### **SIOP ASIA NEWS**

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About the cover: Coronavirus is taking over the world!

About the artist: Avaneesh N 8.5 year old boy from Bengaluru

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### From The Editor(s) Desk



Dr. Maya Prasad, M.D

Associate Professor, Paediatric Oncology, Tata Memorial Hospital, Mumbai

Dear Friends and colleagues,

Greetings to all of you in this very difficult time. The year 2020 has been a bad one for Asia, and the world. As I write this, many areas of the world are under lockdown as a result of the COVID-19 pandemic. However, our mission to treat and improve the lives of children with cancer continues as before, albeit with several logistical challenges. On the professional front, multiple meetings and events (including SIOP Asia 2020) stand either postponed or cancelled.

This issue of the newsletter contains an update on the SIOP Asia annual general body meeting held last year at Lyon, as well as reports of International Childhood Cancer Day (ICCD) activies held across member countries in Asia. I am sure most of us have received the first newsletter from Childhood Cancer International (CCI) – Asia chapter, earlier this year. The following editions of SIOP Asia newsletter will be synchronized with CCI Asia Newletter. Once again, inviting contributions for the newsletter in the form of reports/photographs from scientific or social events, as well as personal perspectives and/or poetry/art contributed by health professionals and patients.

Wishing everyone good health. May we come out stronger, united and wiser.

Until next time.

## Message from the Continental President



#### Dr. Rashmi Dalvi

Sr. Consultant Pediatric Hematologist Oncologist SRCC Children's Hospital, Mumbai, Professor & Head, Dept. of Pediatrics Bombay Hospital Institute of Medical Sciences, Visiting Consultant, PHO & BMT, LTMG Hospital/Medical college, Mumbai

#### Dear Friends

Greetings from SIOP's Continental Division of Asia!

Since our last newsletter, we have had another highly successful SIOP 2019 meeting at Lyon, again breaking all records of attendance! Asia was well represented in attendance and presentations. The Annual General business meeting was held on the 24th October 2019 at Lyon, being presided by myself and Dr Chi Kong Li. Bids were presented for the SIOP Asia 2021 meeting, member representatives from Yerevan, Armenia and Guangzhou, China. Plans were discussed to expand a working committee for the continent with regional Asian representatives as well as working groups in focused areas. Earlier at Lyon, a smaller meeting was held by the steering committee of the Asian Pediatric Hematology Oncology group to develop and fund collaborative projects across Asia. Dr Akira Nakagawara & Dr Godfrey Chan presented plans for the same. This year our colleague, Dr M Saghir Khan from Abu Dhabi, has taken up position as Co-Chair for SIOP-PODC. The SIOP Asia 2021 bid was put to an online voting process, and the team from Guangzhou represented by Dr Y Zhang won the bid. Congratulations to them as we look forward to a vibrant meeting in that region

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SIOP Asia as a stakeholder was invited to participate at the Rare Cancers ESMO-Asia meeting at Singapore in November 2019; any members interested in participating may please write in to us. Their present focus is on registry building and nasopharyngeal carcinoma. The WHO-SI-OP-St Jude Global Initiative for Childhood Cancer (GICC) held a workshop in the Phillipines. We hope other Asian countries in need will also become focus countries for the same to make access to cancer care available to all and improve survival to 60%. World Cancer Day February 4th, and the International Childhood Cancer day, February 15th, were celebrated across Asia advocating our cause.

The year has begun on a concerning note, with the challenge of the novel coronavirus; we express solidarity with colleagues in affected nations and hope for the best. Even in the weeks

## Message from the Continental President

as we prepare this for the press, COVID 19 has turned into a pandemic, challenging nations across socioeconomic strata and bringing new worries to the pediatric oncology fraternity and the children they care for. Dr Maya Prasad has put together for us, some resources on dealing with COVID-19.

Hectic preparations that were underway for SIOP Asia 2020 at Mumbai, in March this year, have been paused. In view of the viral pandemic and restrictions on global mobility, we have rescheduled the conference; it will be transplanted 'as is' to 4-6th September 2020. Do join in. An exciting scientific and social program awaits the 400+ attendees, with over 200 abstracts up for presentation and discussion. Practical and useful preconference workshops are planned on 3rd September. The Lancet Oncology Commission will officially be discussing & releasing its document on Sustainable Care for Children with Cancer during the Presidential Symposium; however given its importance it is already available online due to the current situation. The 1st Asian Multi-Stakeholder WHO-SIOP-SJCRH GICC Workshop will take place on the 3rd September. Members are invited to visit the conference website at www.siopasia2020.com. Do pack your running gear; there will also be a Childhood Cancer Champions Run to be flagged off by an Indian Sports legend. Do catch us on Twitter @SiopAsia2020! Likewise, a Special issue of the Pediatric Hematology Oncology Journal, "The Asian Age of Collaborations in Pediatric Oncology: A Call for Action" was planned for release during SIOP Asia 2020. While we wait for the September meeting, it will be released in two parts. Do read Hany Ariffin's editorial and the issue at https://doi.org/10.1016/j.phoj.2020.03.006

The SIOP Board and the Continental Presidents have been engaged over the past year in discussions wrt the vision and mission of SIOP in the present era; as also, how best our unique continents can benefit from SIOP and vice versa. We invite your views and inputs for the same. Online voting is just completed for the posts of Secretary-General of SIOP and Continental President for Asia; hope you signed in to have your say.

May you and yours, stay safe during these difficult times. Wish you all a fruitful and academically vibrant year ahead through 2020.

#### Dr Rashmi Dalvi

Continental President SIOP Asia (2018-2021)

# Minutes Of Annual General Meeting of SIOP Asia, held at Lyon SIOP 2019,

Date: 24th October 2019 | Time: 12.00-13.30 hrs | Venue: Auditorium Lumiere

#### The following members and non-member observers attended:

Chi-kong Li, Godfrey Chan, HONGKONG

M Saghir Khan, Asim Belgaumi, M Rahil Khan, Shamvil Ashraf, Dalwacha Rehman, Naureen Mushtaq, Rahat Ul Ain, Alia Ahmad, Nuzhat Yasmeen : PAKISTAN

Neil Ranasinghe, H Kumar, : UK

Zhang Li, Yiyin Gao, Xiaofei Sun, Benson Pau: CHINA

Akira Nakagawara, Yoshi Ohara, Yoshiku Kajiyama, Junko Nomaka, Norihiko Kiragawa, Takaaki Yanagisawa : JAPAN

Hoon Kook, Ho Joon Im, Juhee Shin, Ye Jee Shim, Eun Sang Yi, Jung Man Hangong, Yong Joe Kwon, Hyun Jin Part, Jung Yoon Choi, Eun Sun Yoo, KOREA

Nisleen Amayri, JORDAN

Kim Kramer, USA

Merind Banaui, MEXICO

Ester Demitshgan, Rozanne Papiyan, ARMENIA

Rashmi Dalvi, Nehal Khanna, Gaurav Narula, Badira Parambil, Ruchira Misra, Poonam Bagai, Sonal Sharma, INDIA

#### **AGENDA**

- 1. Welcome by Rashmi Dalvi
- **2. Minutes of AGM held at Abu Dhabi**, 4th April 2019 which were circulated earlier were approved, proposed by Dr Godfrey Chan and seconded by Dr C K Li.
- 3) Report on SIOP Asia 2019, Abu Dhabi: Dr Saghir Khan gave a report on the 12th SIOP Asia meeting held earlier in 2019. There were over 350 delegates representing 39 countries. Dr Saghir mentioned among the highlights, the SIOP Asia symposium on pediatric Oncology Expertise and Challenges in Asia, Adapted-treatment protocols session, the preconference sessions on Research Methodology and Surgery/Abdominal tumors as well as all other sessions were well appreciated. Two oral papers were selected for the Best of Continents session at SIOP 2019, Lyon. A successful 2-day track was conducted for both Nursing group and CCI-Asia He suggested having an IPSO Masterclass with SIOP Asia. Some of the conference lectures were already available online at the SIOP website. Dr Eman / Dr Saghir were lauded for putting up a very well organised meeting with an excellent scientific programme and arrangements.

# Minutes Of Annual General Meeting of SIOP Asia, held at Lyon SIOP 2019,

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- **4)Presentation of bids for SIOP Asia 2021:** Detailed presentations for the bid for the 14th SIOP Asia 2021 meeting were made by Dr Y Zhang from Guangzhou, China and on behalf of Dr Grevorg Tamamyanfor a bid from Yerevan, Armenia, by the Executive Director of the Pediatric Cancer foundation of Armenia. Both bids were well received
- **5) Presentation of SIOP Asia 2020 meeting, Mumbai:** Dr Narula, Organising Secretary, reported on the progress with the planning of the 13th SIOP Asia at Mumbai scheduled to take place from 27-29th March 2020, with preconference workshops on 26th March. Registrations and Abstract submissions were open at the SIOP Asia websites, as well as a tentative scientific program. A 2-day track each for CCI-Asia, Nursing Group and Surgical Oncology, would also be held; in addition a one-day separate meeting for Survivors was planned on Day-1. A videographic presentation of for the same was done at the end of the AGM.
- **6) Report on SIOP Asia Newsletter:** In Dr Maya Prasad's absence Dr Dalvi mentioned that another excellent autumn issue was just brought out but pointed out that in future, help would be needed with bringing out the newsletter, in the form of administrative /financial support. Members were requested to contribute write-ups for the same.
- **7) Report on Childhood Cancer Resources Asia:** This resource was available in the SIOP Asia section of the SIOP website, however Dr Li added that they still need updating on information from various countries and in addition to PHO societies and centres, resources for families and hospital also to be looked into. Members were requested to view this directory and send in relevant data for inclusion to Dr CK Li or Dr Kirril Kirghizov.
- -WHO global initiative for Childhood Cancer (GICC)/ APHOG
- Dr Dalvi informed that the SIOP board was in the process of revising its vision, mission and strategy, which would be discussed in the SIOP AGM; as well as looking at the Continental branches, their roles and how best to propagate the vision and mission of SIOP through them.
- A brief mention of the SIOP-WHO global initiative for Childhood Cancer was made, that it had already been activated in Asia at Myanmar and the Phillipines; adding that there were detailed talks by Dr Andre Ilbawi on the subject during the meeting. Dr Asim Belgaumi raised a point asking about the process of country selection and as to how member countries could avail benefit of this initiative.
- Dr Akira and Dr Godfrey Chan, spoke about reviving the Asian Pediatric Hematology Oncology Group (APHOG) which held a steering committee meeting at Abu Dhabi

# Minutes Of Annual General Meeting of SIOP Asia, held at Lyon SIOP 2019,

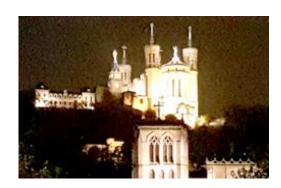
Date: 24th October 2019 | Time: 12.00-13.30 hrs | Venue: Auditorium Lumiere

and also at Lyon. Dr Godfrey Chan highlighted projects which were possible under the aegis of APHOG and Dr Akira informed that on another track, Childhood Cancer Support groups in Japan may join hands with APHOG, to align with the GICC in Asia.

- 9) Inputs /comments from CCI Asia, Nursing Group(Asia): Benson Pau gave an update on plans for the CCI-Asia meeting at Mumbai
- 10) SIOP Asia membership: it was again suggested to improve membership though dissemination in national PHO societies, encouraging junior colleagues and fellows and since SIOP membership fees are significantly reduced for PODC countries, more membership is possible.
- 11) Expansion of SIOP Asia Working Committee wrt regional representation/ specific working groups: Dr Dalvi reiterated this suggestion and it was discussed that it would engage more members, but to define a role and develop working groups for Asia-specific issues.
- 12) Any other business with permission of the Chair: The group from South Korea, announced that they planned to bid for the next open slot for main SIOP conference (possibly 2024) and solicited support of the membership for the same.

The meeting ended with Dr Dalvi thanking Dr Li for Co-chairing and all members for their participation.

### **SIOP LYON 2019**







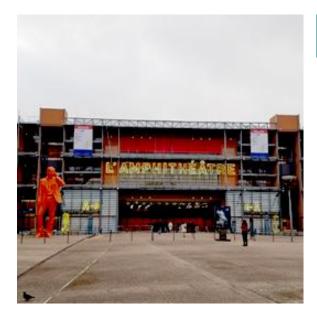






### **SIOP LYON 2019**

#### **SIOP 2019 LYON CONGRATULATIONS!**









With Peter Hesseling, Lifetime Achievement Awardee 2019

### **SIOP LYON 2019**







LITTLE PRINCE RUN, Parc de la Tête d'Or , SIOP-PODC Business meeting, ORANGE MAN!







Congratulations to Dr Muhammad Saghir Khan
on being elected as Co-Chair of
SIOP PODC committee

## A look at 'Sustainable Care for Children with Cancer A Lancet Oncology Commission (1)

### ROLE OF PROFESSIONAL SOCIETIES IN DRIVING CHANGE IN LMICS



DR RASHMI DALVI MD DCH

Continental President SIOP Asia Sr Consultant Hematologist Oncologist Professor & Head, Department of Pediatrics Bombay Hospital Institute of Medical Sciences NH-SRCC Children's Hospital, Mumbai, India DR CHI-KONG LI MBBS, MD



Immediate Past President SIOP Asia Professor, Department of Paediatrics, The Chinese University of Hong Kong Honorary Consultant, Hong Kong Children's Hospital, Hong Kong SAR, China.

In high-income countries, over 80% of patients with childhood cancer can now be cured with optimal care. Although most childhood cancers do not need complex diagnostics with expensive or difficult treatments, outcomes are less favorable in low-income countries (LIC) and low-middle-income countries (LMIC), which also lack good data on the cancer incidence and survival outcome. In September 2018 WHO announced the launch of Global Initiative for Childhood Cancer, partnering with the St Jude Children's Research Hospital and SIOP, aiming to double the global cure rate for children with cancer, and the 5-year survival of six commonest childhood cancers to 60% by 2030 (2).

The Lancet Oncology Commission in their recent publication (1), make a case for, and propose strategies to enable optimal survival for children in restricted economies. Asia being home to many such countries, with a paucity of population based registries, under-reporting of cases and variable quality of data. The Commission developed its own modelling, using reported data and synthesizing demographic, epidemiologic and health system information to form an analytic framework; thence projecting incidence and mortality/survival rates even for countries without registries. Their elegant modelling of a Global Childhood Cancer microsimulation has elicited burden of disease and survival/mortality projections that are close to the reality experienced by many of us in developing economies. The Commission has makes an estimate of 13.7 million childhood cancer cases to be incident globally between 2020 and 2050; about half of them in LMIC/LICs. Most alarming will be 6.1 million undiagnosed cases, about 44.9% of the total; projected to occur maximally in South Asia and sub-Saharan Africa.

Without proper diagnosis and subsequent treatment, the undiagnosed cases will unavoidably result in mortality. Their survival modelling shows lowest outcomes in Asia (39.6%) and Africa (11.6%), reflecting a weakness of overall health care systems. Looking at global child-hood cancer funding and using 5 countries as case studies, the Commission points out a disparity in healthcare coverage, variations in governance, financial sourcing, and most often no place of priority in national health policy agendas.

Arun et al present an in-depth analysis on barriers to cancer care and survival, in these nations, fraught with competing health priorities. Beginning with basic diagnosis, low intensity therapy and simple supportive care, they suggest that, scaling up of health care and social support interventions could avert over 50% of deaths, and that globally, lifetime cumulative productive gains would well exceed the cost of such scale-up; thus making a strong case to governments and funding sources to invest in childhood cancer.

The Commission document further outlines pathways for staged comprehensive augmentation of childhood cancer care in alignment with WHO Universal Health Coverage, while minimizing financial risk to parents. They further propose to ensure sustainability through addressing service gaps, through innovation, advocacy and coalition of stakeholders.

The Lancet Oncology Commission has proposed six action plans to achieve the target of sustainable childhood cancer care. The number one action plan is to convince local governments and incorporate care for childhood cancer into the national essential benefits packages when expanding the Universal Health Coverage, with explicit targets for comprehensive scale-up of capacity in health systems. Without the support of political leadership, it will not be possible to assign fiscal resources for childhood cancer. The Chinese government developed major health care reform in 2010 and included childhood acute lymphoblastic leukemia as one of the conditions under the new insurance scheme which covered rural areas. A multicenter study involving more than 2000 patients benefiting from such schemes, showed an improvement in 5-year overall survival to 85%, and abandonment decreased to 4.9%. (3) In another more recent study, the abandonment rate further dropped to 3.1%. (4) The Commission also proposed on some innovative methods to provide sufficient funding to be sustainable. The models from other diseases such as HIV, tuberculosis and malaria that have been proven to be successful, could be emulated.

Efficient allocation of the limited resources in LIC/ LMIC to set up a comprehensive care program is very important. The Commission studied factors leading to high failure rate of treatment for children with cancer. Though quality of care is vital, access/referral and abandonment are the other important contributing factors. They have shown that combining efforts towards the latter 3 factors, will enhance survival outcome; three times more than just by improving quality of treatment. Strengthening the primary care and referral network is cost-effective and also achievable. India and China have been conducting training courses for a large number of healthcare professionals in the past 2 decades on childhood cancer (5). Better understanding and networking with tertiary centers will help to have earlier diagnosis and referrals to appropriate medical centers. There are also successful programs collaborating with NGOs to provide resources other than direct cost, such as transport and accommodation, which are a cost-effective way to reduce abandonment.

Professional societies have been instrumental in the scientific and clinical advancement of pediatric oncology. The role of International Society of Pediatric Oncology (SIOP) would be a case in study. Annual conferences promoted scientific dialogue between the excellence of care in developed countries and the challenges in resource restricted settings; fostering collaborations, and sharing best practices. Since its first meeting for Pediatric Oncology in Developing Countries (PODC) in 1992, SIOP has made it part of its mission to understand these challenges and generate possible solutions (6). Since 2010, the SIOP-PODC committee, has active Working Groups for Supportive Care, Nutrition, Abandonment, Twinning, Access to Drugs, and Chemotherapy-Protocol Adaptation to LMIC/LIC settings. (7,8).

Childhood cancer needs a continuum of care which is multidisciplinary for which professional societies provide common interactive platforms. Continental branches of SIOP disseminate knowledge to wider audiences, addressing topical issues, conducting clinical trials [SIOP-Europe, SIOP-SLAOP (Latin America)], bringing together various stakeholders. Educational fora such as the St-Jude Viva Singapore forum, POEM group (Middle-East, West Asia), EURADO (Russia, East Europe) provide regional opportunities for learning and collaboration.

Providing universal health coverage to all types of childhood cancers will improve survival, but it requires commitment from governments. This Lancet Commission study provided strong evidence on cost-effective solutions to childhood cancer, which can help in convincing governments on the feasibility of scaling health interventions. The Commission's last

action on investment on research, development and innovation is of great importance. However, the direction of research should focus on innovative methods to improve the service delivery model in a cost-effective approach, rather than too much expenditure in basic scientific research which can be conducted in high-income countries. Asia represents a wide spectrum in health economics; to improve survival, answers need to come from regional data; our population demographic being an asset for clinical research.

The Lancet Oncology Commission has brought out this interesting, comprehensive and valuable document, providing compelling evidence for global solidarity and action towards sustainable childhood cancer care

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## How Japan contributes to the WHO Global Initiative for Childhood Cancer



#### Akira Nakagawara, MD, PhD

Saga HIMAT Foundation
Past-continental president of Asia, SIOP

In 2018, World Health Organization (WHO) declared the Global Initiative for Childhood Cancer with the goal of "the cure rate of childhood cancer on earth should be increased up to more than 60% by 2030". Dr. Andre Ilbawi, Cancer Control, Management of Noncommunicable Diseases Unit, WHO, announced it and explained in detail at the SIOP 2018 Congress in Kyoto. After then, WHO started to work toward the goal together with SIOP, Union for International Cancer Control (UICC), Childhood Cancer International (CCI) and St. Jude Hospital by targeting the countries including Myanmar, Ghana and Peru as the first stage. The number of target countries may be increased within a couple of years.

Japan has also started to discuss about how we could contribute to the WHO Global Initiative. Under the initiatives of the Japanese Society of Pediatric Hematology/Oncology (JSPHO) and the Japan Children's Cancer Group (JCCG), the representatives of International Committees of JSPHO and JCCG as well as those of other groups including National Center for Global Health and medicine (NCGM), National Cancer Center Japan (NCCJ) and SIOP-Japan gathered and started to discuss about this issue.

Our discussions could present some options including that one of our ways to contribute to this important mission is to activate the Asian Pediatric Hematology and Oncology Group (APHOG) by collaborating with JCCG. APHOG was first proposed at the SIOP Asia Congress held at Yogyakarta, Indonesia, in 2012. Since then, we had more than several APHOG meetings but the lack of money was the big limitation to go forward. To overcome such difficulty, we changed the by-laws of non-profit organization "Magokoro Organization for Childhood Cancer (MOCC)" to mainly support for the APHOG and the WHO Global Initiative for Childhood Cancer. Our Japanese team will further continue to discuss about how we can contribute to make the goal of WHO Global Initiative real. So many children with cancer in Asia are waiting for our supports every day.

# Battling Undernutrition: A barrier to good outcome in children with Cancer



#### **Amita Trehan**

Pediatric Hematology Oncology Unit, Advanced Pediatric Center, Postgraduate Institute of Medical Education & Research, Chandigarh, India

Undernutrition is a modifiable risk factor for improving outcome in any disease. The majority of children with cancer live in resource poor countries, where the incidence of undernutrition ranges from 35-40%. Though there has been immense improvement in the management of children with cancer in low- and middle income countries (LMICs), improvement in outcome is limited to the large tertiary care centers . Survival in LMIC's is still bleak with a large percentage being unable to access care and a high treatment related mortality owing to a large number of factors. Supportive care, which includes nutrition care, remains poor in most pediatric cancer units in LMIC's, which includes a large number of countries in south east Asia. A survey done in India revealed a mere 45% of pediatric cancer units to have access to a dietician, with sub optimal delivery of nutrition care.

The Nutrition Working Group (NWG) of the SIOP, Committee on Pediatric Oncology in Developing Countries (PODC) has developed a framework for assessment of infrastructure and capacity to deliver optimal nutritional care in LMIC's. The focus of the group is Nutritional Education & Capacity Building. In South east Asia, steps have been taken by

- (1) Yearly workshops in nutrition since 2014 for doctors, nurses, dietitians, social workers taking care of children with cancer.
- (2) Enabling work with non-governmental organizations (NGO's). This has enabled dietitians across hospitals with training and good access to nutritional supplements provided by the NGO's.

# Battling Undernutrition: A barrier to good outcome in children with Cancer

(3) Promotion of research on locally relevant nutritional issues in children with cancer. In India, steps to ensure standard guidelines with regards to nutritional assessment and intervention are underway.

The SIOP PODC nutrition group would be delighted to have more physicians, dietitians and nurses join us, which can be done on cure4kids (SIOP PODC nutrition group).



Organizing Committee at Chandigarh, 2017



Faculty and Delegates, Mumbai 2018



Faculty at Chennai, 2019

### CCI Member: CLASS, Bangladesh



## "International Childhood Cancer Day 2020 observed"

The International Childhood Cancer Day 2020 was observed at National Public School & College premises in the city on Saturday. Children Leukemia Assistance And Support Services (CLASS) in cooperation with National Public School & College (NPSC) organized the programme where Prof. Dr. Golam Rabbani, Head of Hematology Department, CMCH attended as keynote speaker and Shamsul Hoq Haidari, Chattogram bureau Chief of NTV was Chief Guest .

On the occasion, a colorful rally was held at 9am that paraded nearby areas after which a discussion to raise awareness on Childhood Cancer took place at 10am at school auditorium. "Anemia, insomnia, lack of appetite and restlessness are some of the symptoms of childhood leukemia" Dr. Rabbani said as he advised guardians to call in a doctor once the symptoms are evident. While the rate of recovery is 80/90% through proper treatment in developed countries, Bangladesh struggles with only about 20% treatment facilities. He also informed that the disease mostly attacks before the age of 15.





### CCI Member: CLASS, Bangladesh



## "International Childhood Cancer Day 2020 observed"

In her speech as special guest, Miss World Bangladesh 2019, Rafa Nanjiba Torsa focused on cleanliness, specifically cleansing hand before eating something. She also advised the participating students to do at least a piece of good work every day.

"I am at one with Dr. Rabbani and Toursa regarding cleanliness and maintaining caution about this disease" Shamsul Hoq Haidari said while speaking as Chief Guest. He highly appreciated the initiative of CLASS in this respect.

Presided over by Chairman of CLASS and National Public School & College and Editor , The Daily People's View, the discussion was addressed among others by directors of NPSC and guests of honour Prof. Dr. Helaluddin of CU, Prof. Ayesha Afreen, CU, Selimullah Zaman, Shehela Abedin, Anwar Siddique Chowdhury, Mohammed Yakub, principal AM Shahidul Alam and Vice Principal Md. Giasuddin.

Besides, Teachers, Guardians and students were present on the occasion.





### CCI Member: Yayasan Onkologi Anak Indonesia (YOAI)



#### "A Pot of Hope"

One of YOAI's pillars is the Family Supporting Group (FSG). The FSG at YOAI are volunteers who dedicated themselves to the activities of YOAI freely. Once a week they visit the hospital at their own time and their main purpose is accompanying the families of patient of children with cancer. They either read ing them stories, play games or other activities as they like.

In August 2019 the FSG made a program of Art Therapy for the pat ients at Cipto Mangunkusumo Hospital, the Central National Hospital with a theme "A Pot of Hope". Why "A Pot of Hope"? The FSG think that patient of children with cancer, HOPE is one of the most important attitude which cannot be omitted. Children are s till growing so every patient must have hope. Just like a pot of flower, if they are fertilized and taken care of, the outcome is beauty. Therefore if these children are given hope, care and love by everyone they will become braver, have self confidence and all these will accelerate the healing.



**Helping patient** 



Result of their drawing

### CCI Member: YOAI, Indonesia



## "YOAI Celebrates 18<sup>th</sup> Anniversary of International Childhood Cancer Day"

In commemorating the International Childhood Cancer Day 2020, as in previous years the Indonesian Childhood Cancer Foundation (YOAI) made several activities.

Our peak events was held on Sunday 16 th February 2020 campaigning at the area of Car Free Day on the main street of Jakarta with our theme "Save Our Children and the W e cooperate with "Dharmais" Hospital, National Cancer Center. The campaign was made as an awareness to support children with cancer as well as to educate the community to protect the environment properly and have a healthy lifestyle is the proper way to avoid cancer.

There were about 300 participants from members of the three pillars of YOAI and their families the Parents Club, Cancer Buster Community and the Family Supporting Group. There were also public communities.

YOAI is proud that the committee of this event was done purely by our survivors, the Cancer BusterCommunity. They hav e really made a good job.





## **CCI Member: Cancer Patients Aid Association**



### "Giving Smiles"

The name literally explains this programme that CPAA started two years ago. The activity was made possible through a generous donation by the Ashok and Sharada Sarnaik Endowment Fund. The children going through treatment lose their childhood in the drudgery of treatment, and their normal activities on one hand and on the other, they have to deal with the parents' grief, worry and paranoia. Children coming from lower socio economic backgrounds furthermore are deprived of any entertainment during this period.

**Weekly Activities -** With permissions from d octors, we go to the hospitals and conduct art and dance movement therapy sessions which consists of entertainment, and there are several physical, cognitive, and social benefits as well.

For instance, in Wadia Hospital, Mumbai, patients are called in the morning for the tests and preliminary procedures and wait for their reports to start the treatment. We arrange activities for the children in this waiting period every week where the parents also enjoy along with the children. In KEM Hospital, Mumbai we schedule these programmes weekly in d ay care facility

Other than these regular programmes, some special activities are also been organized.

**Residential picnic -** 16 children from the age group of 10 to 17 who were under maintenance or remission had been taken to a C ountry C lub Resort close to Mumbai for two nights. This club ha d facilities like swimming, cycling, and a variety of games. The club had a hiking track and a golf course where they enjoyed the scenic beauty. Various games and workshop s were arranged fo r them as well . Away from home, they also had a break from the watchful eyes of the parents. The whole experience gave them a sense of freedom.

We intend to extend Giving Smiles in all hospitals to cover many more children who are going through the treatment.



A session in Wadia Hospital OPD



A child at KEM OPD



Group of children at Golden Swan

# International Childhood Cancer Day Activities

#### Tawam Hospital, UAE



# Selected Recent Publications: COVID and Paediatric Cancer

- Bouffet E, Challinor J, Sullivan M, et al Early advice on managing children with.
   cancer during the COVID-19 pandemic and a call for sharing experiences
   Pediatric Blood Cancer 2020 April 2 https://onlinelibrary.wiley.com/doi/epd
   .
   f/10.1002/pbc.28327
- 2. Yang C, Li C, Wang S Clinical strategies for treating pediatric cancer during the . outbreak of 2019 novel coronavirus infection. Pediatric blood & cancer. . . 2020;67(5):e28248 https://onlinelibrary.wiley.com/doi/10.1002/pbc.28248
- 3. He Y, Lin Z, Tang D et al Strategic plan for management of COVID-19 in paediatric haematology and oncology departments The Lancet Haematology April 01, 2020 https://www.thelancet.com/journals/lanhae/article/PIIS2352-3026(20)30104- . 6/fulltext
- 4. Kotecha RS Challenges posed by COVID-19 to children with cancer The Lancet . Oncology 2020 March 25 https://www.thelancet.com/journals/lanonc/article/PI. IS1470-2045(20)30149-2/fulltext
- 5. Liang W, Guan W, Chen R, et al. Cancer patients in SARS-CoV-2 infection: a nationwide analysis in China. The Lancet. Oncology. 2020;21(3):335-337. https://www.thelancet.com/journals/lanonc/article/PIIS1470-2045 (20)30096-6/fulltext
- 6. Wang H, Zhang L. Risk of COVID-19 for patients with cancer. The Lancet Oncolo. gy. 2020 Mar 3. https://www.thelancet.com/journals/lanonc/article/PI . IS1470-2045(20)30149-2/fulltext
- 7. Xia Y, Jin R, Zhao J, Li W, Shen H. Risk of COVID-19 for cancer patients. The Lancet Oncology. 2020 Mar 3.https://www.thelancet.com/ journals/lanonc/arti . cle/PIIS1470-2045(20)30150-9/fulltext
- 8. Dong Y, Mo X, Hu Y, et al. Epidemiological Characteristics of 2143 Pediatric Patients With 2019 Coronavirus Disease in China. Pediatrics. 2020. https://pediatrics.aappublications.org/content/pediatrics/early/2020/03/16/peds.2020-0702.full.pdf
- 9. Ludvigsson JF Systematic review of COVID-19 in children shows milder cases and a better prognosis than adults Acta Paediatrica, 2020 Mar 23. https://on inelibrary.wiley.com/doi/pdf/10.1111/apa.15270

### Paediatric Oncology Resources

### These pages are constantly updated and offer information for healthcare professionals as well as patients and caregivers.

- A collaboration of St. Jude Children's Research Hospital and SIOP: https://global.stjude.org/en-us/global-covid-19-observatory-and-resource-center-for-childhood-cancer.html
- SIOP Website: https://siop-online.org/covid-19-resources-and-guidance/
- SIOP members are invited to share any relevant information, insight and resources with the SIOP team which we can be posted under the resource collection in this page.
- StJude Cancer Research Hospital resources for pediatric cancer patients, survivors, and their families.: https://together.stjude.org/en-us/care-support/covid-19-reources. html
- Childrens Cancer and Leukaemia Group COVID-19 guidance for children and young people with cancer undergoing treatment https://www.cclg.org.uk/Coronavirusadvice
- ASCO:https://www.asco.org/asco-coronavirus-information
- Oncology Nursing Society Guidelines: https://www.ons.org/covid-19-interim-guidelines

#### **Key International Resources**

https://www.coronavirus.gov/

https://www.nih.gov/health-information/coronavirus

https://www.who.int/emergencies/diseases/novel-coronavirus-2019

https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html

Websites of National Health agencies of individual countries would provide more specific information.

# How Are We Coping with COVID 19: Results of a preliminary SIOP ASIA Survey

SIOP Asia conducted a brief survey in a representative sample of members across the breadth of Asia regarding their situation during the present COVID 19 pandemic; a brief summary of the same is outlined below. Immunocompromised children on chemotherapy do not appear to be more susceptible to the novel corona virus, as only 10% of respondents reported seeing <5 cases (1 each), all with none or mild symptoms and favorable outcome. Over 80% centres are testing for COVID 19 only if patient or any family member has suspicious symptoms and about half recommend prophylactic measures such as warm water gargles, vitamin C and indigenous remedies.

For patient engagement with regards to minor issues or monitoring, 75% use virtual or teleconsults and 65% involve their local physician for shared care. Three-fourth of respondents were able to maintain treatment protocol discipline. For those patients unable to follow up, 60% arrange shared-care with local physicians, 25% planned to use metronomic therapy for that period, and 25% postpone treatments with subsequent priority rescheduling. Metronomic therapy was also mentioned for use in those where intensive/high dose treatments were electively deferred. Only two-thirds of centres were able to reorganize daycare chemotherapy with bed-distancing or separate cubicles. While 55% faced some difficulties with chemotherapy access, 70% faced shortages of blood products and donors. However over 60% did not yet need to alter their criteria for blood product transfusion, nor did 70% need to de-intensify treatment due to such shortages. 85% of respondents reported proactive counselling of survivors, however none saw COVID 19 infection in them. Only 42% had access to PPE as per ideal recommendations, while 23% reported inadequacy. Two-thirds of respondents follow their national guidelines for COVID19 prevention/management, while the rest follow institutional guidelines. Over 80% centres reported no rise in morbidity/mortality during these times, while 15% found increased morbidity. Alarmingly 90% respondents reported a significant drop in new cases of childhood cancer coming to their facility.

While the incidence is low and outcomes are good, COVID 19 will present evolving challenges especially in those with deferred intensive treatments, and advanced disease in patients who do not access diagnosis/treatment during the pandemic. Apart from disease diagnostics, often it may not be possible to freely investigate interim complications and in this pandemic scenario we may have to rely on the fundamentals of clinical medicine and healthcare as is anyway done in LIC/LMICs. In the context of available guidelines institutions are encouraged to review their own circumstances: Covid19 prevalence, spectrum of disease/complications and resources; to develop and constantly evolve their SOPs through a local COVID 19 Action team or forum.

Dr Rashmi Dalvi Dr Maya Prasad

#### SAVE THE DATES

Please note that many conferences this year have been postponed in view of the COVID-19 epidemic. The list below contains only the confirmed dates of postponed events, and is neither complete nor final.

What : SIOP Asia 2020

When: September 4th-6th,2020

Where: Mumbai, India

More information: https://www.siopasia2020.com/

What : Annual Conference of SIOP (SIOP 2020)

When : October 14th-17th, 2020

Where: Ottawa Canada

More information: https://siop-congress.org/

What : International Symposium on Hodgkin Lymphome

**When**: October 24<sup>th</sup>-26<sup>th</sup>, 2020

Where: Cologne, Germany

What : 8th International Tuebingen Symposium on Pediatric Solid Tumors

When: November 6<sup>th</sup>-8<sup>th</sup>, 2020 Where: Tuebingen, Germany

What : International Symposium on Pediatric Neuro-Oncology (ISPNO) 2020

**When**: December 13<sup>th</sup>-16<sup>th</sup>, 2020

Where: Karuizawa, Japan

More information: http://ispno2020.umin.jp/

What : Advances in Neuroblastoma Research 2021

When: May 24th-27th, 2021

Where: Amsterdam, the Netherlands

More information: https://www.anr2021.org/

What : North American Symposium on Late Complications in Children with Cancer

When: June 16th-19th, 2021

Where: Atlanta, USA

What : Annual Conference of SIOP (SIOP 2021)

When: October 21<sup>st</sup> - 24<sup>th</sup>, 2021 Where: Honolulu, Hawaii (USA),

More information: https://siop-congress.org/