Letter to the Editor

Oncology status in five SAARC countries: A critical appraisal of 2012 versus 2014 statistics

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Dear Editor,

We read with great interest the articles entitled “Afro Middle East Asian symposium on cancer cooperation.”[1] We commend the organizing committee of Afro-Asian symposium, 2014, for their scrupulous efforts of arranging a conference on such a large scale where dignitaries from 16 different countries met on the common ground with a unanimous motive of improving the oncology status in their respective countries and globally, on a wider perspective. We also take the opportunity to applaud Parikh et al. for briefing the highlights and presenting the précis of the conference before us, in their excellently written article.

After carefully reading the article by Parikh et al., we found that Table 2 (insight into oncology status of various countries) of his article[1] shows a close resemblance to Table 4 (insight into oncology status of SAARC countries) of the article by Noronha et al.[2] At first instance, the tables seemed to be similar with the difference in the number of countries for which the data was provided. However, critical evaluation of the data, made us realize the difference between the two tables. The statistical data for five SAARC countries that are Bhutan, Pakistan, India, Bangladesh, and Nepal, was presented in both the tables, but one contained the data for 2012[3] and another for 2014.[4] From the statistical comparison between the past and the present data, we could get a fair idea regarding the progression/regression of oncology status in these countries over the period of nearly 1½ years.

Six questions out of 10, were almost similar in Table 2[1] and Table 4,[2] hence the comparison was done only for these questions is evident from the comparison of 2012 versus 2014 statistics that in Pakistan and Nepal, the number of qualified oncologists has increased in these countries from 125 to 175 and from 40 to 45 in 2012 and 2014 respectively;

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It is astonishing and at the same time distressing to see that the healthcare policy for cancer was seen from 2014 data. In Bhutan and Nepal, an unanticipated dissolution of national healthcare policy for cancer in these countries. In Bhutan and Nepal, an unanticipated dissolution of national healthcare policy for cancer was seen from 2014 data.

It is astonishing and at the same time distressing to see that the oncology status in India has been stagnant over past 1½ years. Although the healthcare infrastructure and oncology status in India is better when compared to other SAARC countries, but it also harbors the maximum cancer burden among SAARC countries. Also as mentioned by Parikh et al, that all other countries would choose to obtain help from India to develop or strengthen their anticancer armament, so India plays a crucial role in the development of the whole world, and hence, needs special attention on this issue, to cope up with the increasing cancer burden and also to meet the expectations of their people and their neighbors as well.

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There are no conflicts of interest.

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References
1. Parikh PM, Raja T, Mula-Hussain L, Baral RP, Ingle P, Narayanan P, et al. Afro Middle East Asian symposium on cancer cooperation. South Asian J Cancer 2014;3:128-31.
2. Noronha V, Tsomo U, Jamshed A, Hai M, Wattegama S, Baral R, et al. A fresh look at oncology facts on South central Asia and SAARC countries. South Asian J Cancer 2012;1:1-4.
3. Ali I, Wani WA, Saleem K. Cancer scenario in India with future perspectives. Cancer Ther 2011;8:56-70.

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