

The Guidelines is presented in four parts; Part I gives the introduction, a brief on cancer prevention, and the existing National Health Systems for cancer management. In Parts II and III, guidance is given on site-specific cancers in terms of epidemiology, prevention, diagnosis, management, the commonly used medicines and prognosis. Part IV deals with supportive care for cancer patients.

Where can copies be obtained?

The Ministry will disseminate the Guidelines widely and systematically. In addition, MOH will seek support for additional copies from stakeholders including development partners. The Non Communicable Diseases Control Unit will take charge of the dissemination and provision of copies.

When and how is the guideline to be revised?

It is intended that a panel of experts will revisit and revise the guideline after every 2-3 years, to capture and keep pace with new developments and evidence in the management of cancer locally and internationally.

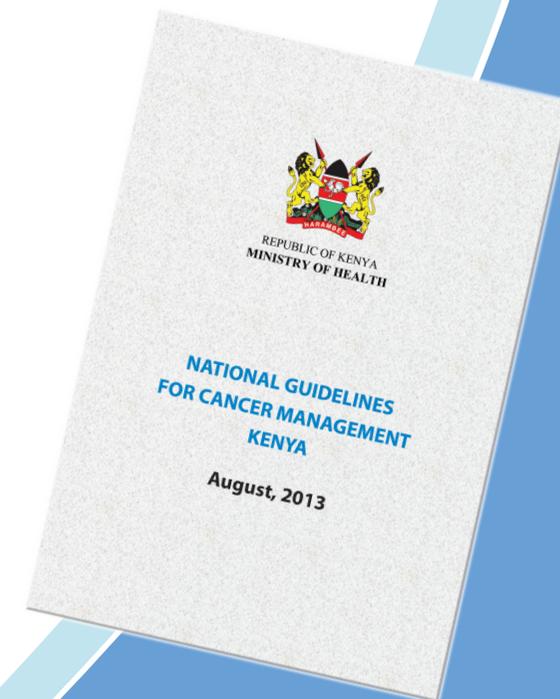
The reviews will be evidence-based from practice, feedback from users and research and customized as informed by the registries.



REPUBLIC OF KENYA
MINISTRY OF HEALTH

Where can feedback/queries be sent?

Ministry of Health
Afya House
P.O Box 30016-00100, GPO
Nairobi Kenya



MSH/Health Commodities and Services Management



World Health
Organization

NATIONAL GUIDELINES
FOR CANCER MANAGEMENT
KENYA

August, 2013

What are guidelines for cancer management?

The Guidelines for Cancer Management in Kenya is a systematically developed document designed to guide health care workers and allied disciplines in making decisions for managing cancer in a consistent and standardised manner. They encourage a uniform approach to prevention, control and treatment of cancer in different circumstances. The Guidelines provide information on the epidemiology, risk factors and causes, prevention, early detection, active treatment and palliation. Because approaches to cancer prevention and treatment differ between resource-limited and resource-rich set-ups, the Guidelines highlights best practice, in the Kenyan context, for appropriate care in both settings. They also give insight into the various interventions, their usefulness and drawbacks in containing the disease.

Why were the National Guidelines for Cancer Management Kenya developed?

The incidence of cancer is believed to be on the rise locally, pushing up both mortality and morbidity, resulting in large numbers of human wastage and economic drain. Kenya, like most other low-and mid-income countries, has only recently developed a National cancer Control Strategy, 2012 - 2016 and Cancer Control Act 2012, to provide a legal, regulatory and functional framework for management of the disease. The institutions and

measures prescribed in these strategic documents are yet to be established. Consequently, cancer prevention and treatment are addressed in divergent ways by the few physicians and practitioners, most of whom are not prepared to handle these challenges. Resources, human, financial and facilities, are highly limited with few qualified cancer physicians and allied health care professionals.

Therefore, availability of national guidelines will help regulate clinical and diagnostic practices, stimulate training and installation of more treatment centres and other relevant facilities. It should also help in establishment of cancer registries, a major component of the cancer control programs necessary for strategic decisions in planning and evaluation of interventions and management.

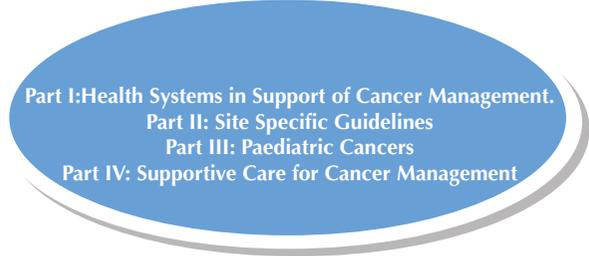
How was the guideline document developed?

The development process of these Guidelines was highly consultative involving the then sister Ministries of Medical Services, and Public Health and Sanitation. The Division of Non-Communicable Diseases and the then Minister for Medical Services, and also chairman of the Africa Cancer Foundation, initiated the process by identifying a team to spearhead it. Once the lead players were identified, the Health Ministry directors worked with the team of professionals drawn from various fields/disciplines of cancer care and preven-

tion to develop the guidelines. Several planning meetings were held starting with one of about 60 experts in the first briefing in Afya House. The Management Sciences for Health (MSH) was then approached to avail technical, funding and logistical back-up for the process and be part of the Technical Working Group (TWG) leading the process.

Initially, the NCCN Guidelines were to be adopted, but later it was decided that the ESMO guidelines were more suitable given that the guidelines were targeted at all levels of care. A series of planning meetings were followed by a retreat in Naivasha in January, 2013 at which a zero draft of the Guidelines emerged. A second consultative meeting to consolidate the zero draft and prepare it for input from more experts followed. Draft 1 was sent to reviewers for comments. Subsequently the TWG met at weekly /fortnightly intervals to finalize the document that was presented to stakeholders in June, 2013. The TWG then incorporated feedback from stakeholders and continued to refine, seeking expert advice from the contributors and other experts.

How is the information in the guidelines presented?



Part I: Health Systems in Support of Cancer Management.
Part II: Site Specific Guidelines
Part III: Paediatric Cancers
Part IV: Supportive Care for Cancer Management