

3 Tier Tele-Networking
for
Comprehensive Radiotherapy care
in Developing Countries

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**Developing countries:
Radiotherapy:**

70% of the world's all cancer cases,
Required for more than

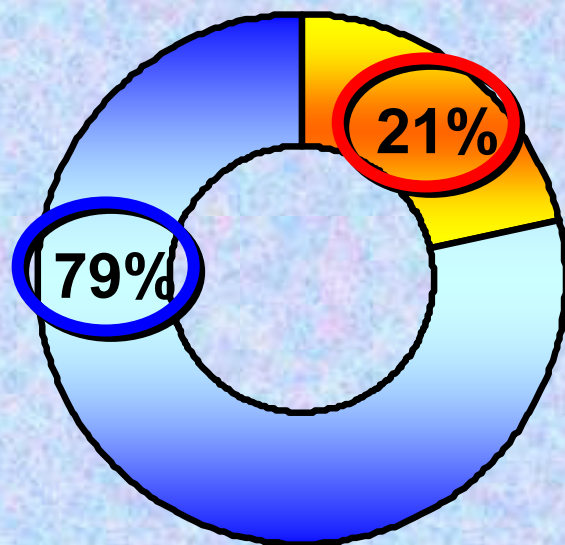
**but only
60% Cancer Patients**

5% of the world's resources

Radiotherapy Facilities

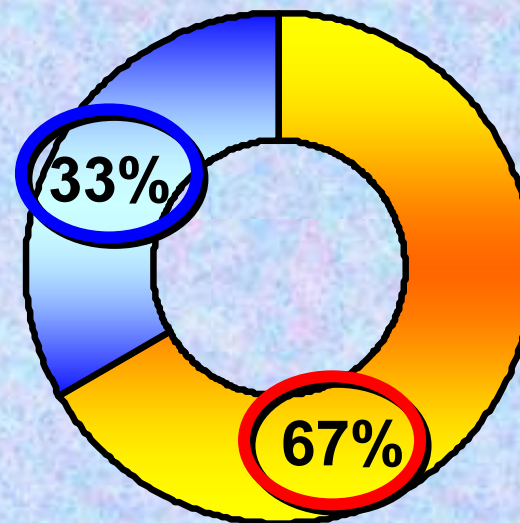
Developed and Developing world

Population (7 billion)



■ Developed
■ Developing

Teletherapy (6705)



■ Developed
■ Developing

(IARC, World Cancer Report 2003)

43% (55 / 128)

US \$ 2.5 billion needed for poor patients

don't have any

– 50% for machines

– 50% to train manpower

Radiotherapy facilities

(IAEA press release, 26th June 2003)

Radiotherapy Process

United Nations

A/64/L.52



How to make the state-of-the-art facility
available to all

within the limited resources?

Estimated Cost: US\$ 4-5 million

of everyone to the enjoyment of the highest attainable standard of physical and mental health, including access to medicines,

Could this be possible

in this era of
information
technology



A 3-tier system for radiotherapy Tele-network

- Create **new radiotherapy** facilities with basic teletherapy unit based on the population density (**Primary radiotherapy centres**)
- **Augment** the existing radiotherapy centres (**Secondary radiotherapy centres**)
- Identify the **centre with advance** treatment facilities, teaching, training and research (**Tertiary radiotherapy centre**)

3 Tier tele-networking Radiotherapy Centres

Primary Radiotherapy Centre



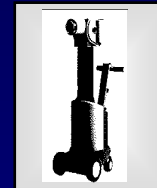
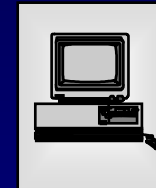
- Single radiotherapy facility
- Responsible for early detection
- Preventive oncology at grass root level



Secondary Radiotherapy Centre



- Teletherapy, Brachytherapy,
- Simulator and Treatment planning



Tertiary Radiotherapy Centre

- State of art referral centre and Capacity building



Expected outcome

- ▶ Treatment facility **closer** to their home
- ▶ **Early detection** and screening effective
- ▶ **Preventive oncology** at **grass** root level
- ▶ **Capacity building** without displacement
- ▶ **Economically viable and cost effective**
- ▶ Provides **access** to state-of-the-art technology of radiotherapy to all
- ▶ Conduct **Regional multi-centric** trials

*“In today’s world, **each and every person** will be touched by cancer either **as a patient, a family member or a friend**. If rising global trends are to be reversed, then **present knowledge must be put into effect on a wider scale.**”*

*-Dr. John R. Sufferin,
Former UICC President*



3 Tier Tele-Networking
for
try a
Comprehensive Radiotherapy care
beyond
in Developing Countries