

CANCER*

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It is my privilege to report on another year during which the National Cancer Association of South Africa has made phenomenal progress.

Cancer as a disease is a major impediment to the health of the Nation. We know some of the ways in which the situation could be improved, for example, by tackling the problem of air pollution and smoking. Better methods of treatment have been devised. The real problem, however, is that the public's attitude to cancer is wrong. Cancer is still too widely regarded as incurable. A hundred years ago all cancers were fatal, but now the situation is very different. The facts are these: some cancers are serious and some still incurable; some become serious if not dealt with in time, and some taken in good time are curable. The medical view of cancer is that it is just one of the many serious diseases that afflict man, and should be regarded as an ordinary disease. We need to change the popular attitude to cancer in the way the attitude to consumption has been changed over the past few years.

When a disease is looked upon with fear, delay in seeking treatment is inevitable. When public opinion changes and comes to regard cancer as an ordinary disease, improvements in the number of cures will follow.

Cancer research, like cancer, knows no frontiers and the International Congress, held in London in July 1958, was evidence of this.

It must be admitted that there is as yet no sign of a solution to the fundamental problem of cancer; there is no sign of when we may be within striking distance of a solution, and there is as yet no sign of the precise direction the solution will take. All we can say at present is that the fundamental problem lies deep in the complexities of biology, that is, in the complexities of life itself. In the meantime, there is no need for despair. There are many forms of cancer which can be prevented and cured, and the list is growing.

While we advance on all fronts the most gratifying progress can be reported in regard to activities in the fields of professional information and public education. With reference to professional information, attention is invited to pages 10 and 11 of the Cancer Association's Annual Report for 1958, from which it will be noted that the Association has sent no less than 8 doctors and auxiliary medical personnel overseas at its expense where they were able to acquire the very latest information about advances in the diagnosis and treatment of cancer. These individuals are now

able to apply their newly acquired knowledge for the benefit of the public, and moreover, they are able to convey the information to their colleagues. The Cancer Association can be justly proud of the share it has taken in the matter.

In this connection I am pleased to announce that the Cancer Association is playing a vital part in introducing into this country an important diagnostic aid in regard to the early detection of cancer. I am referring specifically to exfoliative cytology. An exfoliative cytology programme has to be developed in two stages. Firstly, the professional manpower has to be available—that is the pathologists and the skilled technical assistants, who must be trained in the highly specialized field of analysing exfoliative cytology smears. Two pathologists employed by the South African Institute for Medical Research were trained overseas at the Association's expense during 1958. I believe that they are already applying their knowledge to great advantage. Negotiations are in progress to import a highly skilled technician from Britain during 1960. He will be required to spend 6 months in South Africa, with the sole object of training a number of technicians drawn from all the medical schools and the South African Institute for Medical Research.

Once the professional man-power is available, it will be the task of the Association to make known to the general public that this excellent service is widely available, and I may mention that we are ready to commence with a major educational campaign at short notice.

Members will be able to form an idea of how vitally important this venture really is when I quote the words of that well-known American expert, Dr. Charles Cameron. He said: 'The problem of cervical cancer could be virtually eliminated, if we could persuade all women to be examined by the cytological method once a year—if we had the professional man-power to interpret the slides'. I may add to these words that this method does not apply only to cervical cancer, it is of almost equal significance in some other forms, for example, cancer of the gullet. I am sure the Council of Management will have the blessing of all members of the Association in regard to 'operation exfoliative cytology'.

I am not going to spend time on the public educational activities of the Association, except to draw attention to the Annual Report, which deals fully with the progress made. Reports are received from doctors that already there is a noticeable tendency for the public to seek early diagnosis and treatment, and most gratifying of all, are assurances from cured cancer patients that they are only alive today because they followed the advice of the Association to consult their doctors early, and thus enabled their doctors to

* Presidential Address, Annual General Meeting, The National Cancer Association of South Africa, Johannesburg, 22 July 1959.

diagnose their condition in the early stages of development and and to institute early and adequate treatment. It is regrettable that many people still consult 'quacks' and waste valuable time during which their cancers are allowed to spread unchecked until, in many instances, it is too late for cures to be effected.

As regards cancer research, the peculiar advantages which obtain in the Union of South Africa for studies of this nature should be emphasized. The different ethnic groups, each with their distinctive manner of life, differ profoundly in their susceptibility to cancer. A study of the cancers which develop in the South African races is furthermore relatively simple because of the availability of Western medical methods, well developed hospitals, universities and other scientific institutions. This makes it possible to study the different and often primitive conditions with highly advanced techniques.

Investigations which have already been carried out have made it clear that different groups show different susceptibilities to the various types of cancer, and it may be concluded that these differences are explicable on environmental grounds. Many examples could be quoted. Among these might be mentioned skin cancer which appears to be largely associated with the high exposure to sunburn in this country.

As regards skin cancer, South African Whites have the highest known death rate in the world. On the other hand, skin cancer is very rare in the pigmented Bantu, and in a Johannesburg study only 1/15th of the number of skin cancers were found in the Bantu compared to what would be expected from similar populations of American Whites. The Bantu albinos are however very much more susceptible and appear to be even more sensitive to the effect of sunlight than the indigenous White population.

Cancer of the stomach, large intestine and breast are common in Whites but rare in the Bantu. On the other hand, cancer of the stomach is extremely common in the Cape Coloured.

The Bantu has a much greater susceptibility to certain other cancers. It has long been known that cancer of the liver occurs with greater frequency in the South African Bantu—in fact it is more than 8 times as common as in the American White population. Cancer of the gullet is another of the types of cancer to which certain groups of the Bantu are peculiarly susceptible. It is common in Johannesburg and East London and very common indeed in some of the rural regions of the Eastern Cape Province. In other rural regions of the Eastern Cape Province, there is no evidence that this cancer is more frequent. The causes for these

differences must be local. They can only be discovered by persons who are acquainted with local conditions studying the South African situation. The results of these studies, of course, will be of value to cancer research all over the world. Discovery of the reasons for these differences would show how to avoid or prevent cancer-producing stimuli. The existence of such hotbeds of particular cancers thus provide opportunities for understanding the cause and prevention of cancers, and the importance of these opportunities is well recognized overseas—in fact suggestions are occasionally made that overseas research workers should come to this country to explore the different conditions existing in this country. On the other hand, we believe that it is the responsibility of the local population to study its own cancer situation, because we feel that it can only be fully understood by those acquainted with local conditions.

The common tumours provide unequalled experience in treating cancers. Many of the tumours in the Bantu are so rare in the White races that medical institutions obtain too few cases for intensive studies. South African surgeons and radiotherapists have the opportunity of developing new methods for handling these growths.

It is possible for South Africa to undertake cancer research without in any way duplicating the work of the great overseas laboratories. Our opportunity to study the present racial differences will not last indefinitely, for conditions are changing. With continued adoption of the Western manner of life, the cancer pattern will tend to the norm for such countries.

During 1958 the Association made only a small contribution in the field of direct personal assistance to the cancer sufferer, but this is under review and, funds permitting, our efforts will be considerably expanded during 1959. A pilot scheme has been inaugurated in Cape Town where, with the cooperation of the St. John Ambulance Association, the Red Cross and the Nood-hulpliga, the Association is assisting cancer sufferers by arranging transport to and from hospital, by giving them home help, and by assisting them with dressings, equipment and similar aids.

The expenses of the Association once again far exceeded its income. For this reason it has been decided from now onwards to launch annual appeals for funds in an effort to balance annual budgets. I have the fullest confidence that the Association can approach the public on the strength of its remarkable achievements during the past four years and that the public will support this cause.