

## The Cancer Epidemic & the Need for a Proper Healthcare Delivery System in India

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Cancer, HIV/AIDS and cardiac diseases are the three biggest killers today. The state of a developing country's health system is often judged on parameters like the Infant Mortality Rate, which is largely dependant on control of infectious diseases. On the other hand, it has become popular to blame the rise of cancer and cardiac disease on the increased "westernization" of our country. While this may or may not be true, it is essential to recognize that such a trend cannot be reversed in a hurry, hence the need to try and cope better with these diseases.

The problems of a health care system like India's is the heterogeneity and sheer lack of resources that hamper proper care. Invariably, with regard to cancer, the focus has been on treating it, less on prevention and even on diagnosis. This is wrong because some cancers can be prevented and many cancers can be treated more effectively if diagnosed early. Too often, we see oncologists being recruited to run the occasional cancer prevention/detection camp—this is part of the "vertical" approach in health care; unfortunately cancer waits for no one and it is necessary to evolve a more effective "horizontal" approach involving primary care providers, who can be involved with a particular community on a continuous basis. This demands proper funding and education of the primary care providers and a systematic division of the population according to catchment area, amongst them.

Even in the treatment of cancers, India is running far behind in the number of institutes, doctors, other staff and equipment necessary to deal with the hordes of patients. The situation cries out for increased funding on cancer care, setting up of new institutes and training of more staff than available at present. The other important thing to recognize is who will pay for the patient's care and how. Cancer care is an expensive business and too often the patient's ablity to take and comply with treatment is undermined by their inability to pay. Subsidised government institutes alone cannot cope with the demand—too often we see government institutes getting choked with patient numbers while private institutes stand vacant—resources must be pooled. In

radiotherapy, for example, across the different sectors, there are enough sophisticated and standard machines across our state to cope with all our patients, yet patients often get treated late/ not at all because they do not know about/ cannot afford the facilities. There needs to be a supervising authority in cancer care in every state, to guide the patients so that they can get the right treatment at the right time.

Finally, a country which prides itself on its "brain", on its technological wizardry, needs to put its money where its heart is—hardly any new/ original research on cancer is possible in this country because of the lack of funds and infrastructure. We need to be more proactive in solving our problems, rather than waiting for the developed world to sell us the technology at inflated prices.

The problems as outlines above are huge, requiring vast resources and energy to deal with them. We probably have enough of the same –we just need to believe we do and take that big step forward for a healthier India.