

Five patients needing radiation but no  
in-country access

Memory Nsingo

15 December 2015



# Radiotherapy project update

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Remigio Makufa  
GPH Oncology Physicist





Mpule

2001

2006

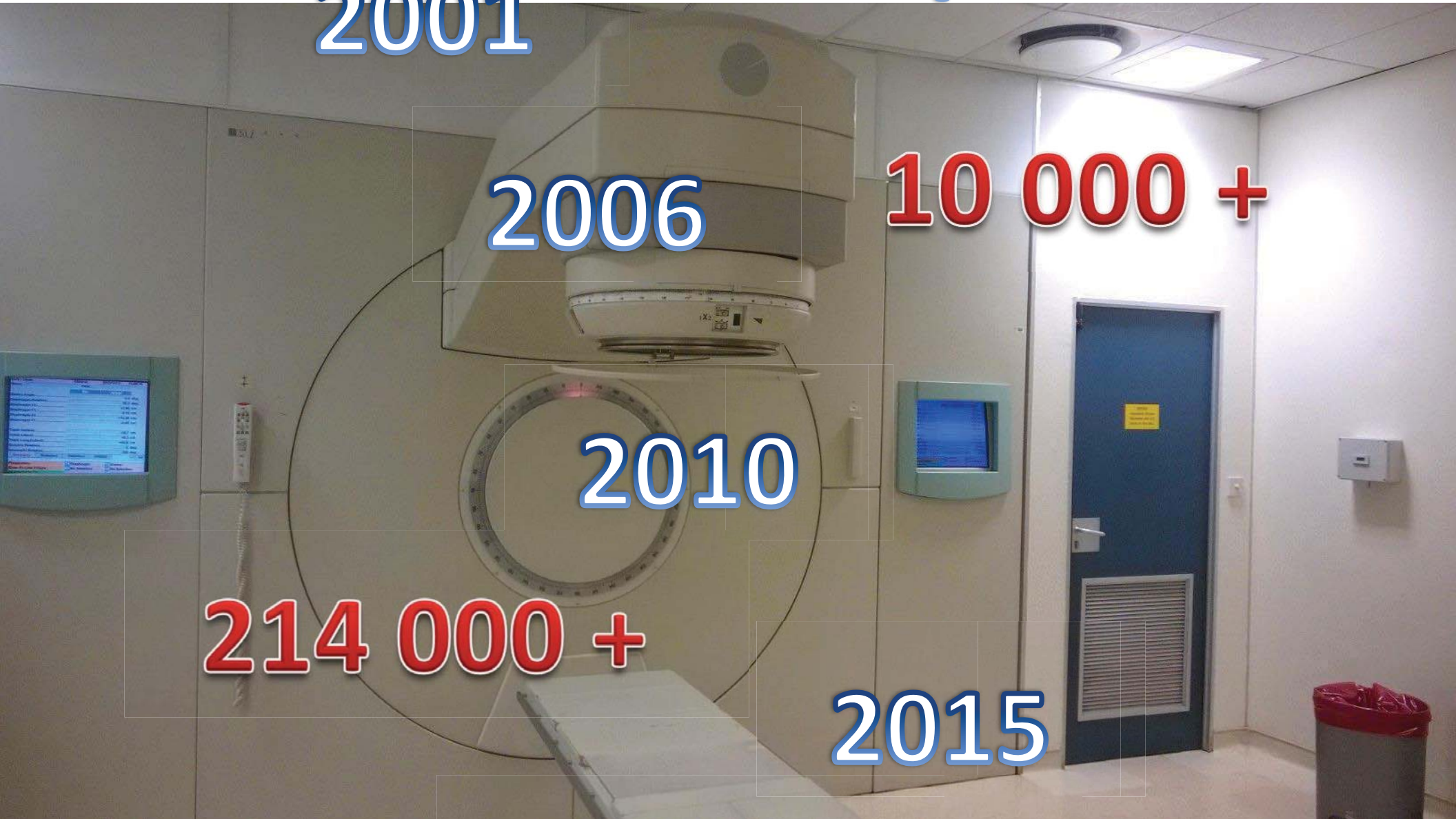
10 000 +

2010

214 000 +

2015

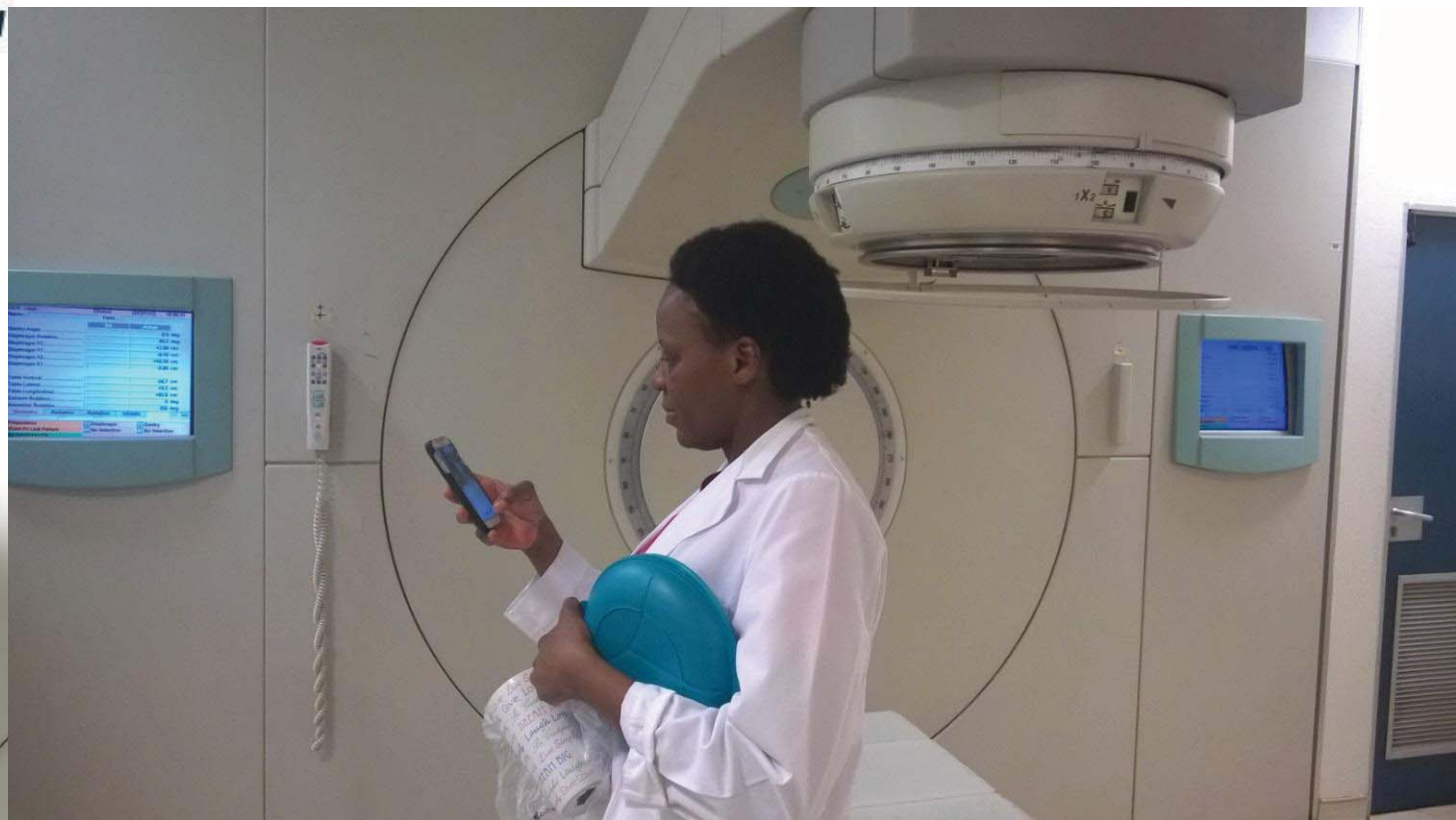
Elekta Precise





Nov 2015





Nov 2015



Elekta Training  
Centre, Cape Town

16-20 Nov 2015  
MONACO

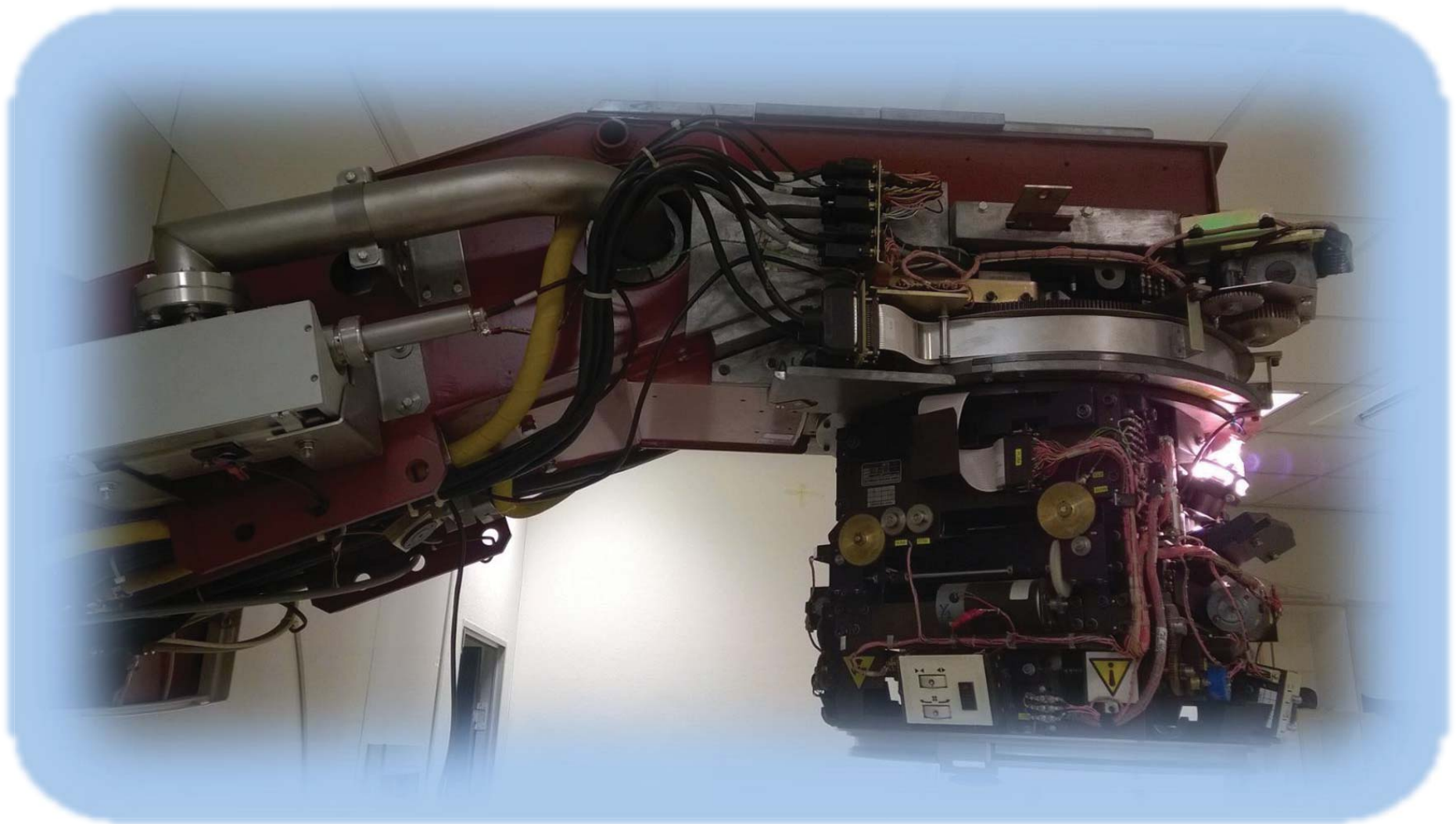
# MGH ATTACHMENT THERAPIST

-January 2015

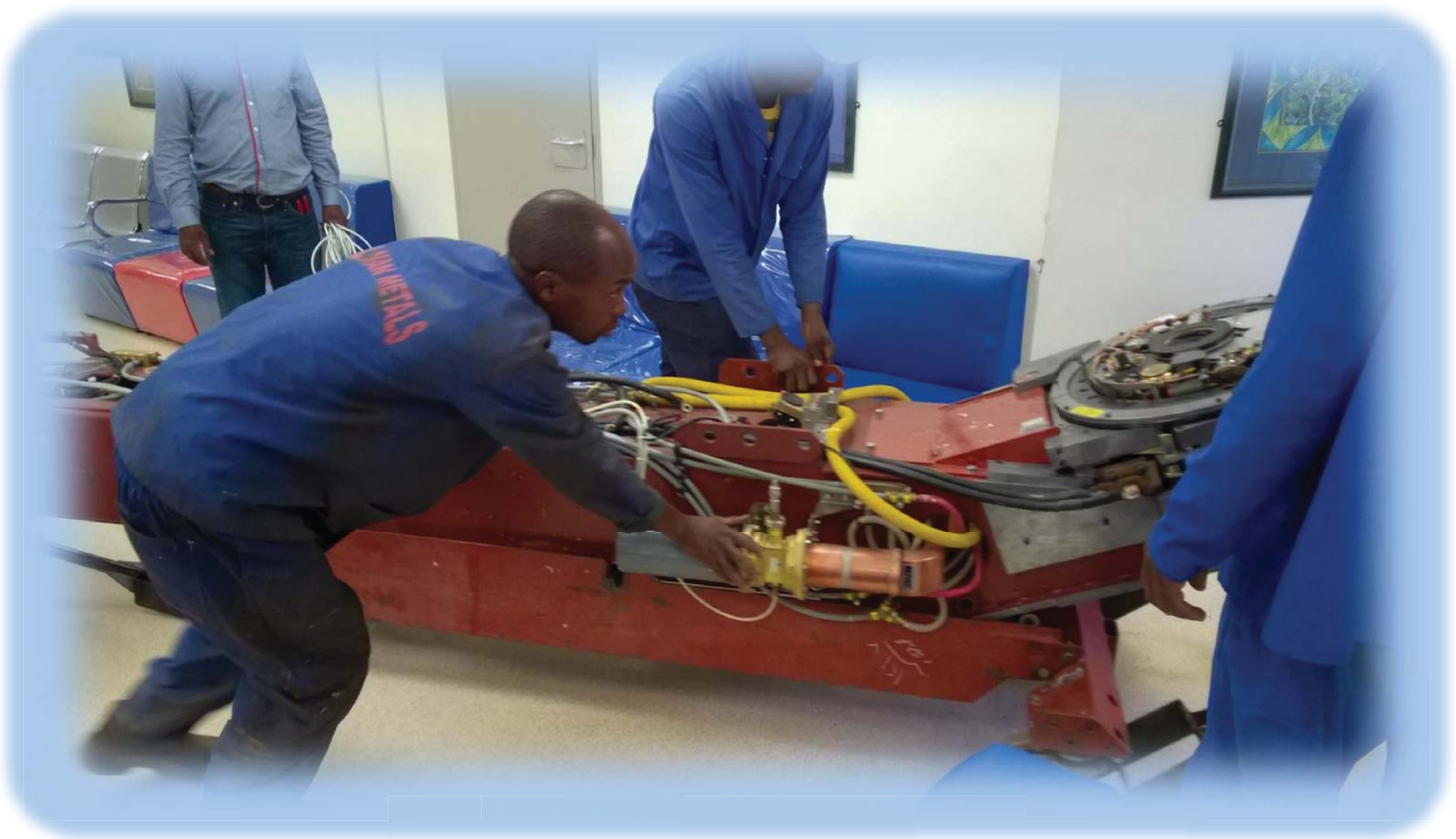




# LINAC DE-INSTALLATION







18 Nov 2015 09:26



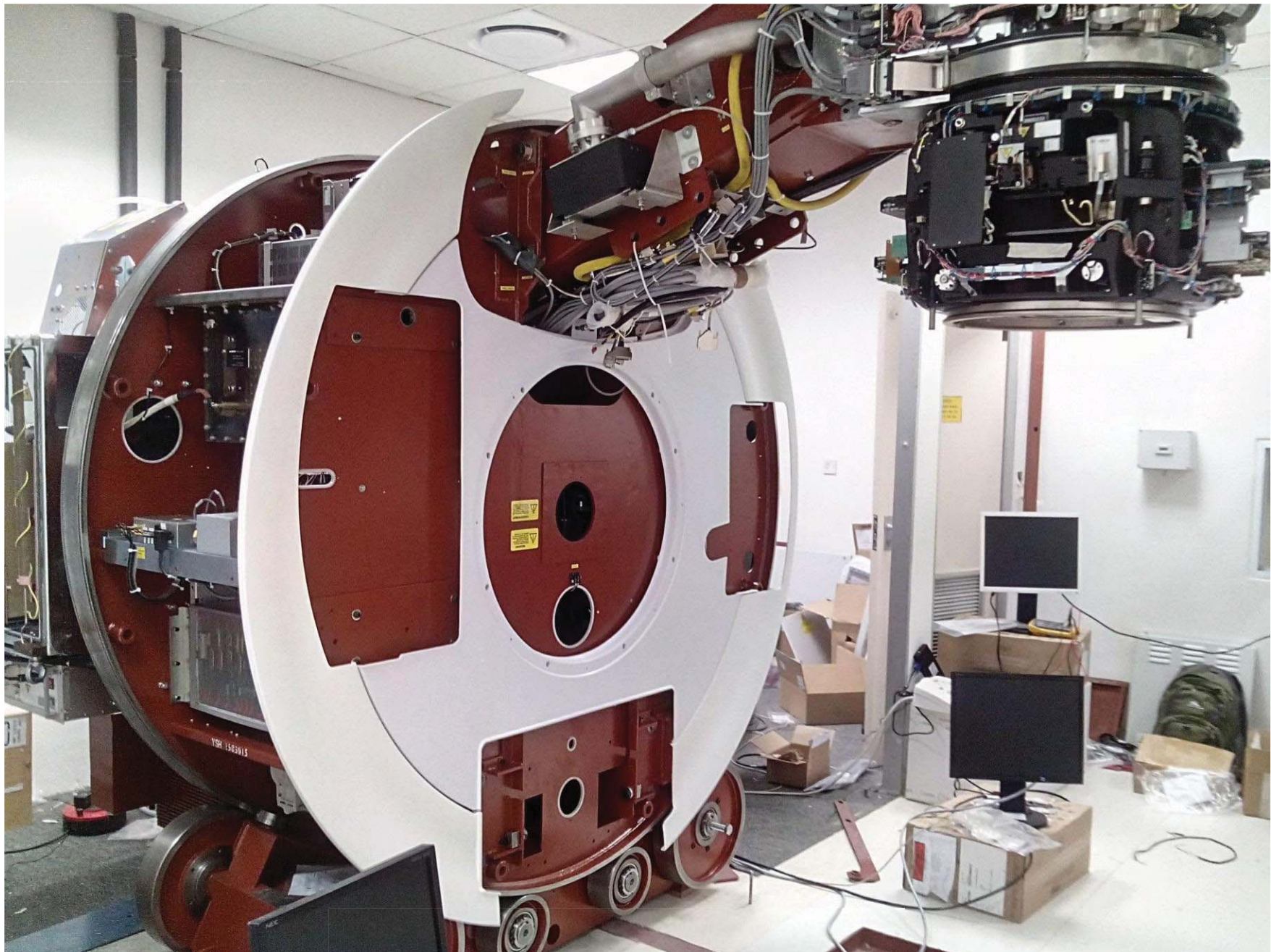
18 Nov 2015 11:38



2 DECEMBER 2015







9 DEC 2015





14 DEC 2015





14 DEC 2015



Linac Installation Phase 2  
*On schedule*

ELEKTA OIS Software  
*On schedule*

Application training  
*On schedule*

25 JAN 2016 GO LIVE!

# Acquisition of MOSAIQ PCs

## Beam Modeling for MONACO







Our Dream .....

# Clinical implications

- When to start referring patients to GPH
- When to stop sending patients to South Africa.



# Update on status of patient referrals:

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Dr. Sebathu Chiyapo



# Patient 1:

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Patient requiring brachytherapy post external beam radiation





# Patient 1, continued...

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- 43 year old patient with cancer of cervix stage IIb
- Completed external beam radiation locally (chemoRT) in November 2015.
- On completion patient has near complete local tumour resolution
- Is to have brachytherapy in SA
- Patient says she is going in January 2016



# Patient 1...Discussion

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- Timing of completion of chemoradiation for cancer of the cervix
- Potential complications of delaying brachy
- Experience from previous patients delayed





# Patient 2: Dr. Zola

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- Patient with newly diagnosed glioblastoma multiforme



# Patient 2...continued

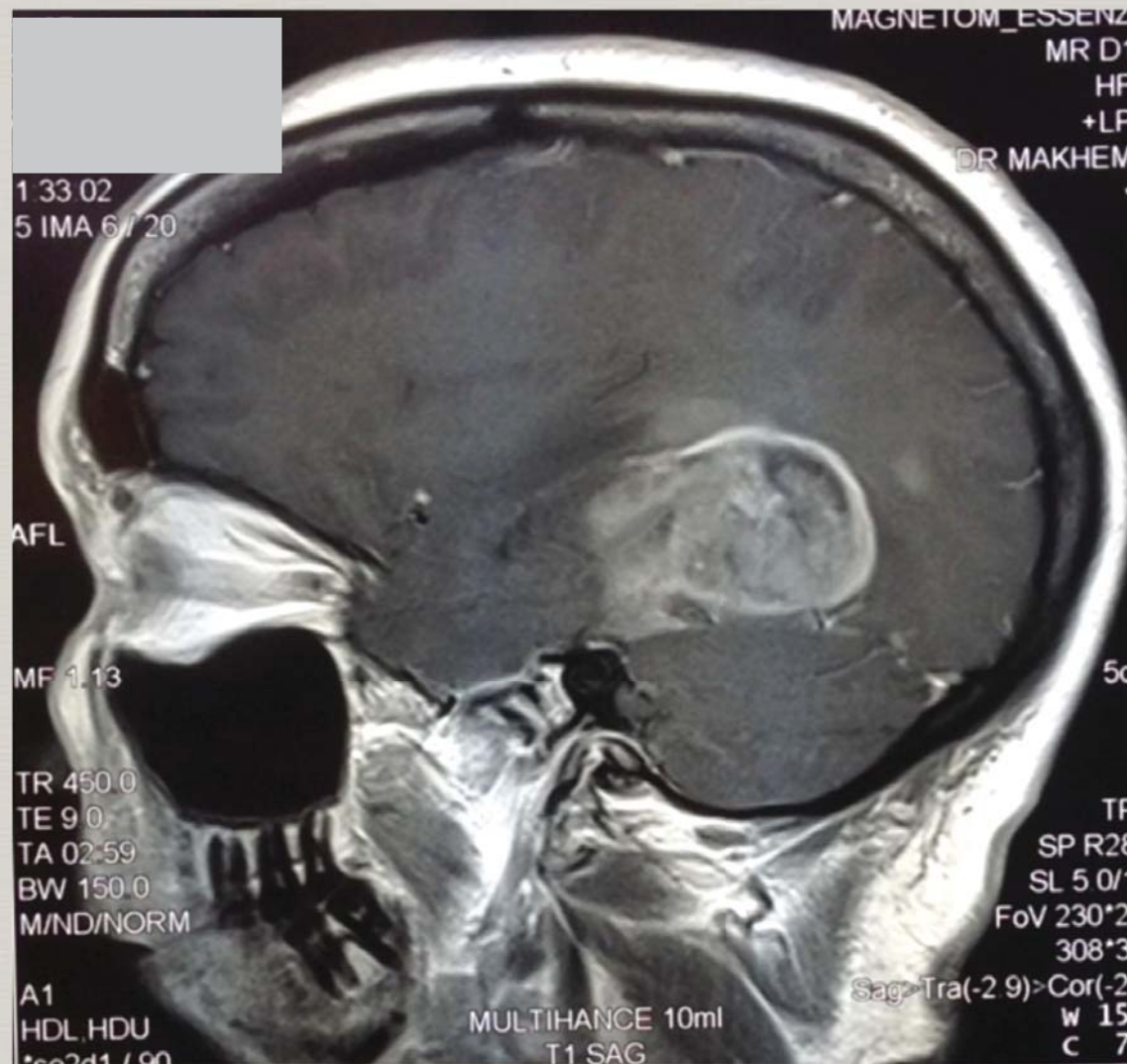
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- Presented with persistent headache for 2 months
- Initial MRI then non-conclusive
- MRI done November 2015 was suspicious for GBM.
- Biopsy (8mm fragment) confirmed GBM. Note only biopsy no debulking
- ? management

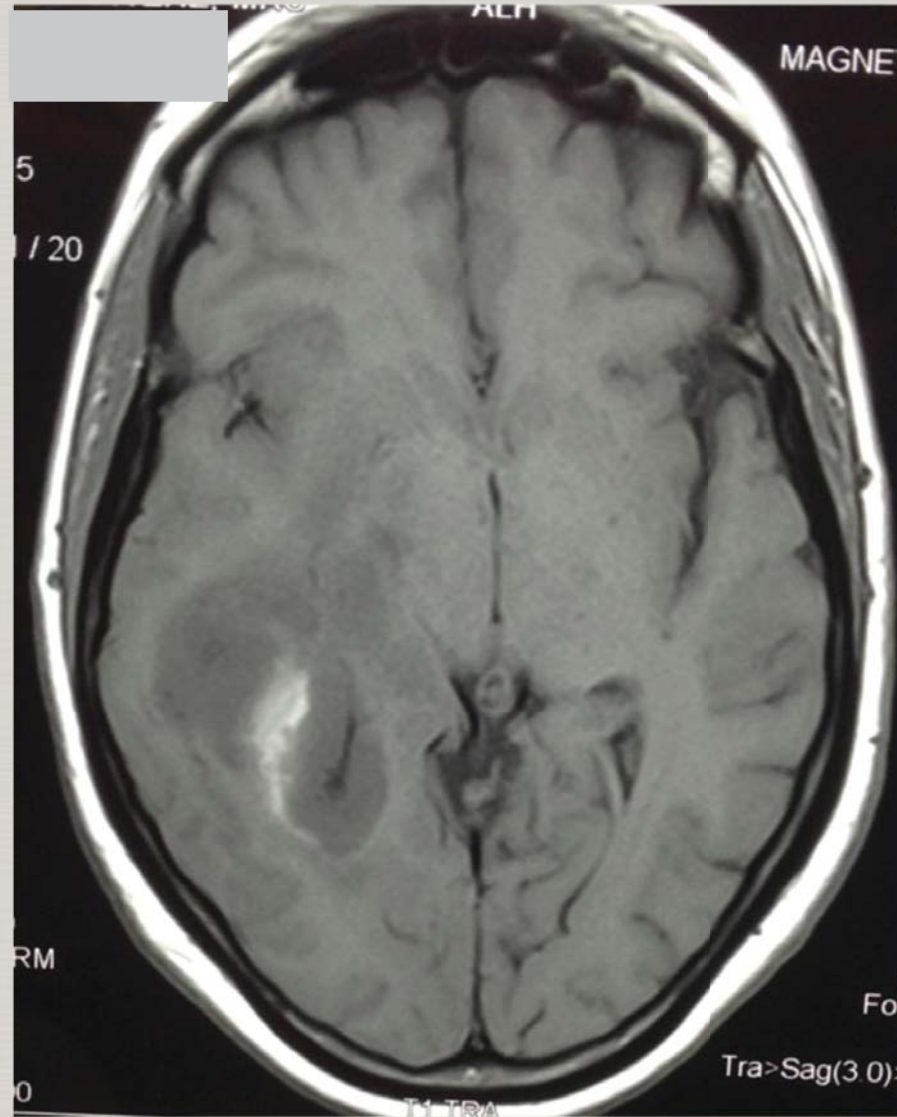




# Patient 2...continued

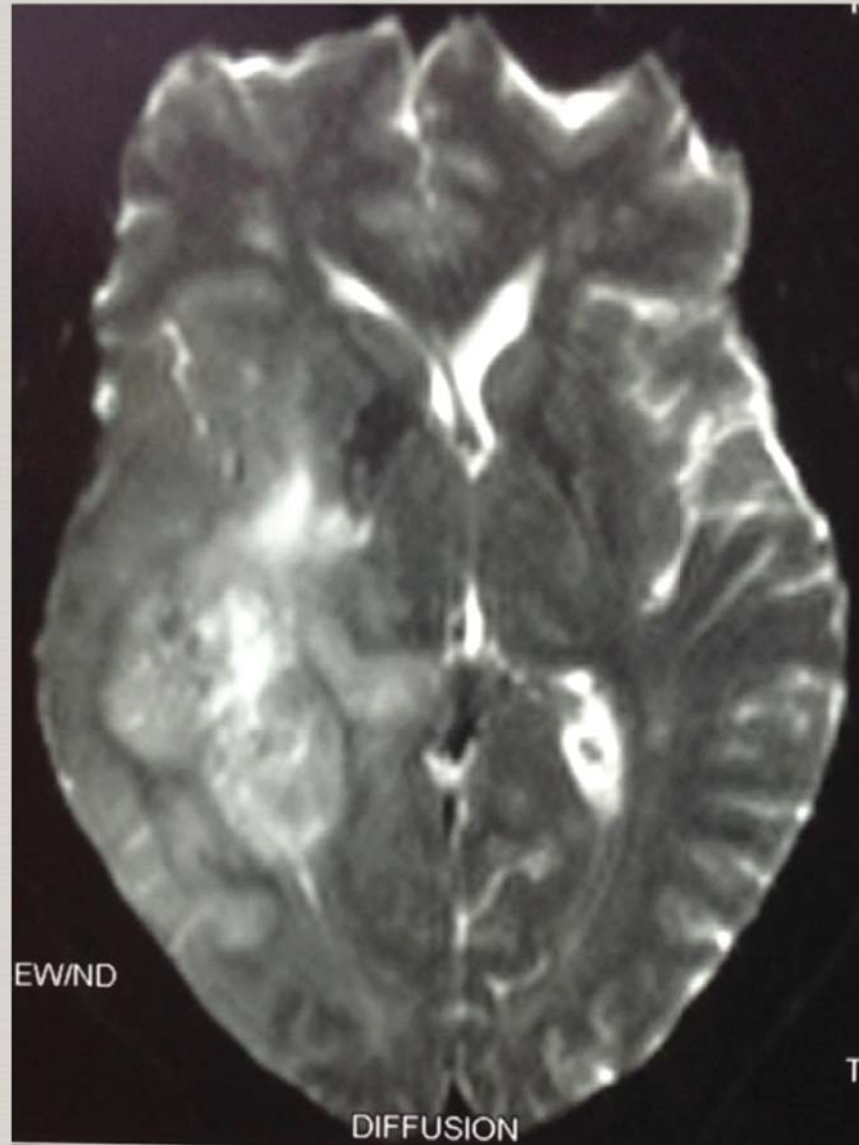


# Patient 2... continued





# Patient 2...continued



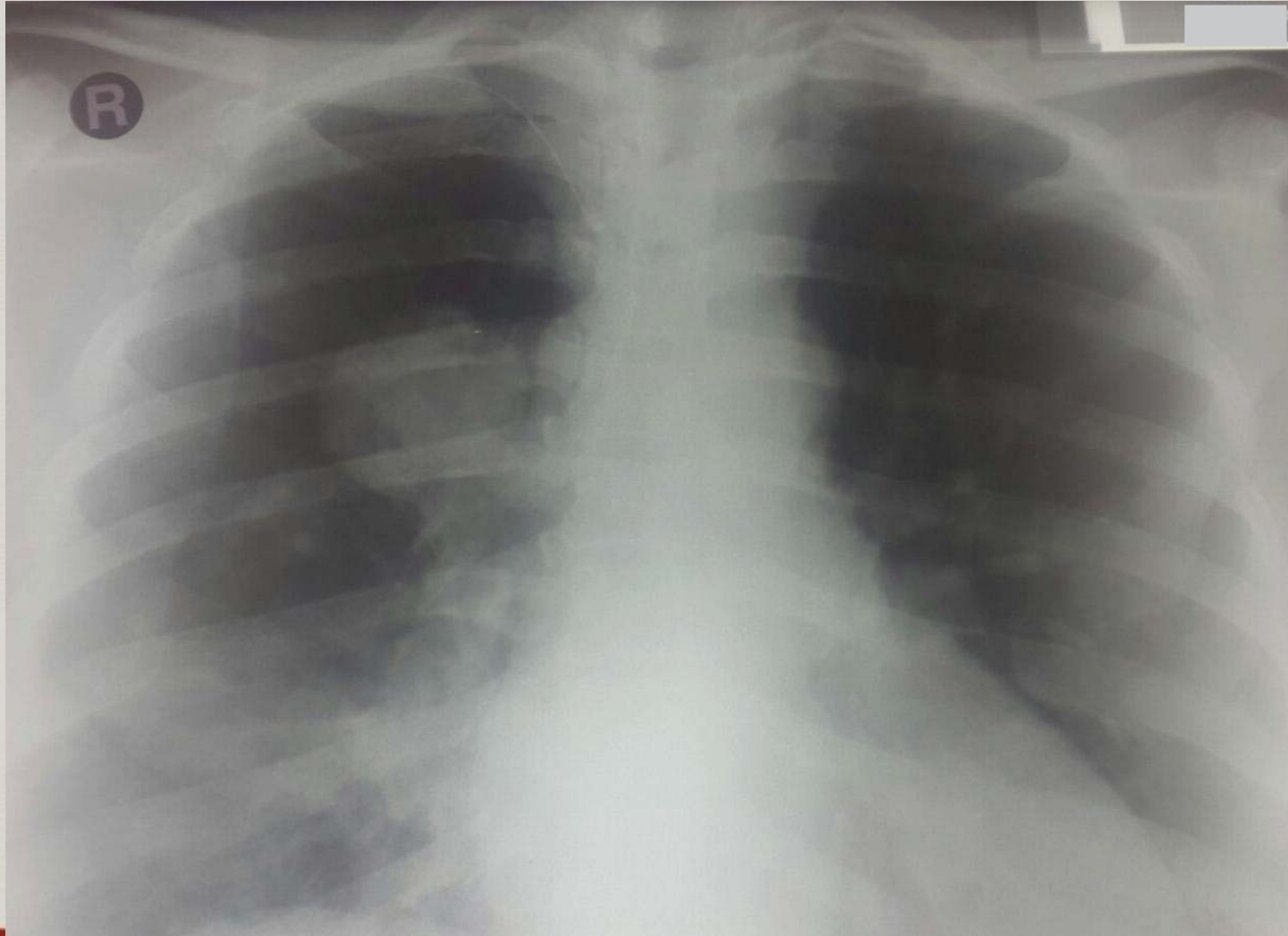
# Patient 3...

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- Patient with metastatic malignant melanoma with brain metastases
- Adjuvant interferon in 2011
- Metastatic 2015 to skin, lung, liver

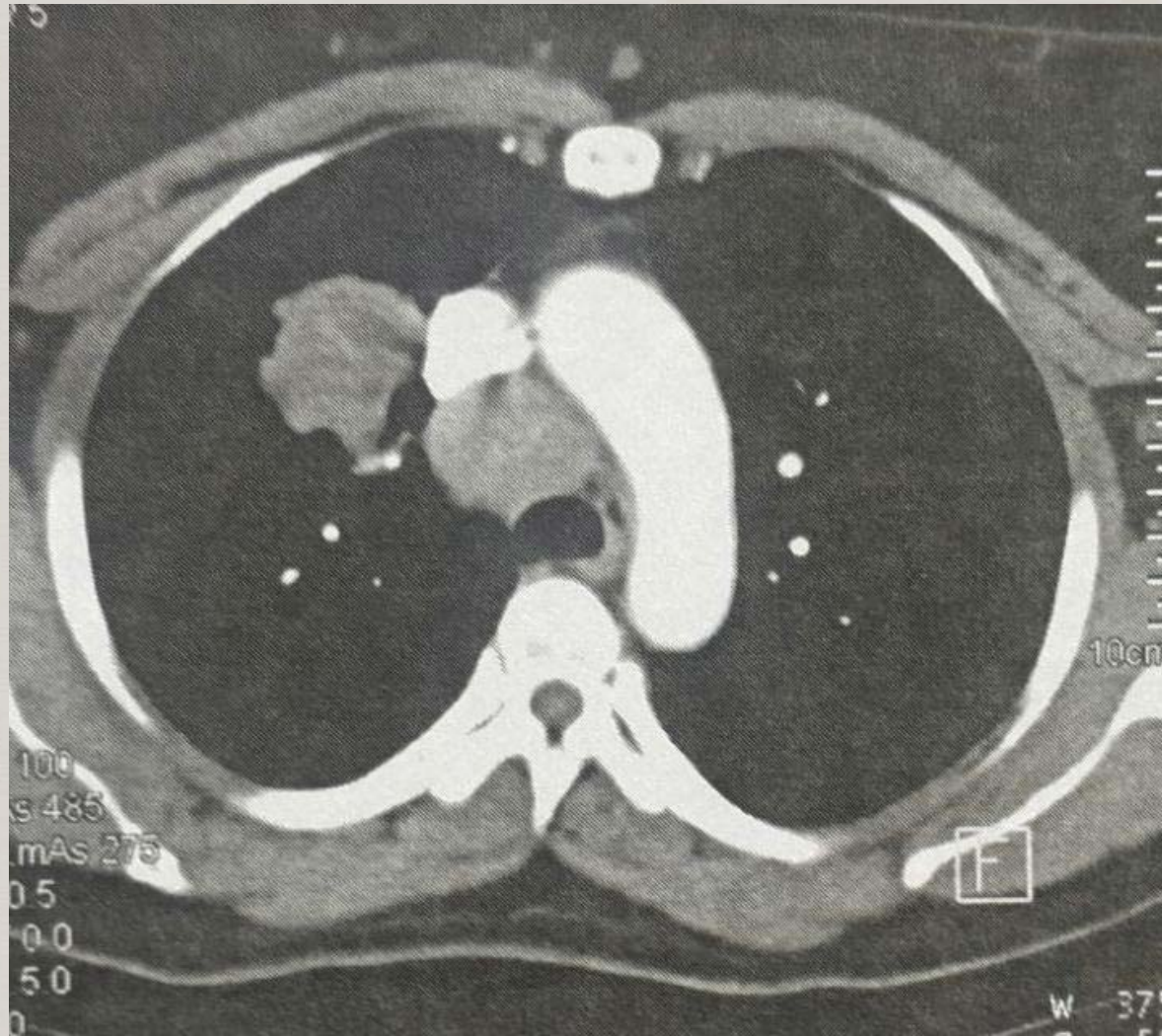


# Patient 3...continued

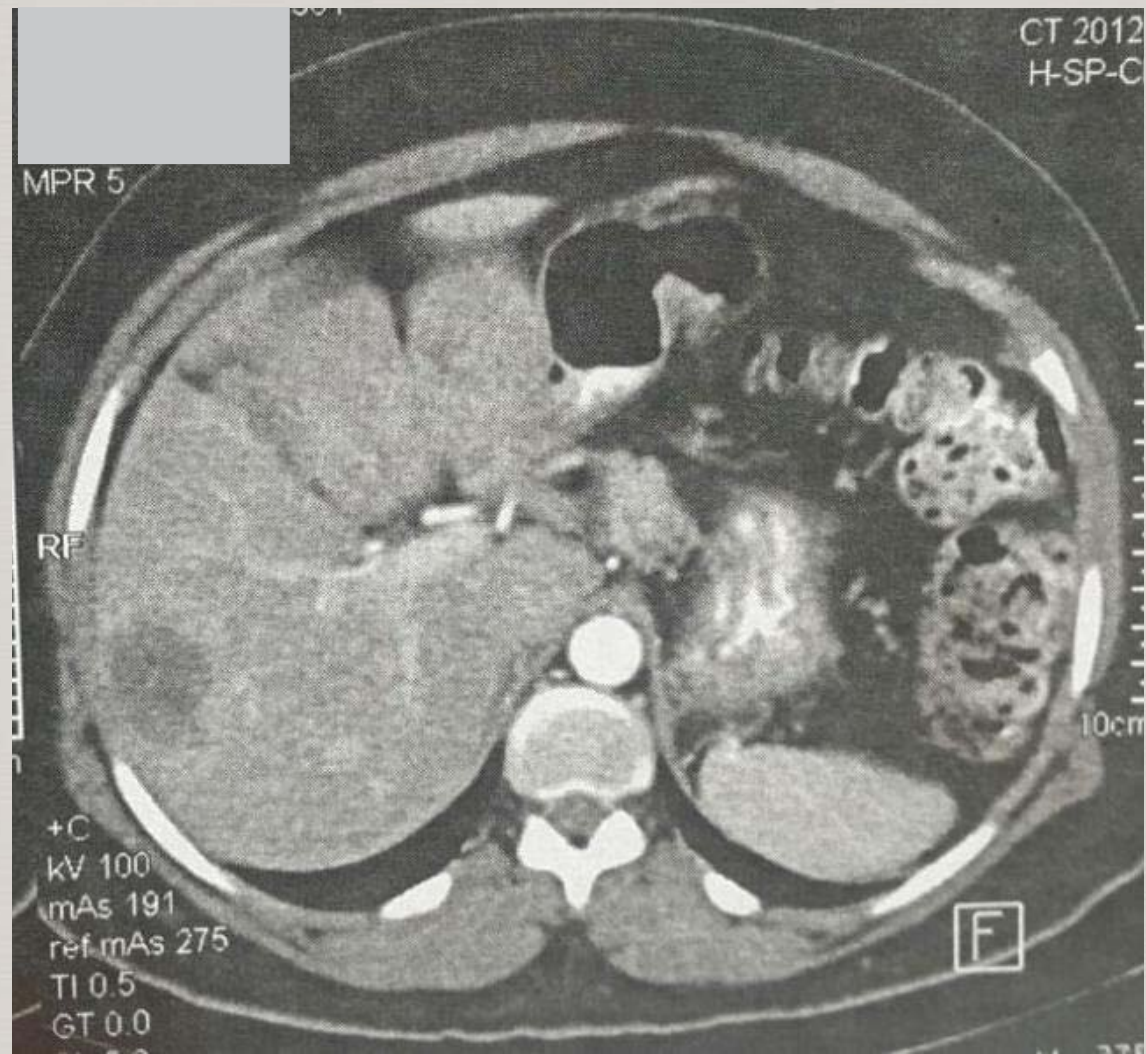




# Patient 3...continued



# Patient 3...continued





# Patient 3...continued

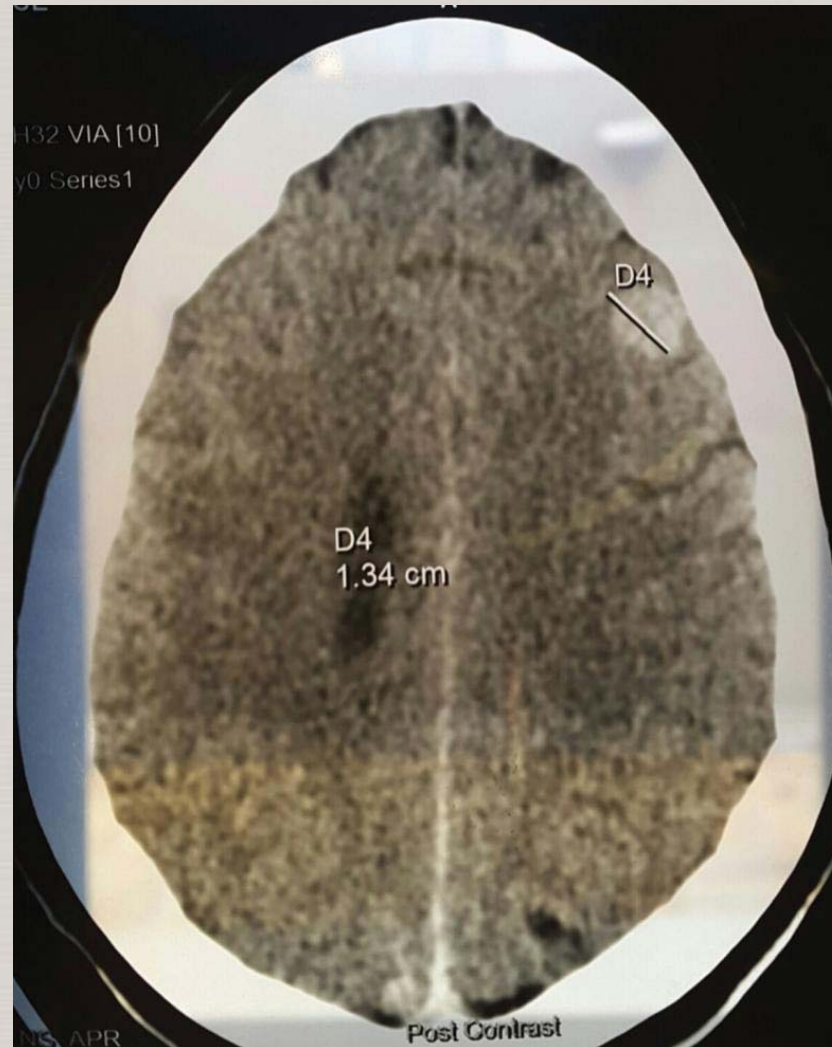
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- Referred to Marina to try to source immune therapy (very costly)
- Received Temozolamide but S-100 increasing to > 10 000 after 2 cycles
- Changed to Darcabazine
- Presented with confusion during second cycle of DTIC





# Patient 3...continued



# Patient 3... Management Plan?

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# Patient 4

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- Patient with early stage Non Hodgkins lymphoma requiring involved field radiation post chemo





# Patient 4...continued

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- 38 year old
- HIV negative
- PS 0
- Large B-cell Non Hodgkins lymphoma right tonsil with right cervical lymphadenopathy
- Initial lymph node size > 6cm
- Patient offered RCHOP x 6 then involved field radiation
- Completed chemo October 2015



# Patient 4...continued

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- Funding issues/ could not get timely radiation
- Patient also not convinced she needed radiation
- Referred for PET CT



# Patient 4...continued

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- Two enlarged right cervical lymph nodes particularly level 2 and 3, 27x 23 mm in diameter
- SUV 7.87 and 9.73
- Features compatible with neoplastic disease involving the right cervical lymph node chains
- No further sites demonstrated suspicious for neoplastic disease.





# Patient 4...Plan of management?

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# Patient 5

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- 55 year old female
- Stage IIB cancer of cervix
- Completed radiation November 2015.
- Had about 3 cm residual vault tumour on completion
- Was ill with DVT and pemphigus.
- Was referred to SA for brachy
- Died in SA? Cause of death?



# Patient 5...continued

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- ? Communication channel with SA?
  - ? Logistics of repatriating body (State responsibility?)
- Difficulty with referring ill patients.





# Patient 6.... 64yoF with vaginal bleeding

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## Presenting symptoms

- Bleeding started June 2014, evaluated in July
- Diagnosis Sept 2014, surgery in Feb 2015
- Serowe oncology in Aug, but oncologist on leave
- NRH Oncology in Oct 2015, PS 1
- Cervical cancer, stage IIB
- Curative chemoRT planned

## Past medical history

- HIV uninfected, negative in June 2015
- Delivered 7 children
- Married lives in large village in Central district



# Patient 6...continued

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## Treatment and plan

- Guarantee form completed on presentation for care in RSA
- Given neo-adjuvant cisplatin

## Events

- No response on guarantee form approval
- Patient advocated for self at MOH
- Developed rectovaginal fistula, mets/stage IV
- N/V and abdominal pain, PS 3 to 4
- Deemed no longer candidate for curative therapy or transfer to South Africa, receiving comfort-oriented care

