

Yangon, Myanmar

key cancer care gaps and priorities



FACTS & FIGURES

54,700,330

Myanmar population¹

5,397,985

Yangon population²

CANCER BURDEN IN YANGON IN 2020³

New cancer cases, males
and females, all ages:

74,593

Cancer deaths, males
and females, all ages:

52,941

Five most common cancers,
males: **lung, stomach,
liver, oesophagus,
colorectum**

Cancer incidence rate,
males and females:

136.8

(PER 100,000)

Cancer mortality rate,
males and females:

99.0

(PER 100,000)

Five most common cancers,
females: **cervix uteri,
breast, lung, stomach,
colorectum**

Highlights of the main needs and challenges identified for the city of Yangon:

This high level summary
is based on the results of
the full situational analysis
report and the priorities set
by the city.

Contributions
to the Needs
Assessment:

172

healthcare
professionals from
20 institutions

260

patients

Yangon, the largest city in Myanmar and its cultural and educational centre, joined the City Cancer Challenge (C/Can) in October of 2017. Since then, supported by C/Can's network of local, regional and global partners and experts, Yangon has embarked on a process to identify, design and develop sustainable cancer care solutions that respond to local needs.

As a first step, C/Can convened a City Executive Committee (CEC) bringing together representatives from the main public and private institutions providing cancer care in Yangon, local and national government, academia, and civil society, to guide and oversee the C/Can process.

One of the foundational steps in the C/Can process is a data-driven needs assessment to identify key gaps and opportunities for improving access to quality cancer care. The needs assessment is guided by a questionnaire designed to systematically collect data on the quality and capacity of cancer care services in the city. It addresses the extent to which patients are placed at the centre of care by also assessing community access and integration of care within the city.

The City Executive Committee's first task was to convene a multi-disciplinary Technical Committee of 27 local experts with expertise in the quality, management and delivery of cancer care, to coordinate a city-wide needs assessment. Together, they identified institutions that, based on their contribution to cancer care, should participate in data collection. The Technical Committee also convened a wider network of local experts that would collaborate as part of 23 inter-institutional, topic-specific working groups (incl. nuclear medicine, pathology, radiotherapy, medical oncology, surgery among others) to collect data, and analyse and interpret the findings.

¹ Population Stat, World Bank, United Nations Census (Accessed 7 December 2020) (<https://populationstat.com/myanmar-burma/yangon>)

² Population Stat, World Bank, United Nations Census (Accessed 7 December 2020) (<https://populationstat.com/myanmar-burma/yangon>)

³ Global Cancer Observatory International Agency for Research on Cancer (Accessed 25 March 2021) (<https://gco.iarc.fr/today/data/factsheets/populations/104-myanmar-fact-sheets.pdf>)



Availability of cancer care services

Diagnostic laboratories (clinical and pathology labs) and blood bank

- Lack of quality control and standard operational procedures in laboratories
- Lack of Laboratory Information Management System (LIMS) and pathology report standardization
- Lack of major equipment and consumables in public laboratories

Medical imaging (radiology and nuclear medicine)

- Radiology equipment is limited and outdated in most public sector departments, and is not always under maintenance service contracts
- Lack of Picture Archiving and Communication System (PACS) to ensure quality in the storage of images

Surgical Care

- Shortage of well-designed and equipped operating room for complex cancer surgery
- No written protocols for cancer surgery on breast, cervix and colorectal cancers

Palliative and supportive care

- Lack of guidelines for palliative care in the city/region
- Only one public hospital in the city has a palliative care clinic

Medical oncology (adult and paediatric)

- Lack of adequate facilities to provide medical oncology services (including specialised equipment and IT development) in public hospitals
- Erratic supply of oncology medicines

Radiotherapy

- Long waiting times for tele and brachytherapy in the public sector due to human resource shortage
- Lack of standardised treatment at radiotherapy centres
- Lack of radiotherapy quality assurance programs at the institutional and city levels



Management of cancer care services

(including education and professional training)

- Inadequate organizational structure for a city network of oncology services
- No accreditation bodies for cancer services, or education and training programmes at a regional level
- Inadequate budget for recruitment and retention of qualified human resources for cancer care
- Lack of adequately trained staff in all imaging technologies, cancer surgery, radiation oncology, palliative care, as well as oncology related staff (oncology doctors, nurses and pharmacists) and administrative supportive personnel such as patient navigators and nurse managers

Quality of cancer care services

- Discussion of treatment options by multidisciplinary teams is not standard practice
- Lack of resource appropriate guidelines for management of oncology patients (inc standardized treatment protocols)
- No electronic patient information system or population based cancer registry
- Not every hospital treating cancer patients has an ethics committee

Community access to cancer care services

- Lack of support to cancer patients and their families prior to, during and after treatment. Specifically, there is a lack of:
 - patient and family education on diagnosis and treatment issues
 - patient and family psychosocial support and financial counselling for cancer survivors
- Delays in accessing cancer care and lack of treatment adherence

Translating needs into action



Following the needs assessment, C/Can supports an action planning exercise that results in a City Roadmap for Cancer Care. This city-led plan guides the prioritisation and development of a set of city projects, as well as identification of resource mobilisation, capacity development and technical cooperation needs.

In Yangon, 16 projects have been identified to address gaps including a radiotherapy development plan and quality assurance programme, standard operating procedures and a quality control manual for pathology, and the creation of 5 cross-institutional and multidisciplinary groups including for breast and cervical cancers. In parallel, C/Can is collaborating closely with local stakeholders to strengthen local capacity, leadership and an enabling policy environment to ensure the sustainability and long-lasting impact of city projects on access to quality cancer care, and ultimately patient outcomes. Learn more about progress in Yangon in the latest [C/Can Activity Report](#).

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Central Women's Hospital, Grand Hanthar Hospital, Military Hospital, New Yangon General Hospital, North Oakkalarpa General Hospital, No.2 Bahosi Hospital, Oakkalarpa Specialist Center Hospital (OSC), Pin Lon Hospital, PunHlaing Siloam Hospital, Pyi Taw Thar Hospital, Shwegonedine Specialist Center Hospital (SSC), Shwe Yaung Hnin Si Cancer Foundation, ThinganGyun General Hospital, Thurein Mon Clinic, U Hla Tun Cancer Foundation (Hospice), Victoria Hospital, Yangon Children's Hospital, Yangon General Hospital, Yangon Specialty Hospital, Yankin Children Hospital.

* Institutions that have contributed data to the needs assessment process in Yangon (listed alphabetically)