

**THE ROLE OF PUBLIC PRIVATE  
PARTNERSHIP IN ESTABLISHING  
RADIOTHERAPY CENTRES IN NIGERIA:  
IT IS HIGH TIME WE DISCUSSED**

*By*

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# BACKGROUND

FIG. 1: THE PLACE OF NIGERIA IN AFRICA MAP

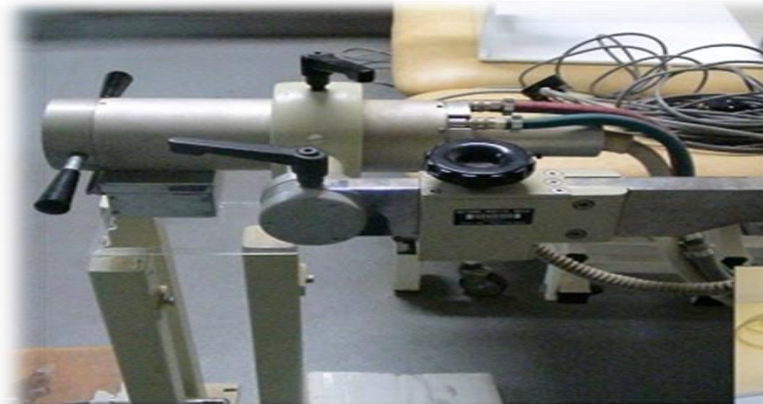


- Nigeria has estimated population of 186million people (NPC 2017)
- This population was estimated to have a growth rate of 3.2% annually (NDHS 2013)
- Nigeria contributed 15% of the estimated 681,000 new cases of cancer that occurred in Africa in 2008 (Sylla et al 2011)
- In Nigeria, about 100,000 new cases of cancer occur every year with high case fatality (Ferlay et al 2010)
- In Nigeria, as in most developing countries late presentation with unfavorable prognosis is common (Solanke et al 1996)
- Nigeria budget in 2018 was 8.6 trillion Naira(23.9billion USD) and only 3.9% (340.45 billion Naira ie 946.5 million USD) was allocated to Health sector.
- The 2018 health budget proposal set aside 269.34 billion Naira(749 million USD) for recurrent expenditure, while 71.11 billion Naira(197.7million USD) is for capital expenditure.
- A closer look at the budget taking cognizance of Nigeria population, showed that the government plans to spend N1,888.00 on each citizen for the whole year ie less than 6 USD/annum (2018 Budget of Consolidation, 7th Nov; 2017)
- Nigeria spends an average of N500 Billion (\$1.4 Billion) annually on medical tourism, which means that majority of Nigerians can afford Radiotherapy services if available.
- Radiotherapy machines can be sourced through the help of IAEA at a cheaper rate by any private entrepreneur without much bottle-neck.

- There is no functional National Cancer Institute to coordinate research and resources allocation in cancer in Nigeria
- There are 8 Centres with megavoltage Radiotherapy machines (7 Federal Government and 1 private)
- The private Hospital has Co 60 Teletherapy machine with the problems of Radiation protection and source replacement, hence treatment time is prolonged .
- Five of the government owned megavoltage machines are Linear Accelerators with no treatment planning systems; while 2 Centres have Co 60 machines with similar challenges of the private sector.
- Recently, National Hospital Abuja commissioned new Linear Accelerator with 3D conformal capability, R&V(MOSAIQ) system, 64 slice CT simulator and Treatment Planning System (TPS)(MONACO 5.11 3D/IMRT/VMAT).
- We see an average of 300 cancer patients in a week including old and new cases (new cases 60, old – 240) in the Radiation Oncology clinic.
- More than 150 cancer patients come to Radiotherapy unit at the National Hospital Abuja within week days for CT Simulation.
- Majority of the cases are for palliative treatment because of late presentation and frequent breakdown of Radiotherapy machines in other Centres.

- We treat an average of 80 patients per day, out of this, 70% were for palliative cases due to late presentation.
- Breast cancer, Prostrate cancer, Cervical cancer, Head and Neck cancers are the most common cases we treat at our Centre.
- Currently our 18years old LDR Remote Afterload Caesium 131 Brachytherapy source is not functional hence we refer out patients that need brachytherapy treatment to other Centres.
- Only one Centre with Ir 191 source about 400km away from Abuja currently provide brachytherapy services.
- Our waiting list has been growing because of increasing number of patients, inadequate machines, non-availability of trained staff and frequent breakdown of RT machines in other Centres.

# OLD DISUSED LINAC, CONVENTIONAL SIMULATOR, SUPERFICIAL PANTAK AND BRACHY MACHINE



- **With this new center of excellence, in Radiotherapy, my vision include but not limited to the following:**

- i. Training, retraining and mentoring of Radiation Oncology staff, Resident Doctors and Medical Students with view to have more qualified personnel to handle cancer cases taking cognizance of Nigeria population where we have less than 50 qualified experts in the field.
- ii. It is also my desire to attract necessary foreign and local collaborations and exchange programmes that will enhance quality of our training and expand the scope of our treatment modality in Radiation Oncology.
- iii. Nigeria budgetary allocation to the health sector has continued to shrink since 2012, there is need to encourage public private partnership in establishing more radiation oncology Centres in order to support government effort and reduce pressure on budgetary allocation on health sector.

- iv. I will like to be engaged in population based cancer studies in order to improve cancer epidemiology database, enhance appropriate allocation of scarce resources and therapeutic intervention.
- v. I hope to encourage foreign donors, Non-governmental organizations and grant foundation support in expanding the current Radiotherapy Centres at least to have back up LINAC in case of any break down.
- vi. To increase my cancer awareness campaigns, research, radio and television programmes, engagement of cancer advocacy groups, paper presentation as well as participation in cancer screening tests with aim to create more public enlightenment on cancer.
- vii. I will like to engage in clinical trials in RT as most of the studies in other centres may not fit our local needs.



# NEW RADIOTHERAPY CENTRE OF EXCELLENCE



# THE WAY FORWARD

- Basically challenges of Linear Accelerator in resource poor countries are high cost of maintenance and acquiring the machine.
- Training of local engineers who will be responsible for maintenance of the machine is very critical to avoid frequent down time.
- Training and re-training of Radiotherapy staff in well established Centres is very important to enhance appropriate technology transfer.
- There are willing private partners who are ready to donate land and counterpart funding once there are available expert guidance/ support who are in consultation with us.
- Encouragement of exchange programme to enhance learning and acquire best global practice in Radiotherapy treatment.
- Handling of expired source materials especially in Centres with Co 60 megavoltage as source disposal has remained a major problem in resource poor setting like ours.
- We are currently encouraging government to establish more Radiotherapy Centres and also to upgrade those Centres with Linear Accelerator to 3D conformal capability.

# CONCLUSION

- Having explored challenges of radiotherapy treatment in Nigeria, the challenges of acquiring and maintaining the machine, poor budgetary allocation to health and government inability to establish functional National Cancer institution to coordinate cancer research, it is my believe that a departure from this well known bottle necks will be appropriate.
- Hence, the way forward is to engage the private sector in public private partnership which will derive this important sector and save the cost of loss of human lives and useful manpower.
- Meanwhile we encourage the government to provide investor friendly environment for this to happen.

# A walk into the world of cancer research and therapy



**THANK YOU FOR LISTENING**