attached

Uma Maheswary K. Controller of Finance

For SANTHOSH ALEXANDER & ASOCIATES Chartered Accountants

> Santhosh Alexander, FCA., M. No. 207251, Partner

REGIONAL CANCER CENTRE SOCIETY Income and Expenditure Account

	Previous Year	Sch Na.	Exponditure	Current V _{Sar}
ļ.,	Rs o	<u></u>		
	20180535,00		Opening Stock	23964°02.00
1	162274908,82	! A	Purchases Medicines, Chemica's Etc.	207207626.88
	144851964.91	3	Salaries And Allowances	
1	199472.00		Uniform And Liveries	137398657,27
1	688596,00	c	Rent, Rates &taxes	549749.0g
ſ	6 57344.00	Ď	Postage, Talephone & Telograme	3101:4 pg
	251464,50	E	"ravoling Exponses	815521.50
1	1133517,27		Printing Astationary	257368.00
1	115251.60	!	Advertiscment Charges	913430.00
1	12281880.00	F	Electricity And Water Charges	178246,00
	2000108,82	G	Repairs & Maintenance	13944734,00
1	3794851.60	н	Service Contract Charges	6408544,52
	160000.00		Audit Fees	4142535.75
	1163631,00	ı	Computer Exponses	179999,00
}	6793.00		Booka & Periodicals	421049.00
1	1346202.00		Expenses To Mar	9941.00
]	114641,50		Miscellaneous Expenses	1504465,00
	2198675,99	Ī	Flousekoeping Expenses	159518.Q0
	49138917.41	VI	Dopreciation	2511478.50
ļ	794391.37	·	Advances Written Off	58734292,91
	. 1689141.50		Drap Expendituro	0.00
- -	394842358.29	Total	Briop Exper Cituro	1700000.6c
		10-61		469099373,33

XIV SIGNIFICANT ACCOUNTING POLICIES

XV NOTES ON ACCOUNTS

Schedules A to L,XII, XIII and XIV form an integral part of this Statement.

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Auditor's Report
This is the Income and Expenditure Account referred to in our report of even date.

_{Trivandrum} (Reg. No. 567/81) for the Year Ended 31.03.2008

previous Year	Sch No.	Income	Current Year
\ 		·	Rs Ps
3.5 29 55040480.00 305000.00 136649604.70 150442555.36 1448790.30 1318187.00 4483487.00 23964102.00	K L	Grent-in-aid; Govi Of Kersis Deep Grant Received Investigation Fees Medicina Receipts Interest Income Training Fees Miscellaneous Income Closing Stock	60254790.58 1700000.00 151222308.70 205967350.79 4717056.90 2114472.00 1961347.14 25617884.00
21!90181.85		Excess Of Expanditure Over Incomo	5544163.22
394642356,2	9 Yetsi		459099373.3

Dr.K. Ramachandran Director Uma Maheswary K. Controller of Finance

For SANTHOSH ALEXANDER & ASOCIATES

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Chartered Accountants

Thirtivananthapuram, 23,12,2008

Santhosh Alexander, FCA., M. No. 207251, Partner

THE REGIONAL CANCER CENTRE SOCIETY

Schedule VI

ow energy linear accelerator	3511489.40	0.00	0.00	3611489 40
Hospital equipments(project)	13389501.00	9238548.00	0.00	22528049.00
Assats-telemedicines project	7718623.00	0.00	0.00	7718623,00
High energy linear accelerator	52987763.00	0.00	0.00	52987763.00
Talaphane aquipments	2955608.00	1355380.00	0.00	4310985.00
Assets (donations)	337612.00	0.00	2,00	337612,00
Lff and elevator	5913240.00	0.00	0.00	5913240 00
ulbrary books and Journals	23116443.65	3290510 00	0.00	26386953,65
Velriples	835391.60	490054,00	0.00	1325445 60
Gas and cylinder	7414297.05,		0.00	7425839,05
Computer hardware and software	3269433,00	1601441.00	0.00	4870874,00
Air senditioning	18048555.35	2514139,00	0.00	20562694,39
Fire detection	3841120.00]	0.00	3841120 00
Erectrical installation	38685460,90		0.001	39983488,9
Hospital & lab. Equipments	322271350.97	66878980.00	0.00	38915034g g
Ottice equipments	2583465,43	1 1	0.00	
Furniture and fittings	11391633,43			2.0,000,4
Water supply and drainago	2114586,43		0.00	10.00 00.0
Gobalt unit	18123455.30] """	0.00	1 .57110.0
Civil works	127118.63	100.000,112	1	101104047 \$
Buildings	148209712,50		0.00	1000,0
Land	1000.0	Of	ustion	31,3,200
Itam	Cost as on 01.04.2007	Additions	Gross Bl Ded	Cast

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TRIVANDRUM (REG. NO. 587/81)

_		DEPRECIATION		NET BLOCK	An on 24 02 2007
┞	Up to 31.3.07	And tions	Total upto 31,3,2008	Asion 31.3.2008	As on 31,03,2007
┢	0,00	0.30	0.00	1000.00	1000.00
	65224818.16	4445496.48	69670114.65	84464433.27	B2985094.34 -
١	79150.31	2398.42	B1548.73	45569.90	47988.32
l	-11333116.68	1018550.79	12351667.47	5771787 83	6790338.62
l	1870527.15	44108.89	1914636:04	249950.39	·· ·· 244059.28
١	7000460.99	575928.44	7578389,43	5183356.00	4391172.44
	2027287.40	83758.40	2111.056 B0	474636,63	556168.03
l	150144979.75	35850799 88	185995778.43	203154531.54	172126371.22
1	32220314.48	1164476.17	33384790.83	6598698.27	6465146.44
	3271439.63	185452 06	3356891.69	484228,31	569680.37
١	15161680.30	810152 11	48971832.44	4590881.94	2888875.05
	3243604.76	976361.55	4219963.33	650907.70	1 1
l	5732982 83	253923.97	5986906.57	1438902.48	1681304.45
1	228874.10	219314.30	44,8188,40	877257.20	806517.50
	12884938.94	2022302,21	14907241.15	11,459712 50	10231504.71
١	51,54080,23	113873.97	5237954.20	645285.80	759159.77
	304667,48	4941.68	309609.16	28002.94	32944.52
١	2500713.11	271540.93	2772254 04	1598731.98	454892.89
	20446652.72	. 4881166 54	25327819.26	27859943.74	32541110.28
	3580665.12	623693,68	4184358.80	3534264.20	4157957.88
	4332527.49		7075865.72	15551193.2	1 5 5
	-	541723.41	541723.41	3069785.9	9 3811489.40
	346723291.37	56734292.91	403457584.28	377473021.7	8 340223557.27

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REGIONAL CANCER CENTRE SOCIETY Trivandrum (Reg. No. 567/81) CANCER CARE FOR LIFE SCHEME Income and Expenditure Account for the year ended 31.03.2008

INCOME	Rs. Ps.	EXPENDITURE	Ra. Ps
Interest on FD & investments	6125709,00	Salaries & Allowances	138500.00
Excess of Expenditure over Income	521 352 7,60	Roimbursement to Patients	11099376.00
<u></u>		CCL Stationery and Printing	101360.00
TOTAL	11339236.00	TOTAL	1/339236.00

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Dr.K. Ramachandran Director

Uma Maheswary K. Controller of Finance

For SANTHOSH ALEXANDER & ASOCIATES

Chartered Accountants

Thiravananthapuram, 23.12.2008 Santhosh Alexander, FCA., M. No. 207251 Partner

Regional Cancer Centre, Thiruvananthapuram

AUDITORS REPORT

- We have audited the attached balance sheet of Regional Cancer Centre Society, Thiruvananthapuram as at 31.03.2008 and the Income and Expenditure Account for the year ended on that date together with the accounting policies and notes annexed thereto. These financial statements are the responsibility of the society's management. Our responsibility is to express an opinion on these financial statements based on our audit.
- We conducted our audit in accordance with auditing standards generally accepted in India. Those Standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.
- Further to our comments in the Annexure referred to above and subject to, Significant Accounting Policies No. 4 and Notes on Accounts No. 4.
 - We have obtained all the information and explanations which to the best our knowledge and belief were necessary for the purpose of our audit.
 - In our opinion proper books of accounts have been maintained by the Society.
 - c) The Balance sheet and Income and Expenditure account dealt with by this report are in agreement with the books of accounts.
 - d) Subject to our observations mentioned above, in our opinion and to the best of our information and according to the explanations given to us, the said accounts together with the notes thereon attached thereto—give a true and fair view in conformity with the accounting principles generally accepted in India.
 - (a) In the case of Balance sheet of the state of affairs of the society as at 31st March, 2008.
 - (b) In the case of the Income and Expenditure account of the deficit of the society for the year ended on that date.

For SANTHOSH ALEXANDER & ASOCIATES

Chartered Accountants

Trivandrum, 23.12.2008

Santhosh Alexander, FCA., M. No. 207251 Partner

REGIONAL CANCER CENTRE SOCIETY, TRIVANDRUM (Reg. No. 567/81) Schedule XIII

SIGNIFICANT ACCOUNTING POLICIES

1. Basis of Preparation of Financial Statements

To prepare Financial Statements in accordance with the historical cost convention, Generally Accepted Accounting Principles (GAAP) in India and the Accounting Standards issued by the Institute of Chartered Accountants of India.

2. Revenue Recognition

To recognize income from services at the time of delivery of services. To recognize income from investments when the right to receive the income arises.

3. Fixed Assets

To state Fixed Assets at Original Cost of acquisition and subsequent improvements thereto inclusive of freight, duties and taxes and incidental expenses related to acquisition and installation. To include related preoperational expenses in respect of projects involving construction in the value of capitalized assets.

4. Depreciation

To provide depreciation on all the assets held, on the written down value method at the rates adopted by the Society. To provide for depreciation for the whole year in respect of assets put to use for a part of the year.

5. Inventories

To value all the inventories at lower of cost and net realizable value. Cost includes freight and other related incidental expenses and is computed on weighted average method.

6.Borrowing Costs

To capitalize the borrowing costs that are directly attributable to the acquisition or construction of that capital asset and to recognize other borrowing costs as expense in the period in which they are incurred.

7. Government Grants

To account for Government Grants received as Capital Receipts [Shown as Capital Fund in the balance sheet] to the extent such grants are applied for the acquisition or construction of Fixed Assets and to treat the balance (if any) as Revenue Income.

Dr.K. Ramachandran

Director

Uma Maheswary K. Controller of Finance

For SANTHOSH ALEXANDER & ASOCIATES

Chartered Accountants

Thiruvananthapuram, 23.12.2008

Santhosh Alexander, FCA., M. No. 207251, Partner

REGIONAL CANCER CENTRE SOCIETY, TRIVANDRÚM (Reg. No. 567/81) Schedule XIV

NOTES ON ACCOUNTS

1. Contingent Liabilities

- (a) Demand of Rs.90,26,490/- by the Corporation of Thiruvanthapuram towards properly tax for the period upto 30/09/2002 is treated as a Contingent Liability and has not been provided for in the books of account.
- (b) Demand by the Executive Engineer, Special Buildings, PWD amounting to Rs.3,45,6157 is treated as a Contingent Liability and has not been provided for in the books of account.

2.Investigation

Investigation Fee includes Registration, Ward Charges, Nuclear Medicine, Radio-therapy, Imageology, Surgery, and Lab fee.

3. Interest on Treasury Deposits of CCL

Interest on Deposits of the CCL with the Treasury is accounted on Cash Basis.

4. Employee Benefits

Provision for Leave Salary has not been done.

5. Impairment of Assets

There is no indication of impairment of assets as per AS-28

6. Classification and Presentation

Figures for the previous year have been regrouped and recast wherever necessary to suit the current year's layout.

Dr.K. Ramachandran

Director

Uma Maheswary K. Controller of Finance

For SANTHOSH ALEXANDER & ASOCIATES

Chartered Accountants

Thiruvarianthaeuram, 23.12.2008

Regional Dancer Centre, Throvananthapuram

Santhosh Alexander, FCA., M. No. 207251, Partner

CERTIFICATE OF UTILISATION

1. During the year 2007-08 the Regional Cancer Centre Society received Grand in Aid totaling Rs. 500 facs from the Government of India as detailed below

SI. No.	Details	Amount
1. 2.	DD No.020902 dated 12.04.2007 Vide RTGS on 16.10.2007	1,00,00,000.00 4,00,00,000.00
	Total	5,00,00,000.00
2.	The amount was utilized as follows	
SI. No.	Purpose	Amount
1.	Acquisition of Hospital Equipments	5,00,00,000.00

3. We certify that the utilization mentioned under (2) above is true and correct as disclosed by the books of account of the society.

For SANTHOSH ALEXANDER & ASOCIATES

Chartered Accountants

Thiruvarianthapuram. 23.12.2008

Santhosh Alexander, FCA., M. No. 207251, Partner

Regional Cancer Centre, Thirtyenanthapuram

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Annua! Report 2007-2008

CERTIFICATE OF UTILISATION

During 2007-2008, the Regional Cancer Centre Society received Grant in Aid totaling Rs. 950 Lakhs from the Government of Kerala as detailed below.

Instali- ment	G.O Numbers	Date	Amount (Rs.in Lakhs)
1	GO(Rt) No.1514/2007/H&FWD	28.04.07	9000000
2	GO(Rt) No.2571/2007/H&FWD	13.07.07	18000000
3	GO(Rt) No.2962/2007/H&FWD	21.08.07	35000000
4	GO(Rt) No.3478/2007/H&FWD	10,10.07	8000000
5	GO(Rt) No.4009/2007/H&FWD	27,11.07	8000000
6	GO(Rt) No. 537/2008/H&FWD	12.02.08	12000000
7	GO(Rt) No.1116/2008/H&FWD	28.03.08	5000000
<u> </u>		TOTAL	950000DD

The amount was utilized as follows

SI	Purpose	Amount
1	Acquisition of Assets	34745209.42
2	Education, Research and Subsidised Treatment	15254790.58
3	Operational Expenditure	45000000.00
	Total	95000000.00

3. We Certify that the utilization mentioned under (2) above is true and correct as disclosed by the Books of Account of the Society.

For SANTHOSH ALEXANDER & ASOCIATES Chartered Accountants

Thiruvananthapuram, 23.12.2008

Santhosh Alexander, FCA., M. No. 207251, Partner

AJITH KUMAR T. B.Com. FCA CHARTERED ACCOUNTANT

T.C.6/1012, Konathukulengara, Vattiyoorkavu.P.O., Trivandrum - 895 013, Telephone : 0471 2485939

Mobile :

9349990489

E-mail: ajkhkumarca @ yahoo.com

AUDITOR'S REPORT

I have audited the accounts of the Foreign Contribution for Research Projects of the Regional Cancer Centre Society, registered as per T.C. Literary Scientific and Charitable Societies Regulation Act XII of 1955 (Reg. No. 567/81) with registered office at Medical College P.O., Thiruvananthapuram-695011, Kerala State for the year ending 31st March, 2008 and retevant books and vouchers and certify that according to the audited accounts.

- The brought forward foreign contribution at the beginning of the financial year 2007-2008 was Rs.1,11,91,306,07
- Foreign Contribution worth Rs.1,10,86,249.89 with interest of Rs.2,47,913.00 were received by the Association during the year ended 31st March,2008.
- The balance of unutilized foreign contribution with the association at the end of the financial year 2007-2008 was Rs.1,29,32,979.56
- Certified that the Association has maintained the accounts of foreign contribution and records relating thereto in the manner specified in section
 of the foreign contribution (Regulation) Act, 1976 read with rule 8 (1)
 of the foreign contribution (Regulation) Rules, 1976.
- The information furnished above and in the Balance Sheet and statement of receipts and payments are correct as checked by me.

Trivandrum, 19th December,2008. T. AJITH KUMAR B.Com, FCA CHARTERED ACCOUNTANT MEM. NO. 209348 THE REGIONAL CANCER CENTRE

OHE HATT	4mount	Amount ASSETS	ASSETS	Amount	Amount
נואפורוובא	(Rs. Ps.)	(Re. Ps.)		(Rs.	(Rs. Ps.)
	,			Ps.)	
CAPITAL FUND			FIXED ASSETS		
As cm 1-4-2007	11580194.82		Computer		1608501.00
Add : Utilised During the Year for	3687.00		Primer & UPS		259426.00
Fixed assets					
	11563981.82	• • • •	Fax Machine		51359.DU
Arid Interest	1167216.00		Refrigerator	•••	11953.00
		1275 (097.82	Seep Freezer		123674.00
		•	Vehicls		1407937.60
مالوبهن الما جمارين		460495,00 FAN	FAN .		3687.00
			Furniture		608768.29
·			Equipments	<u>.</u>	3526991.00
	-		Air Conditioner		199689.00
Project Balances as Per		9781737.41	Photocopler		322735.00
Schedule			· · · · · · · · · · · · · · · · · · ·		
Research Funds as per Schedule		3151242.15	3151242.15 Building Addl. Faciliftes		785829.55

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CURRENT LIABILITIES CURRENT ASSETS & 100006.00 1107006.00 Safary Rocoyeny 37,579.00 LOANS AND ADVANCES 1107006.00 Payable to RCC Z36160.00 Term Deposit with Fed.Bank 2420793.00 Payable to RCC Z36160.00 Term: Deposit with Fed.Bank 2420793.00 Cash in Hand Cash in Hand 4277599.54 Imprest Bent Deposits 6000.00 Rent Deposits 28418311.38 TOTAL				
37,579.00 LOANS AND ADVANCES Interest Accrued but not Due Term Deposit with S.B.T 236160.00 Term: Deposit with Fed.Bank Cash in Hand Cash in Hand Cash at Bank Imprest Rent Deposits Rent Deposits 101AL	CURRENT LIABILITIES		CURRENTASSETCA	 :
Interest Accrued but not Due Term Daposit with S.B.T 236160.00 Term Deposit with Fed Bank Cash in Hand Cash at Bank Imprest Rent Deposits Rent Deposits 726418311.38 TOTAL	Safary Rocovery	37,579.00	LOANS AND ADVANCES	
Term Daposit with S.B.T 236160.00 Term: Deposit with Fed.Bank Cash in Hand Cash at Bank Imprest Rent Deposits Rent Deposits 726418311.38 TOTAL			Interest Accrued but not Due	1107006.00
235160.00 Term: Depoisit with Fed.Bank Cash in Hand Cash at Bank Imprest Rent Deposits Rent Deposits 728418311.38 TOTAL			Term Doposit with S.B.F	9623689 (A)
Cash in Hand Cash at Bank A2 Imprest Rent Deposits Rent Deposits 28418311.38 TOTAL	Payable to RCC	235160,00	Term: Deposit with Fed.Bank	2420793.00
Capin at Bank 42 Imprest Rent Deposits 28418311.38 TOTAL		—— —	Cash in Hand	34674 (3)
Imprest			Cash at Bank	4277599.54
Rent Deposits 328418311.38 TOTAL 2641		·	Imprest	60,00,00
28418311.38 TOTAL			Rent Deposits	38000,00
	TOTAL	28418311.38	TOTAL	2641831138
				200

attached even date त्यक्रा व

Finance Manager (Projects)

Director

T. AJITH KUMAR B.Com, FCA CHARTERED ACCOUNTANT MEM. NO. 208348

Frivandrum, 19th December,2008.

received during the year 597487.00 247913.00 Travelling expenses Interest Received 303380.00 Miscellaneous 35074.00 Repairs 102948.00 Postage&Communications 91938.00 Vehicle Maintenanco 4280.00 Slides & Photographs ... 241323,00 Stationary 5337.00 Internet connection charge 711545.00 Medicines 51961.00 Building maintenance 5490.00 Electrical maintenance 124665.00 Building rent 348508,00 Overheads Charged 21493.00 Computer Expenses 29314.00 Maintenance others 31588.00 Conference & Seminars 659461.00 Vehides

THE REGIONAL CANCER CENTRE SOCIETY, TRIVANDRUM (Reg. No. 567/81)

Foreign contribution for Research Projects Receipts and Payments Account for the year ended 31-03-2008

11191306.07 By Salary & Allowances

Consumables

Electricity Charges

Air Conditioner

Equipment

Printer

Fan

UPS

Furniture

PhotoCopier

Computer

Payments.

Amount (Rs)

11086249.89

RECEIPTS

Poreign Contribution

To Opening balance

PAYMENTS

Amount (Rs)

5360080.40

445541.00

35463.00

67600.00

30830.00

6850.00

80910.00

46705.00

4798;00

2100.00

135850.00

12932979.56

22525468.96

Vide my report of even date attached.

Excess of Receipts over

Trivandrum 19th Dec.2008.

TOTAL

Finance Manager (Projects)

Regional Cancer Centre, Thiruvananthapuram

DIRECTOR

22525468.96 TOTAL

TAJITH KUMAR B.Com, FCA CHARTERED ACCOUNTANT

MEM.NO:209348

Annual Report 2007:2308

TAJITH KUMAR B.Com, FCA CHARTERED ACCOUNTANT MEM.NO:209348

AJITH KUMAR, T. B.Com, FCA CHARTERED ACCOUNTANT

Vattiyoorxavu.P.O., Trivandrum - 695 013, Telephone : 0471 2495939 T.C.6/1012, Konathukulangara, 9348990489

E-mail: ajithkumarca 🕲 yahoo.com

AUDITOR'S REPORT

and vouchers and certify that according to the audited accounts. Cancer Centre Society, registered as per T.C Literary Scientific and Kerala State for the year ending 31st March, 2008 and relevant books registered office at Medical College P.O. Thiruvananthapuram-895011, Charitable Societies Regulation Act XII of 1955 (Reg.No.567/81) with have audited the accounts of the Project Cell of the Regional

- the year ended 31st March,2008 was Rs.3,40,32,475,74, Total Financial Assistances from funding agencies in India during
- end of the financial year 2007-2008was Rs.2,21,91,869.58 The unutilized Project Fund balance with the association at the
- checked by me statement of Income and Expenditure Account are correct as The information furnished above and in the Balance Sheet and

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Trivandrum,

T. AJITH KUMAR B.Com, FCA CHARTERED ACCOUNTANT

MEM. NO. 209346

18th December, 2008

THE REGIONAL CANCER CENTRE SOCIETY, TRIVANDRUM (Reg. No. 567/81) PROJECT CELL (Financial Assistance received from National Agencies for Research Projects) Balance Sheet as at 31st March 2008

	:				
LIABILITIES	AMOUNT (Rs)	AMOUNT (Rs)	ASSETS	AMOUNT (Rs)	AMOUNT (Rs)
Capital Fund :- Income and Expendituro A/c:. As per East B/S Add: Excess of Income over	5705139.16 4135970.14	9841109.30	Fixed Assets:- Sch-2		178578.16
Expenditure for the year Training Fund(Schedule-5)	ļ	3629979.90	Foreign Contribution Receivable Account TERM DEPOSITS :		111987.00
Current Lizaliities	50075 00		SB7 Punjab Nat. Bank	129491175 1500000	14449117.00
Security Deposits Project Balances as per Sch-1 Salary Recovery	58875.30 22191889.58		Cash in Hand - Sch-3 Cash at Bank - Sch-4		2760.00° 18978394.62
Payable to RCC Other Liabilities			Income tax Rocovery Overteads Receivable	<u> </u>	3705.00 587666,00
NBRR Project (sale of vehicle)	· · · · · · · · · · · · · · · · · · ·	85600.00 36362861.70	The state of the s	<u> </u>	1139234.00 911420.00 36362861.78

Vide my report of even date attached.

income and Expenditure Account for the year ended 31st March 2008 THE REGIONAL CANCER CENTRE SOCIETY

Salary Paid 222728.30 Income from Projects 17avalling Expenses 40309.00 Interests received 53550.00 Interests	Expenditure	Amount	Income	Amount
in Sin		(Rs.Ps.)		(Rs.Ps.)
Nure 4	Salary Paid	222728,30	Income from Projects	3298374.18
. Inte	Travalling Expenses	40309.00	Interests received	1210075.00
. Inte	Audit Fee	53520.00		
Ture .	Printing & Stationery	21158.00		
. Aur	Computor Stationery	1145,00		
	Postage & Telephone Exponses	1177.00		
	Other Miscellandous Expenses	7648.00		
	Depreciation	25113.74	·	
	Excoss of Income Over Expenditure	4135970.14		
	TOTAL	4528149.18	TOTAL.	4508149.18

TAJITH KUMAR B.Com, FCA CHARTERED ACCOUNTANT

DIRECTOR

Finance Manager(Projects)

MEM.NO:209348

			_
Regional C	ancer Centre.	Thirtwarantheouram	

19th December 2008

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Regional Cancer Association, Thiruvanarthapuram

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ACKNOWLEDGEMENTS

Ministry of Hoalth & Family Welfare, Government of India Ministry of Information Technology, Government of India Department of Science and Technology, Government of India

Indian Council of Medical Research, New Delhi World Health Organisation, Geneva, Switzerland World Hoalth Organisation, Regional Office, New Delhi

National Cancer Institute, Bethesda, Maryland, USA International Agency for Research on Cancer, Lyon, France

Sree Avittam Thirunal Hospital for Women and Children

Director of Health Services, Government of Kerala Atomic Energy Commission, Government of India

University of Kerela, Thiruvananthapuram Mahatma Gandhi University, Kottayam

Drugs Controller, Thirtivananthapuram

Indian Space Research Organisation Finnish Cancer Society, Finland University Grants Commission Corporation of Thiruvananthapuram Health Research Foundation, Japan Kairali TV, Thiruvananthapuram Care Plus, Thiruvananthapuram Asraya, Thiruvananthapuram

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Medical College, Thiruvarianthaptiram

Dental College, Thiruvananthapuram

Department of Health & Family Welfare, Government of Kerala

International Union Against Cancer (URCC) Geneva, Switzerland

Director General of Health Services, Government of India, New Delhi

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Department of Economics and Statistics, Government of Kerala

College of Pharmaceutical Sciences, Thiruvananthapuram

Centre for Earth Science Studies, Thiruvananthapuram

Prathyasa, Thiruvanan hapuram

SDM Cancer Relief Fund, California All our Wellwishers and Friends