

VICTORIAN CANCER NEWS



A Quarterly News Letter
issued by the Public
Education Sub-Committee of
the Anti-Cancer Council
of Victoria.

No. 1.

July, 1959.

EDITORIAL

A year ago the Anti-Cancer Council of Victoria appealed to the people of the State for £500,000, to enable it to continue and expand its support of cancer research, and to undertake programmes of patient aid and public education. In return, the people of Victoria opened their purses with a generosity which proved beyond all doubt their very deep concern in the problem of cancer. In the short space of two months nearly £1,500,000 was given to the Council - more than 10/- for every man, woman and child in the State.

Through the columns of "Victorian Cancer News" we intend to keep our readers informed of the activities of the Anti-Cancer Council in the fields of public education, welfare and research, for we feel sure that the intense interest in cancer work shown during the appeal last year still exists. Thus we are including in this issue a short account of one research project - the application of television techniques for diagnostic purposes. In addition, we shall reserve a proportion of our space in future issues for news of the work of the voluntary Cancer Committees which have now been formed in various country centres.

Since our main interest is to distribute as widely as possible information which will help to combat one of the greatest handicaps to successful treatment - the delay in diagnosis which results from public ignorance or fear - we also propose to include in every issue a short lay article on some aspect of cancer education. These will be supplemented from time to time with explanations of the common warning signs, and with summaries of recent developments in the world-wide fight against cancer as reported in the lay or medical press.

"Victorian Cancer News" will be supplied without charge to all interested persons or organisations. Please write or telephone the offices of the Anti-Cancer Council of Victoria,

410 Albert Street, East Melbourne, C.2. (FB 1386) if you wish to be placed on our mailing list.

RESEARCH IN PROGRESS

It is not the Anti-Cancer Council's policy to centralise research activities in Victoria, nor to set up expensive new foundations. Instead, the Council makes research grants to doctors and scientists working in existing laboratories at the University, in the public hospitals and in medical research institutes, to enable them to continue or expand their studies, and, if necessary, to receive appropriate training and experience at overseas research centres.

More than £100,000 has been allocated for the support of cancer research in Victoria in 1959. The largest single grant, of £35,000, has been allocated to a research team at the Alfred Hospital which is investigating the application of television techniques to the diagnosis of cancer and other diseases.

A transistor television camera, weighing about 10 ounces and believed to be the smallest yet built anywhere in the world, has been developed and it is hoped to decrease its size still further. It will be used attached to medical optical instruments in different investigations of the internal passages of the body. The camera is designed to produce clear pictures, magnified some 20 times; on a conventional 21" television screen. The technique is still in the experimental stage, and several problems remain to be overcome before it can be generally used for diagnostic purposes, but there is reason to hope that it may represent an important advance in the early diagnosis of internal cancer.

The same research team is also developing a form of television which will work in complete darkness, and will televise the normally invisible. This technique utilises infra-red rays, which are not visible to the human eye, but which can be transmitted by a specially adapted camera. In this process an infra-red beam is trained on an object - for example, a patient's eye or an area of skin - in a darkened room. The object reflects the rays, which are picked up and transmitted to the television screen by the camera.

The rays will also pierce below the surface of objects, and can, for example, show the working of the superficial blood vessels below the surface of the skin. It is perhaps too early as yet to assess the full potentialities of the technique, but it may eventually enable doctors to observe the behaviour of

tissues at different layers of the skin. Thus it is fundamentally different from the action of x-rays, which pierce all layers.

Sir Peter MacCallum has aptly described this research as "one of the fruits of the remarkable response of the people of Victoria to the Anti-Cancer Appeal of 1958."

WELFARE SERVICES

The Anti-Cancer Council is actively interested in the welfare of cancer patients in Victoria. A medical social worker, Mrs. M. Esson, has recently been appointed to the staff of the Council, and we are pleased to print this short account of her work:-

"You will be interested to know what the Anti-Cancer Council is doing for the welfare of cancer patients. A Cancer Service Committee, under the chairmanship of Cr. W. J. Kilpatrick, has been established, and a welfare programme to cover the whole State has been worked out. Voluntary regional committees have been set up in 11 country centres where there are base hospitals, and sub-committees are being formed in other cities and towns, to help families who are suffering social and economic hardship as a result of cancer.

"As the Council's medical social worker, one of my duties is to assist and advise these country committees in their work of bringing practical help to cancer sufferers in their own region. Another is to work with the Almoners of the various public hospitals in considering various claims for aid which are made to the Service Committee, and a third is to assist metropolitan patients who are not attending public hospitals but who may nevertheless need to seek the help of the Council.

"The help which is given is of various kinds. Where there is economic need, families may only have to be directed to social services which already exist in the community, but of which they may not be aware. Often, however, financial help is given from the Council's funds - for private nursing fees for terminal care, for the purchase of a medical appliance or some type of equipment which is essential either to the patient's treatment or to his re-habilitation, and for other purposes determined on the basis of individual need.

"One of the biggest problems facing families when the mother is ill is how to keep the home going. The house must be cleaned, meals prepared and children cared for. In many cases patients are able to remain at home only if home help is available. If the mother is in hospital, board for the children may have to be met, and this has been done in one case recently handled by one of the Regional Committees. Another committee has provided home help to enable a mother to be with her family rather than in hospital.

"When the welfare services of the Anti-Cancer Council are better known, we hope that anxiety arising from social problems may be allayed, and one of the contributing causes to delay in seeking early treatment removed."

COMMUNITY EDUCATION ON CANCER

Public education on cancer is desirable because ancient taboos, superstition, ignorance and fear of the disease are still prevalent in the community, and together they are preventing many cancer sufferers from seeking medical treatment whilst the disease is still at a potentially curable stage. Therefore, in its education programme the Anti-Cancer Council is seeking to disperse the dark clouds of fear, prejudice and ignorance, and to create in their place an informed public opinion based on reliable knowledge and rational optimism.

Since one of the few facts known with any certainty about cancer is that the chief hope for successful treatment lies in the early recognition of its presence, it is most important that everyone should be able to recognise cancer's common warning signs:- a sore which refuses to heal; a lump or thickening in the breast or elsewhere; any unusual bleeding or discharge; any change in a mole or wart; persistent indigestion or difficulty in swallowing; persistent hoarseness or cough; any change in normal bowel habits. Contrary to general belief, pain is not an early cancer symptom.

In many cases, of course, the symptom is not due to cancer, but to some other relatively harmless condition. Many lumps in the breast are not cancer. Bleeding from the rectum may be caused by piles, and irregular bleeding from the vagina is usually not due to cancer. But any of these symptoms - especially bleeding after the menopause - could be a warning sign of cancer. Only a doctor is qualified to decide, and medical advice should always be sought without delay, since if cancer is present it is vital to discover it at an early stage.

The importance of early discovery and treatment of cancer can best be understood through a comparison of the cure rates for certain types of the disease at different stages of development. In breast cancer, for example, seven or eight out of every ten cases treated when the disease is still in its early stages may be cured, but only one or two out of ten if treatment is delayed until a late stage. Similarly, most cancers of the neck of the womb can be cured if diagnosed and treated sufficiently early.

The second major objective of cancer education is to increase public confidence in methods of treatment. There are, unfortunately, some types of cancer which at present give little prospect for cure, but most others, particularly the accessible cancers such as those of the skin, breast and womb, are usually curable in the early stages. Great advances have been made in recent years in the treatment of cancer, and cures are now frequently obtained in cases which even 20 years ago would have been regarded as hopeless.

Surgery and radiotherapy, using radiations from x-rays, radium, and radioactive substances, are the principal methods of treatment. Surgery can produce a permanent cure if the cancer has not had time to spread from its original site of growth to other parts of the body. If detected at this early stage, the cancer may be completely removed. Radiotherapy is used for treating types of cancer where surgery would be either impossible or ineffective. In some cases a combination of surgery and radiation is desirable. Improvements in x-ray machines and in the techniques by which x-rays are administered have greatly increased the effectiveness of this type of treatment.

Chemotherapy, or treatment with drugs, is being increasingly used, and although this technique does not yet cure cancer, it is of great value in easing pain and prolonging life. Several drugs have been found which will arrest or slow down the progress of certain types of cancer for months and even years.

Modern methods of treatment are curing three out of every ten cases of cancer at the present time, but it is estimated that at least one more, and perhaps two, of these ten cases could also be cured if diagnosed and treated EARLY. Widespread knowledge of the early warning signs on the part of the community as a whole, and prompt action in obtaining medical advice on the part of the individual when cancer is suspected, will save many of the lives which are at present being lost needlessly every year.

This is the hope and purpose of the cancer education programme.

WHAT IS CANCER?

Cancer is the word commonly used for what your doctor would term a "malignant tumour." In everyday English, that means a "harmful growth." A cancer is a harmful growth of tissue - the substance of which the body is made - anywhere in the human system. At first a cancer is small and entirely local, but if it is allowed to keep on growing it will invade and destroy the surrounding normal tissues, and in time will spread to distant parts of the body via the lymphatic system or blood stream. Unless checked, it will eventually attack one or other of the body's vital organs and kill the person who has the cancer.

How does cancer start? If you were to look at sections of the body through a microscope, you would see that all of them consist of tiny units known as "cells." Each organ - heart, liver, lungs, brain, stomach, et cetera - is constructed of different varieties of these units, arranged in different ways. Yet all of them have certain basic similarities, the most fundamental of which is the ability to reproduce themselves. This they do simply by dividing - one cell becomes two, the two become four, the four become eight, and so on, until the requirements of the body are satisfied and nature calls a halt to the process.

As your body grows, ages, and is put to a number of different uses, its parts change in shape and size. One muscle, used vigorously for some time, develops and grows larger: another, unused, becomes smaller. In the former case, cell division will be accelerated, in the latter it will be slowed down. In all parts of the body, the cells continually divide and form new ones, supplying the material for new growth or replacing worn-out and damaged cells.

For example, when you cut a finger, new cells develop rapidly to bridge the injury, but as soon as the cut is healed they will revert to their normal rate of division. Normal cell growth, in short, is orderly, and regulated by the mysterious mechanism of the body.

Sometimes, however, this usual life-process breaks down, and the mechanism gets out of control. For reasons as yet not fully understood, a cell or group of cells undergoes a change which sets it apart from other cells. Unruly, wildly-growing cells are formed that do not build normal flesh or bone tissue, and serve no useful purpose at all in the body. They divide more rapidly than normal cells, and in an haphazard manner. In time a cluster of cells, known as a tumour is formed.

Many of these tumours remain in the part of the body in which they began, and do no particular harm. Frequently they are enclosed in a protective sheath or envelope of tissue. These are known as benign tumours, and are not cancerous. Warts and cysts, for example, are benign growths. Other tumours, however, do not stay harmlessly in one place, but, having destroyed the tissues of the body in which they started, some cells will break away from the original growth and, migrating through the blood or lymph streams, will spread to other parts of the body where they will start new growths. These are the malignant tumours, or cancers.

In the beginning, either kind of tumour can usually be removed entirely from the body by surgery, or, when amenable to such treatment, can be destroyed by x-rays or radium. But the malignant tumour, even when it starts in a non-vital part of the body, if left untreated will eventually spread to vital organs and cause the death of the person who has it. The important thing to remember is that most malignant tumours, or cancer, begin in the same way as benign tumours - that is, as a local growth. At this stage, they can often be totally removed or destroyed. In short - the earlier cancer is detected and treated, the greater will be the probability of cure.

"NOW IT'S A WONDERFUL WORLD!"

The following letter appeared in the Brisbane "Sunday Mail" for April 26th, 1959. We reprint it here for its human interest and for its first-hand illustration of what "early treatment" has meant personally for one cancer sufferer:-

"My doctor tells me that I am now good statistical material. That is why I have waited 10½ years to write this letter, in a spirit of humble thanksgiving, and in the hope that it may prove of help and encourage others facing the same situation.

"Many people think the dread word 'CANCER' is synonymous with a death sentence; but if they would only seek early treatment, a good proportion of cases can have a happy outcome.

"I was 44 years of age. Our eldest son was a qualified electrician, our two younger boys were studying medicine and at teachers' training college respectively. My parents were approaching their Golden Wedding anniversary, and my husband had just received a substantial legacy from his father.

"In short, I had no excuse for feeling miserable, yet there were times when I felt completely exhausted. It was a struggle to lift my feet from one step to the next. My hair was coming out in lank tufts at every brushing.

"However, I had no pain or definite symptoms of any illness. I felt rather foolish when I finally agreed to mother's urging to consult a doctor. He was quite sympathetic and suggested a small exploratory operation for a check. After waiting for nearly a fortnight I began to persuade myself that no news was good news. Then the doctor called "You have to have a big operation." I asked "Malignancy?", and he said "Yes." So I knew what I was up against.

"I felt better after the big operation than after the preliminary, and from the second day began exercises on the bed, leg-raising and lowering, toe stretching, etc. This is important, if your doctor permits it. I never had any after-effects or trouble with adhesions.

"Before I left the hospital, doctor said "I can tell you now - you had cancer - but we hope we've got the lot." It meant three-monthly check-ups for the first five years, six-monthly for the next five, and now annually.

"I always had a few 'butterflies' as each check point drew close - but left the surgery feeling on top of the world. I can truthfully say that these last 10 years have been the happiest time of my life. The two younger boys have qualified. They are both married, and I have gained two charming daughters. We also have five beautiful grandchildren, a constant source of joy.

"I do all my own housework (except scrubbing floors, and I never enjoyed that anyhow), I play golf (badly, but I get a lot of fun), swim, ride a pushbike, drive the car, mow the lawn, as well as the quieter interests.

"The time may come in the future when the doctor may have to say "You have cancer, and we CAN'T get the lot." If it does, I have asked him to tell me straight out. I would want to know.

"Meanwhile I'm making the most of every happy moment in a wonderful world."

(signed) "One of the Lucky Ones."

WATCH FOR THE WARNING SIGNS THAT MAY MEAN CANCER

- . Any sore which does not heal
- . A lump or thickening in the breast or elsewhere
- . Any unusual bleeding or discharge
- . Any change in a mole or wart
- . Persistent indigestion or difficulty in swallowing
- . Persistent hoarseness or cough
- . Any change in normal bowel habits

These are not necessarily symptoms of cancer, but any one of them may mean cancer. If one appears, see your doctor at once. Early treatment could save your life.

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