



BBCI ANNUAL REPORT 2017-18



27th November 2017, on the day of take over of BBCI by DAE/TMC

APPRECIATION



Shri Narendra Modi
Hon'ble Prime Minister of India



Prof. Jagdish Mukhi
Hon'ble Governor of Assam



Dr. Jitendra Singh
Hon'ble DoNER Minister, GoI



Shri Sarbananda Sonowal
Hon'ble Chief Minister of Assam



Dr. Himanta Biswa Sarma
Hon'ble Health Minister of Assam



Shri Kamlesh Nilkanth Vyas
Secretary, DAE & Chairman, AEC



Dr. Rajendra A. Badwe
Director, TMC, Mumbai



Annual Report 2017-18

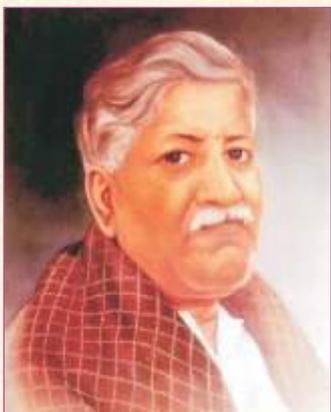
Dr Bhubaneswar Borooh Cancer Institute

A Grant-in-Aid Institute of Department of Atomic Energy, Govt. of India
and a Unit of Tata Memorial Centre (Mumbai)

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A brief life sketch of DR. BHUBANESWAR BOROOAH

DR. BHUBANESWAR BOROOAH, so endearing and charismatic was his personality that he could impress himself upon all sections of the people of Assam, so much so that the people adorned his name with an epithet '**Loka Bandhu**' (Peoples' friend). He was indeed not an ordinary man! Yet he was a common man doing his day to day routine work with all sincerity and humility, with an aim to serve people. "Service to mankind is service to God was his philosophy of life."

The secret of success in life is the art of making friends. Very often friends are considered more important in life than one's own kith and kin. A man is called a true friend when compassion, benevolence and a feeling of concern comes to him naturally. He is a person who is genuine in his dealings with others and selflessly dedicates and involves himself with others around, without hankering after money and recognition in return. One man, who fits this description and does full justice to it, was Dr Bhubaneswar Borooah.

Dr. Bhubaneswar Borooah was born on the 4th of September, 1893 unto an illustrious family of Dibrugarh, known for its active participation in the freedom struggle. He passed his Intermediate Science Examination from Cotton College in 1914. Thereafter, he joined service as a 'School Inspector'. Only on being awarded a stipend, Borooah proceeded for his medical education to Calcutta where he had close interaction with the famous doctor and teacher, Dr. B. C. Roy of Bengal, and the latter's influence on him was immense. After passing his M.B.(Bachelor of Medicine) Examination, Dr. Borooah had to work in the medical department of the Assam Government obligatory to his receiving the stipend. However, his period of Government service was short and he resigned from the post to start his own medical practice and at the same time actively involved himself in the 'Non-co-operation' and 'Civil Disobedience' movement. He played a laudable role as a true congressman in India's freedom struggle and his contribution towards building a modern Assam is noteworthy. He was arrested a number of times and was also imprisoned for being a patriot and freedom fighter.

However, no amount of repression by the British rulers could deter him from achieving his goal. His job was to do good to others and to society. Professionally Dr.

Borooah was a doctor. His clinical acumen was highly acclaimed by all and that he could diagnose and treat diseases with the most meager tools he possessed, has become a legend today.

In his professional pursuits, Dr. Borooah treated the poor free of cost and even gave them money for their meals and medicines. He excelled in his profession as an ideal doctor and even today many in their minds harbor unforgettable moments of his selfless devotion to patients care as treasured memories.

Another important facet of his personality was that he had great organizational ability and he headed the District Congress Committee for several years. He had a great flair for public service but he abhorred the idea of getting involved in so called politics. He had no ministerial post which he could have easily managed, but then he had much say in the government policies and even in the cabinet's decisions during his time.

Dr. Borooah associated himself liberally in establishing many institutions and organizations. He was instrumental in converting the erstwhile Berry White Medical School into the full fledged Medical College in Dibrugarh and founded the Assam Branch of Indian Medical Association in 1947. He engineered the establishment of the Deaf and Dumb School at Gauhati, later on taken over by the government. Dr. Borooah was the founder President of Lokapriya Gopinath Bordoloi T.B. Hospital, established in 1954, taken over by the Government in 1972. His sincere efforts in establishing Kasturba Ashram and Assam Ayurvedic College are equally praiseworthy. Dr. Bhubaneswar Borooah was one of the few who has done so much for the good cause of the people of Assam. This Cancer Institution is befittingly dedicated to the memory of this great soul and is named as Dr. Bhubaneswar Borooah Cancer Institute.

Dr. Borooah is no more today and he passed away on the 25th of September 1956 at his residence at Sarania, Gauhati. Yet he is alive in the hearts of many for his selfless devotion in serving the common man and building bridges of friendship and harmony. May his life and ideals continue to encourage all of us today and also the future generation.



Director's Note

It gives me great pleasure to present the Annual Report for the year 2017-18. In a landmark decision, the Cabinet Committee on Security under the Chairmanship of Shri Narendra Modi, Hon'ble Prime Minister of India on 07.06.2017 approved taking over of Dr B Borooah Cancer Institute by Department of Atomic Energy, Govt. of India under the administrative control of Tata Memorial Centre, Mumbai. Accordingly, the Institute was taken over by Department of Atomic Energy, Govt. of India on 27.11.2017. A new 12-member Management Council was constituted with Director, Tata Memorial Centre, Mumbai as the Chairman and the Director, BBCI as Member Secretary. From 1st of July 2018, the rules and regulations of Department of Atomic Energy / TMC was implemented at BBCI. It is hoped that BBCI will be developed as a Centre of Excellence for Cancer Treatment, Education & Research in the North Eastern Region. We are grateful to Hon'ble Prime Minister of

India Shri Narendra Modi, Hon'ble DoNER Minister Dr Jitendra Singh, Hon'ble Chief Minister of Assam Shri Sarbananda Sonowal, Hon'ble Governor of Assam Prof. Jagdish Mukhi, Hon'ble Health Minister of Assam Dr Himanta Biswa Sarma, Chairman Atomic Energy Commission Dr K N Vyas, Director Tata Memorial Centre Dr R A Badwe, Secretary MDoNER, Shri Naveen Verma, Secretary North Eastern Council Shri Ram Muivah, Joint Secretary (A&A), DAE Shri Mervin S. Alexander, members of the erstwhile Board of Trustees of BBCI for their whole hearted support to achieve the milestone. We also record our appreciation to former Governor of Assam Shri Banwarilal Purohit, former Chief Minister of Assam Shri Tarun Gogoi, former DoNER Minister Shri Paban Singh Ghatowar, former Chairman, AEC Dr R K Sinha, Dr Sekhar Basu and Addl. Secretary, DAE Shri CBS Venkataramana, Hon'ble Member of Parliament Shri Kamakhya Prasad Tasa and Shri R K Sarma.

During this year 10,982 new patients registered at BBCI. The earning of hospital revenue has increased to Rs.12.54 crores during the year 2017-18 from the previous figure of Rs.12.54 crores. The Medical Council of India accorded permission to start DM in Medical Oncology with 2 seats and increased the number of seats in M.Ch in Surgical Oncology from one to three. M.Sc in Cancer Biology and One Year Post Basic Diploma in Oncology Nursing was started for the first time in the North East in collaboration with Asian Institute of Nursing Education. The Institute has also started dedicated skull-base surgery clinic and micro-vascular free-flap surgical procedure. A hostel for Post Graduate students and a second unit of Guest House for patient was inaugurated during this period.

It is my proud privilege to thank all those who have contributed for the publication of the Annual Report for the year 2017-18.

Dr Amal Chandra Kataki
Director
Dr B Borooah Cancer Institute, Guwahati

Dr. Bhubaneswar Borooh Cancer Institute Past, Present & Future

Dr. A. C. Katak, Director, Dr. B. Borooh Cancer Institute, Guwahati

Dr Bhubaneswar Borooh Cancer Institute is one of the oldest comprehensive cancer centre in the North Eastern Region of our country. The Institute is named after Bhubaneswar Borooh who was a great physician, freedom fighter and philanthropist of Assam. He was popularly known as Lokabandhu. Dr. Bhubaneswar



Borooh died on September 25, 1956 at the age of 63 years. After his death, a public meeting was held on February 28, 1958 in Nabin Bordoloi Hall under the presidentship of Late Debendra Nath Sarma wherein it was decided to establish a Cancer Institute in memory of Assam's beloved leader Dr. Bhubaneswar Borooh. Accordingly, a committee of Management

was constituted with Debendra Nath Sarma as President, Ganpath Dhanuka as Vice President, Dr. Kanak Chandra Borooh as General Secretary, Sri Dharendra Nath Borooh as Asst. General Secretary and Mahadeo Khaglia as Treasurer. The official work started from Dr. Bhubaneswar Borooh's Chamber at Hemchandra Goswami Path, Uzan Bazar. After one year, this committee was reconstituted with Late Mohendra Mohan Choudhury as Chief Adviser. The then Chief Minister of Assam Bimala Prasad Chaliha became the President. Other office bearers were Debendra Nath Sarma - Vice President, Dr. Kanak Chandra Borooh - Secretary, Sri Dharendra Nath Baruah - Asst. General Secretary and Baidyanath Mukherjee - Treasurer. Other people who were closely associated in connection with the establishment of the Institute were Birendra Nath Choudhury, Dr. Ganashyam Das, Bishnuram Medhi, Sarat Chandra Sinha, Ganpath Dhanuka, Durga Dutta Lohia, Dr. Nalini Sarma, Dr. Bhupen Phukon, Bijoy Chandra Bhagabati, Girinda Chandra Choudhury, Kamakhya Prasad Tripathi, Indu Prabha Borooh, R. N. Borooh etc. Dr. Kanak Chandra Borooh, the illustrious brother of Dr. Bhubaneswar Borooh worked relentlessly for the birth and growth of this Institute till his time of death.



On October 3, 1962, the foundation stone of Dr. Bhubaneswar Borooh Cancer Institute was laid by Bishnu Ram Medhi, the then Governor of Madras. The Institute was inaugurated on November 18, 1973 by Mohendra Mohan Choudhury, the then Governor of Punjab and became operational in 1974 with 20 beds, 2 doctors and 34 other staff. Dr. K. C. Borooh worked as Founder Secretary of the Institute. Dr. P. C. Changkakati was the first full time Radiation Oncologist and Dr. Raj Kumar Das (former Professor & Head, Obstetrics & Gynaecology, Gauhati Medical College), Dr. L. M. Kakoty, Dr. Bhubaneswar Das, Dr. G. G. Ahmed, Dr. T. K. Choudhury, Dr. P. K. Choudhury and Dr. S. B. Medhi served the Institute from its inception. Dr. Bharati Borooh (Professor of O&G, Gauhati Medical College) illustrious daughter of Dr. Bhubaneswar Borooh, Dr. M. M. Deka served the Institute as part-time consultants. Md. Ashraf Ali was the first Medical Physicist. Mr. K. C. Sarma, N.C. Deka, B. Das, H.C. Mazumdar, G. Bhattacharyya, G. C. Deka, A. C. Deka, C. Bezbaruah, Durga Bahadur Thapa, M. K. Ahmed, Hari Deka, Uttama Boro, Jagat Bala Bose, Lakshmi Basumatary, Rupa Boroah, Sukumaya Thapa were some of the employees who were associated with the Institute from the very beginning. Dr. G. G. Ahmed joined as the first Director, of the Institute on 25.05.1984 and worked till 11.09.1992. Dr. C. N. Sharma was the Director of the Institute for three years from 01.04.1993 to 31.03.1996. Dr. G. G. Ahmed again joined as a Director on 16.09.96 and worked till 30.09.2000. Mr. M. S. Rao, IAS, V. S. Bhaskar, IAS, B. Basumatary, IAS, C. K. Sarma, IAS, K. K. Mittal, IAS, Alok Perti, IAS, Hasan Ali, IAS, Dr. U. C. Sarma (the then Director of Medical

Education, Assam) and Mr. Biren Dutta, IAS also served the Institute as In-charge Directors. Dr. A. C. Kataki joined the Institute as a Director on 25.04.2003.

The first Cobalt Therapy Unit was acquired in 1979 with financial assistance of Rs.5.00 lakhs from the Government of India and Rs.7.00 lakhs from the Government of Assam. It was inaugurated by Rabi Ray, Union Minister of Health, Govt. of India on 20th June 1979. The Institute was recognized by the Ministry of Health & Family Welfare, Govt. of India as Regional Cancer Centre in 1980. By that time, the bed strength of the Institute had gone up to 50 from the original bed strength of 20. The Institute was taken over by the Government of Assam on August 7, 1986 from the B Borooah Cancer Society Trust and in the same year on December 25 the Institute was officially declared as autonomous institution under the Government of Assam. The second unit of Cobalt Therapy machine (Theratron-780) was commissioned in December 1987 and Brachytherapy unit (Selectron LDR) in 1988.

Though the Institute was taken over by the Government of Assam, the fund constraint continued and the then Chief Minister of Assam Sri Prafulla Kumar Mahanta met the then Chairman of Atomic Energy Commission - Dr. M. R. Srinivasan in 1987 for financial assistance. This was the turning point and a working group for revitalization of Dr. B. Borooah Cancer Institute was constituted with members from DAE, Tata Memorial Hospital, Department of Health, Govt. of Assam and North Eastern Council. Based on the report of the working group, the first Tripartite Agreement for funding and management of this Institute involving DAE, NEC and Government of Assam was signed in November 1988. Since then this Institute is funded by these agencies through tripartite agreement. The Director, Tata Memorial Centre is the Chairman of the Management Council and the Union Minister of DoNER is the Chairman of the Board of Directors of the Institute.

The first Cobalt unit was dismantled on 13.05.1994 and a high energy cobalt unit (Phoenix machine) was inaugurated by Hiteswar Saikia, the then Chief Minister of Assam on 29th July 1995. In 2001, dual energy Linear Accelerator machine with 5 energies of electron was inaugurated by Lt. Gen. S. K. Sinha, the then Governor of Assam on 26.03.2001. A High Dose Rate (HDR) Brachytherapy unit (Microselectron HDR) was inaugurated by Dr. K. A. Dinshaw, Director, Tata Memorial Centre cum Chairperson, Management Council, BBCI in September 2003.

The Institute witnessed agitational programme from year 1991 onwards, which had resulted in appointment of many officers of Indian Administrative Cadre as In-charge Director till 2003. During this period ESMA (Essential Services Maintenance Act) had to be promulgated by the Government of Assam to ban all forms of strikes in the Institute. Dr. A. C. Kataki joined the Institute as Director on 25.04.2003. The long pending formulation of Service nd

Rules & Rules of Business of the Institute came into effect w.e.f. 28.03.2008. The time bound promotion for all grades of employees was implemented w.e.f. February 2008. Though there was provision for creation of 97 posts was made in 1997, for various reasons, these posts were not created. As per the provision of the new service rules, 97 nos. of regular posts was created in the year 2008. The 6th Pay Commission Report was implemented for the hospital employees w.e.f.01.04.2009. The AICTE pay scale for doctors implemented w.e.f. 01.04.2012. Motivational workshop for all grades of employees have been conducted through professional organization 'Reform Prayas'. Many distinguished celebrities from public have been invited to deliver 'expectation speech' for the benefit of the Institute. 21 additional regular posts were created in 2009. In 2008, 8 posts and in 2011, 4 contractual posts were created. In 2012, 6 regular posts and 34 contractual posts were created.

The Intensity Modulated Radiotherapy (IMRT) and 3D Conformal Radiotherapy was inaugurated by Dr. K. A. Dinshaw, Director, Tata Memorial Centre, Mumbai on 27.01.2007. The second unit of Linear Accelerator machine was inaugurated by Sri Tarun Gogoi, Chief Minister of Assam on 18.11.2009. The Hon'ble Prime Minister of India Dr. Manmohan Singh paid a historic visit to Dr. B. Borooah Cancer Institute on April 20, 2012 and inaugurated the third Linear Accelerator machine with IMRT, IGRT (Image guided radiotherapy), SRS/SRT (Stereotactic Radiosurgery / Stereotactic Radiotherapy). The new Hospital Building with 115 additional beds was inaugurated by Lt. Gen. Ajai Singh, the then Governor of Assam on 17.10.2004. A new Operation Theatre Block was inaugurated by the then Health Minister of Assam Dr. Bhumidhar Barman on 14.11.2005. The new OPD building with laboratory, Seminar Hall, canteen etc. was inaugurated by Sri Tarun Gogoi, the Chief Minister of Assam on 22.06.2004. The first 1.5 Tesla MRI machine, first of its kind in the public sector hospital in the state of Assam at that time was inaugurated by Sri Mani Shankar Aiyer, the then Union Minister of DoNER, India on 10.03.2007. The Theratron-780 machine will be replaced with a Bhabhatron-II Telecobalt machine in the current year itself. The Department of Radiation Oncology has a Flat Panel Simulator Machine with Cone Beam CT option and also Coherence Dosimetrist for CT simulation, which was inaugurated by Dr. Himanta Biswa Sarma, Hon'ble Health Minister of Assam 02.01.2009. The Department has three computerized Treatment Planning System with 6 Radiation Oncologists, 5 medical physicists and 16 Radiotherapy Technicians / Technologists.

Some of the facilities inaugurated by distinguished visitors with date of inauguration are - CSSD (Dr Himanta Biswar Sarma, Hon'ble Health Minister of Assam, 18.11.2009), OPG & 500 mAX-ray machine with IITV (Dr. Himanta Biswa Sarma, Health Minister of Assam, 18.11.2006), Immunohistochemistry (Dr. Anil Kakodkar, Chairman, Atomic Energy Commission, India, 24.08.2006), Telemedicine (Dr. K. A. Dinshaw, Director, Tata Memorial Centre, Mumbai, 04.12.2003), Park Prasanti (Lt. Gen. Ajai Singh, Governor of Assam, 01.01.2008),

Hydroclave Biomedical Waste Disposal Unit (Dr. K. A. Dinshaw, Director, Tata Memorial Centre, Mumbai, 13.09.2008), Comprehensive Water Supply Scheme (Sri Paban Singh Ghatowar, Hon'ble DoNER Minister of India, 20.10.2011), Nurses Quarter (Dr. Himanta Biswa Sarma, Hon'ble Health Minister of Assam, 09.02.2011), Life Size Bronze Statue of Dr. Bhubaneswar Borooah (Dr. Biswajit Borooah, son of Dr. Bhubaneswar Borooah, 09.02.2011), Hospital Gate (Sri Paban Singh Ghatowar, Union Minister of DoNER, India (05.11.2012), Ministerial Staff Quarter (Lt. Gen. (Retd.) Sri Ajai Singh, H.E., the Governor of Assam, 01.01.2008), Hospital Laundry (Dr. R. A. Badwe, Director, Tata Memorial Centre, Mumbai, 22.03.2010), Physiotherapy & Occupational Therapy with Lymphoedema Clinic (Dr. R. A. Badwe, Director, Tata Memorial Centre, Mumbai, 09.10.2009).

The Institute at present has 14.3 acres of land (45 bighas) and 350 employees.

Blood bank was started in January 2008. The Department of Pathology has Biochemistry and Microbiology division as well. Sub-typing of leukemia with Flow Cytometer are regularly done in the Department. Students from various institutions regularly come to BBCI for training in immunohistochemistry.

The Population Based Cancer Registry (PBCR) under the network of National Cancer Registry Programme (NCRP) of ICMR was started in October 2003 and the Hospital Based Cancer Registry (HBCR) started in September 2010. DBT Centre for Molecular Biology and Cancer Research was inaugurated on 6th February 2010 by Sri R. S. Mooshahary, Governor of Meghalaya. 100 bedded Guest House for patients (Jironi Ghar) was inaugurated by Dr. Himanta Biswa Sarma, Hon'ble Ministry of Health & Family Welfare, Assam on September 4, 2007.

The Surgical Oncology Department which started with modest beginning has grown to a well-equipped department with highly trained surgical staff capable of performing all sorts of Onco Surgery like radical neck dissection, laryngectomy, reconstructive surgery, modified radical mastectomy, oesophageal and pancreatic surgery, radical hysterectomy etc. The Department of Surgical Oncology (General Surgical, Head & Neck and Gynaecologic Oncology) presently has 5 nos. of well equipped OT with facility for laparoscopy, cystoscopy, laser surgery, operative microscopy, C-arm imaging, radio frequency ablation, ultrasonic suction aspirator (CUSA) and frozen section biopsy facility.

The Medical Oncology Department is implementing the free chemotherapy scheme of the Govt. of Assam through a dedicated team of doctors. The Department of Radiodiagnosis is equipped with Multiple Slice Spiral CT Scan, Mammography machine, Orthopantogram, Ultra Sonography, 1.5 Tesla MRI machine, 500 mA X-ray machine with IITV and Nuclear Scan machine (Gamma Camera). A Digital X-ray machine and Computerized

Radiography System are under the process of commissioning in the current year.

The Preventive Oncology Department was established in 2003 and a Tobacco Cessation Clinic was started with grants in aid from World Health Organization and Ministry of Health & Family Welfare, Govt. of India which was first of its kind in the State. It was inaugurated by Sri S. Kabilan, IAS, Chief Secretary, Govt. of Assam on 20.04.2005. The TCC was upgraded to Regional Centre for Tobacco Control in 2010. The full fledged Department of Palliative Medicine was started in June 2010.

Facilities for residential quarters of the hospital staffs was started in 2004. A Hostel cum Guest House was inaugurated by the then DoNER Minister Sri Bijoy Krishna Handique on July 4, 2011. The 8 bedded ICU was established with grants-in-aid from Oil India Limited and was inaugurated by Sri N. M. Borah, CMD, Oil India Limited on April 9, 2010.

The new Administrative Block and 200 seater auditorium was inaugurated by Dr. Himanta Biswa Sarma, Hon'ble Health Minister of Assam and Sri Paban Singh Ghatowar, Union Minister of DoNER respectively on November 5, 2012.

The Dental Clinic was started in September 2009.

The DNB programme in Radiology was started in June 2009. The Medical Council of India (MCI) has issued letter of intent for starting MD course in Radiotherapy from 2013.

The Institute was affiliated under Srimanta Sankardeva University of Health Sciences, Assam for various academic courses in the year 2012. The Post Graduate Diploma Programme in Radiotherapy Technology is affiliated under Gauhati University and was started in 2007. The M.Sc. course in Radiological Physics in collaboration with Gauhati University was started in 2011. The Ph.D programme at Dr B Borooah Cancer Institute started in 2012 under Srimanta Sankardeva University of Health Sciences, Assam and in 2013 under Gauhati University. The Two Years Post Graduate Fellowship Programme in Gynaecologic Oncology in collaboration with the Dutch School of Gynaecologic Oncology & Pelvic Surgery under Srimanta Sankardeva University of Health Sciences, Assam was started in 2011. In the same year and under the same university, one year certificate course in palliative medicine for doctors was started. Two years fellowship programme in Head & Neck Oncology will be started in 2013. Various paramedical courses are also conducted by the Institute. Students from various north eastern states and other states like Haryana, Rajasthan, Karnataka etc. regularly undergo training at Dr B Borooah Cancer Institute in various discipline of medicine. MD course in Radiotherapy was started in 2013 and in 2016 the course was recognized by the Medical Council of India. In 2016, M.Ch in Surgical Oncology was started with one seat and the number was increased to three in the year 2017. DM in Medical and

Oncology was started in 2017 and in 2016, BBCI in collaboration with Tata Memorial Hospital, Mumbai started Two Years PG Fellowship in Head & Neck Oncology, Surgical Oncology, Medical Oncology, Gynaecologic Oncology and Onco-Pathology. Home Care Services for cancer patients was inaugurated by the Hon'ble Chief Minister of Assam Shri Sarbananda Sonowal on 18th January 2017. The Institute also signed Memorandum of Understanding with down town university, Institute of Advance Study in Science & Technology, Indo-American Cancer Centre, Hyderabad and Amrita Institute of Medical Sciences, Kochi for clinical, academic & research collaboration. Dr R K Sinha, Chairman, Atomic Energy Commission, Govt. of India inaugurated Bhabhatron Teletherapy Unit on 10th July 2014. On 5th January, 2015, Dual Head Spect Gamma Camera machine was inaugurated by the Hon'ble Health Minister of Assam Dr. Nazrul Islam. BBCI signed MoU with University of Manitoba, Canada in October 2015.

The Radiological Safety Division, Atomic Energy Regulatory Board, Govt. of India has recognized Dr. B. Borooah Cancer Institute, Guwahati as a well-equipped Radiotherapy Centre for placement of DRP interns from 2013.

Through the Preventive Oncology Department, community based cancer control programme are regularly conducted in the State of Assam and North Eastern Region. The Ministry of Health & Family Welfare, Govt. of India awarded a special centre of excellence grant of Rs.5.00 crores to BBCI in 2008. Various research projects have been undertaken with support from Indian Council of Medical Research and Department of Biotechnology, Ministry of Science & Technology, Govt. of India. Many research papers have been published in national and international journals. Presently, research project on cancer of oesophagus, nasopharynx, breast, head & neck, cervix and HPV infection are in progress.

The Institute has adopted a holistic approach to treatment. Various recreational programmes for patients viz. musical programme, site seeing, indoor games, tree plantation by patients, interaction with cinestars / artists, etc. have been introduced in the year 2004 which has received wholehearted appreciation from patients and the public. Meditation and yoga programme are conducted in the community prayer hall in the indoor ward. An in-house library for indoor patients (Prerona) was established in Institute in November 2005.

On February 23, 2013, the Hon'ble Chief Minister of Assam Sri Tarun Gogoi inaugurated a new Block of Deluxe Paying Cabin along with PACS facility (Picture Archiving and Communication System) which is first of its kind in the public sector hospital in Assam. An Institutional Level Biotech Hub with Radiological Physics Laboratory with grants-in-aid from Department of Biotechnology, Govt. of India will be inaugurated in April 2013.

To further improve the services of the Institute, fortnightly interactive sessions with the patients and attendants are organised. Various grievances are addressed in the sessions and suggestions are implemented. This is in addition to hospital services evaluation by patients in a prescribed format.

BBCI regularly publishes BBCI Newsletter, News Bulletin and quarterly bulletin 'sounds of soul'. The views / experiences of patients are published with photographs in the 'Sounds of Soul'.

The then Hon'ble Chief Minister of Assam Shri Tarun Gogoi requested the Chairman, Atomic Energy Commission & Secretary, Department of Atomic Energy, Govt. of India Dr R K Sinha in October 2013 to kindly consider taking over of the Institute to develop into a centre of excellence for cancer treatment, education and research. Shri Paban Singh Ghatowar, Hon'ble DoNER Minister of India and the Chairman of Board of Directors, BBCI also wrote a letter in this regard to the Prime Minister of India Dr. Manmohan Singh. The Prime Minister of India sent a note to DAE. Dr. Sinha sent a team of experts from Tata Memorial Hospital, Mumbai to study the feasibility of taking over of BBCI by DAE. The Health & Family Welfare Department, Govt. of Assam vide Memo No.HLB.69/2013/59 dtd.08.11.2013 has issued 'NOC' to the Ministry of DoNER, Govt. of India for transfer Dr. B. Borooah Cancer Institute, Guwahati to Department of Atomic Energy, Govt. of India along with its assets. Dr R K Sinha, the then Chairman, Atomic Energy Commission, Govt. of India also visited Dr. B. Borooah Cancer Institute in July 2014 and expressed happiness with the facility available in the Institute.

The Director, BBCI also requested Shri Narendra Modi, Hon'ble Prime Minister of India; Hon'ble DoNER Minister Dr. Jitendra Singh and Hon'ble Minister of Youth Affairs & Sports Shri Sarbananda Sonowal to look into the matter and consider the proposal sympathetically.

The Director, BBCI also requested the North East MP Forum and the Parliamentary Standing Committee regarding the need for development of Dr B Borooah Cancer Institute as a Central Institute under Department of Atomic Energy, Govt. of India.

Prime Minister's Office vide ID note dated 17.06.2014 forwarded a letter from Shri Sarbananda Sonowal, the then Hon'ble Minister of State (Independent Charge), Youth Affairs and Sports, Govt. of India on the same subject matter and called for comments from the Department of Atomic Energy. The Department, after examining the matter, forwarded its comments to PMO on 04.09.2014, stating inter-alia that the Department is considering the proposal to take over BBCI and that it would be moving a note in this regard to the Atomic Energy Commission and thereafter to the Cabinet Committee on Security for their consideration and approval.

The Department of Atomic Energy constituted a Task

Force to examine the matter related to transfer of Dr B Borooah Cancer Institute to DAE. The meeting of the Task Force was held on 30.07.2015 at Mumbai under the Chairmanship of Dr CBS Venkataramananna, Addl. Secretary, DAE and was also attended by the Principal Secretary, Health & Family Welfare Department, Govt. of Assam Shri Sanjeeva Kumar. The committee recommended taking over of BBCI by DAE for consideration by Atomic Energy Commission.

The meeting of the Atomic Energy Commission was held on 29.08.2015 and the proposal to take over Dr B Borooah Cancer Institute as grants-in-aid Institute of Department of Atomic Energy was recommended. A draft Cabinet Note on this matter was sent to the PMO in the month of September 2015.

Shri Kamakhya Prasad Tasa, the Hon'ble Member of Parliament from Assam vide letter No.D.O.MPLS /J/VIP/2015/67 dtd. 29.07.2015 had also requested the Hon'ble Prime Minister of India Shri Narendra Modi to kindly look into the matter. Shri R P Sarma, Member of Parliament from Assam also raised the matter in Parliament.

The then Hon'ble Governor of Assam Shri P B Acharya vide letter No.GSAG/OFF/1/2015 dtd.07.07.2015 requested Dr. Jitendra Singh, Hon'ble Minister of DoNER, Govt. of India to kindly examine the matter regarding transfer of Dr B Borooah Cancer Institute to Department of Atomic Energy, Govt. of India. The Hon'ble DoNER Minister vide letter No.1111013/ VIP/ MOS(PP)/15 dtd.07.08.2015 informed His Excellency, the Governor of Assam that the proposal is referred for expeditious examination and decision.

The Prime Minister's Office in the month of April 2016 has approved the draft cabinet note submitted by DAE. Subsequently, the Department of Atomic Energy circulated a note for inter-ministerial consultation. The Ministry of Finance, Govt. of India made few observations to DAE. Comments on the observations of Ministry of Finance was called from Tata Memorial Hospital, Mumbai and Dr B Borooah Cancer Institute, Guwahati by DAE vide letter No.31/6/2013/BBCI/R&D-II/12119 dtd.12.09.2016. After observing all formalities, DAE submitted a cabinet note for consideration by Cabinet Committee on Security to be presided over by the Hon'ble Prime Minister of India for necessary approval.

The Director, BBCI Dr A C Katakhi vide letter dtd.03.06.2016 and 03.08.2016 brought this matter to the notice of the Hon'ble Chief Minister of Assam Shri Sarbananda Sonowal. Hon'ble Health Minister of Assam Dr Himanta Biswa Sarma was also appraised vide letter dtd.03.06.2016 about the present status of Dr. B. Borooah Cancer Institute.

Hon'ble Chief Minister of Assam Shri Sarbananda Sonowal vide D.O. letter No.CMO.1/ 2017/ 224 dtd.09.01.2017 requested the Hon'ble Prime Minister of India to consider taking over of BBCI by DAE. The Hon'ble Governor of Assam Shri Banwarilal Purohit vide letter No.GSAG/OFF/1/2017 dtd.28.04.2017 also requested the Hon'ble Prime Minister of India Shri Narendra Modi to favourably consider the proposal for taking over of BBCI by DAE.



The Hon'ble Prime Minister of India during the release of a book on "Indelible Footprints on the Sands of Time..." on the occasion of Diamond Jubilee Celebration of Tata Memorial Centre, Mumbai on 25.05.2017 at New Delhi announced setting up of a Cancer Hospital at Guwahati under DAE/TMC in presence of Dr Sekhar Basu, Chairman, Atomic Energy Commission.

The Cabinet Committee on Security chaired by the Hon'ble Prime Minister of India Dr. Narendra Modi in its meeting held on 7th June 2017 approved taking over of Dr B Borooah Cancer Institute, Guwahati by Department of Atomic Energy, Govt. of India as its grants-in-aid Institute under the administrative control of Tata Memorial Centre, Mumbai.



Dr. Jitendra Singh, Hon'ble Minister of DoNER cum Chairman, Board of Directors, BBCI on 07.06.2017 informed the Press & Electronic Media about taking over of BBCI by DAE. This is a landmark development in the history of Dr B Borooah Cancer Institute.

We are grateful to Hon'ble Prime Minister of India Shri Narendra Modi, Hon'ble DoNER Minister Dr Jitendra Singh, Hon'ble Chief Minister of Assam Shri Sarbananda Sonowal, Hon'ble Governor of Assam Shri Banwarilal Purohit, Hon'ble Health Minister of Assam Dr Himanta Biswa Sarma, Chairman Atomic Energy Commission Dr Sekhar Basu, Director Tata Memorial Centre Dr RA Badwe, Secretary MDoNER, Shri Naveen Verma, Secretary North Eastern Council Shri Ram Muivah, former Addl. Secretary, DAE Dr. CBS Venkataramanna, Joint Secretary (A&A), DAE Shri Mervin S. Alexander, members of the erstwhile Board of Trustees of BBCI for their whole hearted support to achieve the milestone.

It is hoped that BBCI under DAE/TMC will develop as a Centre of Excellence for Cancer Treatment, Education & Research in the North Eastern Region.

Cancer Care in North-East Challenges and Opportunities

Dr. A. C. Katak, Director, Dr. B. Borooah Cancer Institute, Guwahati

The recent time has witnessed an increase in the incidence of cancer. This is largely attributed to urbanization, industrialization, lifestyle changes, population growth, increased life expectancy, population migration and easy access to healthcare. At the time of independence, mean life expectancy in India was 45 years which has increased to 66 years in 2011. It is estimated that life expectancy of the Indian population will increase to 70 years by 2021-25. This has caused a paradigm shift in the disease pattern from communicable diseases to non-communicable diseases like cancer, diabetes, cardiovascular diseases, chronic respiratory diseases and stroke.

Globally, one crore new cancer patients are detected every year and if the current trend continues this number will increase to 1.5 crores in 2020, out of which 1.00 crore patients will die. In India, 15 - 16 lakhs new cancer patients are detected every year and there are about 30 - 35 lakhs cancer patients at any given point of time. As per Population Based Cancer Registry of Indian Council of Medical Research, the incidence of cancer is highest in Aizawl district (270 per lakh of population in male per year). This is followed by Papumpare District of Arunachal Pradesh (230 per lakh), East Khasi Hill district (218 per lakh) and Kamrup Urban district (206 per lakh). Estimated incident cancer cases in Assam in 2011 was 23,629 which is projected at 26,973 in 2026. Similarly incidence of female cancer is highest in Papumpare District (249.0), followed by Aizawl District (207.7), Urban Kamrup District (165.8) and East Khasi Hill District (117.0).



As per the latest report of the National Cancer Registry Programme of Indian Council of Medical Research, number of new cancer patients reported in the State of Assam are 24845 in 2011, 25119 in 2012, 30775 in 2013, 31124 in 2014 and 31474 in 2015. During this period, 10932 patients died in 2011, 11052 died in 2012, 15677 died

in 2013, 15853 died in 2014 and 16029 died in 2015.

Tobacco consumption, dietary factors, infection, alcohol, obesity, pollution and sedentary life style are some of the important risk factors for cancer. Prevalence of tobacco consumption in Assam is 49% as against National average of 28%. High prevalence of tobacco consumption in North Eastern States is responsible for 66.1%, 55.3% of tobacco related cancer in the State of Meghalaya and Tripura respectively. At Dr B Borooah Cancer Institute, 56% of all cancers in male and 25.5% in female are tobacco related cancer. In Urban Kamrup District, tobacco related cancer constitute 49.1% of all cancers in male and 25.7% of all cancers in female. Cancer of oesophagus, hypopharynx, lung, stomach and tongue are commonest cancers in male in Urban Kamrup District. All these are tobacco related cancer. In female, cancer of breast, oesophagus, cervix, gall bladder and ovary are commonest cancer. As per PBCR report of NCRP, in Urban Kamrup District, the leading site of cancer in male are oesophagus (14.3%), hypopharynx (8.9%), lung (8.4%), stomach (6.7%) and mouth (5.2%). Similarly in female, leading cancers are breast (17.5%) followed by oesophagus (10.2%), gall bladder (9.3%), cervix (8.6%) and ovary (5.5%).

In Dibrugarh district, leading sites of cancer in male are oesophagus (15.3%), hypopharynx (11.6%), stomach (7.9%), mouth (6.8%) and lung (5.1%). In female, leading sites are breast (19.0%), gall bladder (10.7%), oesophagus (9.4%), ovary (8.9%) and cervix uteri (6.4%).

In Cachar district, the leading sites of cancer in male are oesophagus (10.2%), hypopharynx (8.6%), lung (8.4%), mouth (5.7%) and larynx (5.4%). Similarly in female, breast (14.3%), cervix (13.9%), gall bladder (10.3%), oesophagus (6.8%) and ovary (5.1%).

As per Public Health Foundation of India, Govt. of Assam spent 157.8 crore rupees for treatment of tobacco related diseases in 2011 out of total health budget of Rs.541.2 crores.

Incidence of cancer in Rural India is half of the incidence of urban population. However, mortality in rural population is double than the urban areas. This is largely due to the fact that 95% of cancer treatment facilities in India are

located in urban areas whereas 70% of population lives in rural areas. Due to illiteracy, ignorance, poverty and myths associated with cancer, many patients in India present in the fairly advanced stage at the time of diagnosis. Most of the common cancers like cancer of oral cavity, cervix and breast are amenable for prevention and early detection through public awareness & screening. Unfortunately, in India we do not have a organized National Cancer Screening Programme for prevention & early detection of common cancers. Chances of a person dying in India with diagnosis of cancer is 68% whereas it is 33% in USA. Moreover, with India's population of 127 crores average earnings of an Indian is approximately Rs.5000 per month. It is estimated that the cost of cancer treatment in India is approximately Rs.50,000 as against Rs.50,00,000 in USA. As per World Health Organization, 1 radiotherapy machine is required per 10 lakhs of population. India as such requires about 1200 radiotherapy machines. Regrettably, in our country at present we have about 600 such tele-therapy machines. This results in long waiting period for radiotherapy which has adverse impact on survival. It is therefore necessary to set up more rural comprehensive cancer centres (RCCCs) similar to Barshi and Ratnagiri in the State of Maharashtra. These centres should be developed under the guidance of RCC / TCC.

The WHO has identified cancers which are amenable for primary prevention, early detection, curative therapy, pain and palliative care.

WHO Recommended priorities and strategies for prevention and control of 8 common cancers (Source: National Cancer Control Programme Policies and managerial guidelines - WHO).

Site of cancer	Primary prevention	Early diagnosis	Curative therapy	Pain relief & palliative care
Lung	++	-	-	++
Stomach	+	-	-	++
Breast	+	++	++	++
Colon/rectum	+	-	-	++
Cervix	+	++	++	++
Mouth/Pharynx	++	+	+	++
Esophagus	+	-	-	++
Liver	++	-	-	++

++ = Effective; + = Partly effective; - = Ineffective

It may be noted that primary prevention coupled with early diagnosis programmes would effectively limit the burden of cancers in the community. In the current cancer scenario in India, this gives us a direction for activating control programmes. The major strategy for control is to reduce the population exposure to known high risk habits.

In Assam, cancer treatment facilities with radiotherapy are available in Assam Medical College (Dibrugarh), Silchar Medical College (Silchar), Cachar Cancer Hospital & Research Centre (Silchar), North East Cancer Hospital & Research Centre (Guwahati), Cancer Hospital, Gauhati Medical College in addition to Dr. B. Borooah Cancer Institute (RCC, Guwahati). All the medical colleges of Assam and few district hospitals will be equipped soon with Oncology wing with minimum radiotherapy

facility as a joint initiative of Govt. of Assam and Tata Trusts. At present, in Assam, there are only 6 linear accelerators, out of which 3 are in Dr B Borooah Cancer Institute. Similarly, there are 6 tele-cobalt machines for radiotherapy in Assam of which 2 are in BBCI. Modern radiotherapy facilities like 3D CRT, IMRT, IGRT radiotherapy are available only

at BBCI and Cancer Hospital at Gauhati Medical College. One more Linear Accelerator with IGRT, VMAT and 6FFF Energy will be commissioned at Dr B Borooah Cancer Institute within 3-4 months. Nuclear Medicine and Molecular Imaging facility with Spect Gamma Camera is currently available at Dr B Borooah Cancer Institute, RCC-Agartala and Nucleomed Centre in Guwahati. BBCI will very soon start High Dose Radio-Isotope Therapy with 3 beds for the first time in the North Eastern Region. Currently, PET-CT facility is available in Gauhati Medical College and North East Cancer Hospital. A newly established Health City Hospital in Guwahati has started radiotherapy facility. It is heartening that Arunachal Pradesh has started radiotherapy treatment with Cobalt machine and Eden Hospital in Dimapur (Nagaland) with Linear Accelerator recently. Very soon, Naga Hospital Authority will have tertiary care cancer centre with support from Ministry of Health & Family Welfare, Govt. of India. Similarly, RCC-Tripura has been converted to a State Cancer Hospital and RCC-Aizawl will also be upgraded. There is also a proposal to start 200 bedded Cancer Hospital in NEIGRIHMS, Shillong. Cachar Cancer Hospital, Silchar will also have a Linear Accelerator machine very soon.

Human resource generation in the field of oncology is another important area which needs urgent consideration. There is acute shortage of trained doctors, nurses and technical staffs in the field of oncology. At present, in India, there is shortage of 10.00 lakhs doctors and 20.00 lakhs nurses. Post Graduate MD course in Radiotherapy was started at Dr B Borooah Cancer Institute in 2013. MSc course in Radiological Physics was started in collaboration with Gauhati University in 2012. Post Graduate Diploma Programme in Radiotherapy, Radiography, Laboratory Technology under Srimanta Sankardeva University of Health Sciences, Assam and Gauhati University has benefitted large number of students. Most of the successful students have been absorbed in various health establishments. Dr. B. Borooah Cancer Institute has started M.Ch in Surgical Oncology with one seat in 2016 and the number of seats was increased to three in 2017. BBCI also started DM in Medical Oncology with 2 seats from the academic year 2017. At present, Dr. B. Borooah Cancer Institute is the only Institute in the entire eastern India to conduct MD in Radiation Oncology, M.Ch in Surgical Oncology and DM in Medical Oncology. There is demand for specialized courses like CSSD, Anesthesia Technology, Palliative Medicine etc. which are conducted by the BBCI. In addition, BBCI in collaboration with Tata Memorial Hospital, Mumbai has started 2 Years Post Graduate Fellowship Programme in Head & Neck Oncology, Gynaecologic Oncology, Medical Oncology, Surgical

Oncology and Onco-Pathology in 2016. Doctors and students from various North Eastern States regularly undergo oncology training at BBCI. Msc. in Cancer Biology and Diploma in Oncology Nursing was started in 2018.

Considering high incidence of cancer in the North Eastern Region, there is a need for cancer research in this part of the country. With the support of ICMR, 11 Population Based Cancer Registry are in operation in NE Region. The Department of Bio-technology, Govt. of India has given generous support to establish DBT Centre for Cancer Research in various parts of the North Eastern Region. In these centres, many research projects are ongoing and large numbers of research papers have been published in various national & international journals. All the Cancer Centres / Oncology Wing in the North Eastern Region are working relentlessly to create awareness for prevention & early detection of cancer. In collaboration with Piramal Swasthya, BBCI has undertaken Mobile Cancer Screening Programme in the Kamrup District of Assam from October 2017. More than 12,000 new patients and about 80,000 old patients visit Dr B Borooah Cancer Institute every year. Dr B Borooah Cancer Institute, Cachar Cancer Hospital, Silchar have a robust programme for palliative care for terminally ill patients. Guwahati Pain and Palliative Care Society also providing similar care to large number of patients. Deepsikha Foundation has established a Hospice in Khetri area of Kamrup District of Assam and it is hoped that the centre will be able to accommodate more patients.



Dr. B. Borooah Cancer Institute in collaboration with the PRAG News, Guwahati started Home Care Services for terminally ill cancer patients on 18th January 2017, which was inaugurated by Shri Sarbananda Sonowal, Hon'ble Chief Minister of Assam.



The scheme 'Annakut' which provides free lunch to all OPD patients was inaugurated on 15th May 2017 at Dr B Borooah Cancer Institute in memory of Late Justice B. P. Saraf in collaboration with GLP Social Circle, Guwahati.

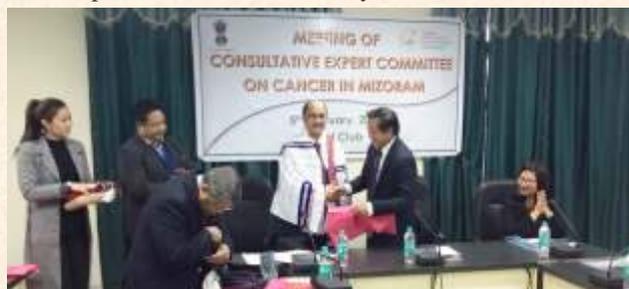
BBCI and Cachar Cancer Hospital are also working for occupational and financial rehabilitation of cancer patients and their families. To further upgrade the infrastructure facilities at BBCI, the Department of Atomic Energy, Govt. of India has taken over Dr B Borooah Cancer Institute, Guwahati as its Grant-in-Aid Institute and as a unit of Tata Memorial Centre (Mumbai) on 27.11.2017.



His Excellency Hon'ble Governor of Assam Prof. Jagdish Mukhi was apprised about high prevalence of Tobacco consumption in the State of Assam at Rajbawan, Guwahati on 22nd December, 2017.



Director, BBCI along with a group of doctors and official from State Tobacco Control Cell apprised Hon'ble Speaker of Assam Legislative Assembly Shri Hitendra Nath Goswami about high incidence of cancer and tobacco consumption in Assam on 2nd May, 2018.



On 5th February, 2018 Director BBCI apprised the Hon'ble Minister of Health Govt. of Mizoram at Aizawl about Cancer Scenario in North-East and need for more facilities for cancer treatment in the state of Mizoram.

It is hoped that all the cancer centres in the North Eastern Region will offer evidenced based and affordable care. Let us all work united for prevention and early detection of cancer.

Highlights'

1.	Date of Inauguration	18th November '1973
2.	Year of recognition by the Govt of India as Regional Centre for Cancer Research and Treatment	October, 1980
3.	Year of taking over by the Govt of Assam from Trust But retaining its autonomy	6th August '1986
4.	First Tripartite Agreement amongst Govt. of Assam, North-East Council and Department of Atomic Energy, Govt. of India	November, 1989
5.	Second Tripartite Agreement amongst Govt. of Assam, North-East Council and Department of Atomic Energy, Govt. of India	April, 1998
6.	Third Tripartite Agreement amongst Govt. of Assam, North-East Council and Department of Atomic Energy, Govt. of India	September, 2004
7.	Extended (one year) Third Tripartite Agreement amongst Govt of Assam, North-East Council and Dept of Atomic Energy, Govt of India	March, 2009
8.	2nd Extended (two year) Third Tripartite Agreement amongst Govt of Assam, North-East Council and Dept of Atomic Energy, Govt of India	April, 2010
9.	Fourth Tripartite Agreement amongst Govt of Assam, North-East Council and Dept of Atomic Energy, Govt of India	January, 2012
10.	Extension of Fourth Tripartite Agreement amongst Govt of Assam, North-East Council and Dept of Atomic Energy, Govt of India	April, 2017
11.	Taking over Dr B Borooah Cancer Institute, Guwahati by Department of Atomic Energy, Government of India	27th November, 2017

Management Council :

1.	Director, Tata Memorial Centre, Parel, Mumbai	Chairman
2.	Secretary, North Eastern Council, Govt of India, Shillong	Member
3.	Joint Secretary (A&A), Dept. of Atomic Energy, Mumbai	Member
4.	Commissioner & Secretary, Health & Family Welfare, Govt of Assam	Member
5.	Director (Administration) (Projects), TMC, Mumbai	Member
6.	Director (Finance), DAE, Govt. of India, Mumbai	Member
7.	Director, Academics, Tata Memorial Centre, Parel, Mumbai	Member
8.	Head of Medical Oncology & Research Director Prince Aly Khan Hospital, Nesbit Road, Mazagaon, Mumbai	Member
9.	NCG Coordinator, Tata Memorial Centre, Mumbai	Member
10.	IFA/ Joint Controller (Finance & Accounts) Tata Memorial Centre, Mumbai	Member
11.	President, Erstwhile Board of Trustees, BBCI, Guwahati	Member
12.	Director, Dr. B. Borooah Cancer Institute, Guwahati	Member

Photo Gallery



Minister of State Health & F.W., Govt of India
Shri Ashwani Kr. Chaubey during his visit to BBCI



Hon'ble Governor of Assam Prof. Jagdish Mukhi



Release of Annual Report of BBCI Hon'ble DoNER Minister



Hon'ble DoNER Minister, Dr J. K. Singh



Smt. Preeti Sudan, Secretary, Ministry of H&FW, Govt of India



Former Chief Minister of Assam, Shri Prafulla Kr. Mahanta at BBCI

Highlights

Academic Activities : 2017-18

Dr. Amal Chandra Katak, MD(Hons.)
Director,
Dr B Borooah Cancer Institute, Guwahati

National publications:

1. Epidemiology of gynecological cancers in Kamrup Urban District Cancer Registry. Barman D, Sharma JD, Barmon D, Katak AC, Sharma A, Kalita M. *Indian Journal of Cancer*, December 1, 2017, IP:14.139.205.194
2. Patterns of tobacco use in patients with upper aero digestive tract cancers: A hospital –based study. Katak AC, Sharma JD, Krishnatreya M, Baishya N, Kalita M. *Journal of Cancer Research and Therapeutics*, January –March 2018, Volume 14, Issue 2 (P437 –440).
3. Quality assessment and improvement of cancer registration system in Kamrup Urban District : A Report. Arpita Sharma, Jagannath Dev Sharma, Amal Chandra Katak, Debanjana Barman, Ranjan Lahon, Barsha Roy Deka, Chinmoy Misra, Manoj Kalita. *Indian Journal of Cancer*, Vol – 54, Issue 3, July-September 2017, Page 560-565.
4. Years of potential life lost due to cancer in Kamrup Urban District of Assam, Northeast India. Jagannath Dev Sharma, Amal Chandra Katak & Manoj Kalita. *The Indian Journal of Medical Research*, Volume 147, Number 3, March 2018.
5. Pattern of T-cell Non-Hodgkin's Lymphoma in a Tertiary Care Center in North East India. Debanwita Mahanta, Jagannath Dev Sharma, Anupam Sarma, Lopamudra Kakoti, Amal Chandra Katak, Shiraj Ahmed. *Indian Journal of Medical and Paediatric Oncology / Volume XX / Issue XX / Month 2018.*
2. Imbalance in leptin-adiponectin levels and leptin receptor expression as chief contributors to triple negative breast cancer progression in Northeast India. Rizwana Sultanaa, Amal Ch. Katakic,a, Bibhuti Bhusan Borthakurd, Tarun K. Basumatarye,b, Sujoy Boseb,a. *Gene* 621 (2017) 51-58
3. Nations within a nation: variations in epidemiological transition across the states of India, 1990-2016 in the Global Burden of Disease Study. India State-level Disease Burden Initiative Collaborators*. Amal C Katak et al. *The Lancet*, November 14, 2017 (Page : 1-24) ([http://dx.doi.org/10.1016/S0140-6736\(17\)32804-0](http://dx.doi.org/10.1016/S0140-6736(17)32804-0))
4. Association of mRNA Expression of Toll-Like Receptor 2 and 3 With Hepatitis B Viral Load in Chronic Hepatitis, Cirrhosis, and Hepatocellular Carcinoma. Kangkana Katak, Parikhit Borthakur, Namrata Kumari, Manab Deka, Amal Ch Katak, and Subhash Medhi. *Journal of Medical Virology*. October 2016 DOI: 10.1002/jmv.24719
5. Matz M, Coleman MP, Sant M, Chirlaque MD, Visser O, Gore M, Allemani C; & the CONCORD Working Group*. The histology of ovarian cancer: worldwide distribution and implications for international survival comparisons (CONCORD-2). *Gynecol Oncol* 2017;144:405-13(**SCI Impact Factor=4.959**)
6. Bonaventure A, Harewood R, Stiller CA, [...] Coleman MP, Allemani C; CONCORD Working Group*. Worldwide comparison of survival from childhood leukaemia for 1995-2009, by subtype, age, and sex (CONCORD-2): a population-based study of individual data for 89 828 children from 198 registries in 53 countries. *Lancet Haematol* 2017;4:e202-e217(**SCI Impact Factor=7.123**)

International publications:

1. Effectiveness of ultrasonography and computed tomography in assessing thyroid cartilage invasion in laryngeal and hypopharyngeal cancers. Nilu Malpani Dhoot, B. Choudhury, A. C. Katak, L. Kakoti, S. Ahmed & J. Sharma. *J.Ultrasound* DOI 10.1007/s40477-017-0259-0 (Published online : 19 August 2017)
7. Allemani C, Matsuda T, Di Carlo, [...] Weir HK, Coleman MP; CONCORD Working Group*. Global surveillance of trends in cancer survival 2000-14 (CONCORD-3): analysis of individual records for 37513025 patients diagnosed with one of 18 cancers from 322 population-based registries in 71 countries. *Lancet* 2018 Jan 30 [Ahead of print] (**SCI Impact Factor=47.831**)

Dr. Jagannath Dev Sharma, MD(Path)
Prof&HOD of Department of Pathology BBCI.

Honorary posts:

Principal Investigator of PBCR & HBCR (ICMR) at BBCI.
President of Guwahati Forum of NE-Chapter of IAPM
Vice President of NE-Chapter of IAPM

Academic Activities:

1. Panelist on Oral Cancer in NECHRI, Guwahati, organized by AOI, NE branch on 23rd Sept 2017.
2. Participated in NERCON 17 (annual Conference of North East Regional Chapter of Indian Association of Pathologists & Microbiologists) at Silchar Medical College on 14th October 2017 and delivered a guest lecture on “Diagnostic Slide Seminar”
3. Participated in the BREAST CANCER UPDATE CUM HANDS-ON WORKSHOP 2017 on 15th & 16th October 2017 . at Dr B Borooah Cancer Institute , Guwahati, Assam & chaired two scientific sessions .
4. Organized as a. Chairman of Organizing Committee, the 13th Annual Conference of Association of Oncologists of North East India at BBCI on 9th and 10th February 2018 , b. Organized the Pre-Conference Workshop on Immunohistochemistry on 9th Feb. with a talk on its role in Lymphomas and c. Chaired the Panel discussion on Burden of Cancer in North east India , moderated by Dr Prashant Mathur, Director of NCRP-NCDIR of ICMR with panelists from various parts of North East.
5. Participated as Guest Speaker and talked on a, Cancer Burden in North East on 16th February 2018 in the CME organized by the Organizing Committee of 1st Anniversary of State Cancer Hospital of GMC in Guwahati and b, as a panelist in a panel discussion on Soft Tissue Sarcoma moderated by Dr Rabi Kanan, Director of Cachar Cancer Institute, Silchar .
6. Participated as Guest Faculty and talked on Role of immunohistochemistry in cancer diagnosis and prognosis , at the Symposium entitled “Molecular Biology Tools and its application in Biomedical Research “on 22nd Feb 2018 , organized by Multi-Disciplinary Research Unit (An ICMR /Dept. of Health Research, Govt of India funded Project) of FAA medical college and Hospital: Barpeta , Assam, briefed the audience about Tobacco Related Cancers in NE-India during question hours.
7. Participated in the Workshop on Population Based Cancer Survival on Carcinoma Breast, Cervix and Head and Neck , and E-Mortality software , organized by NCDIR-ICMR at Bangalore on 14th & 15th March 2018, as Principal Investigator of PBCR-Kamrup District (Assam)

Publications :

1. Sharma JD, Katak AC, Kalita M*. Years of potential life lost as due to cancer in Kamrup Urban District of Northeast India, 2010-2014. Indian Journal of Medical Research, (Accepted) 2017.
2. Kakoti LM, Sharma JD, Ahmed S, Sarma A. Sinonasal teratocarcinosarcoma – A rare case report. Indian J Case Reports. 2017 July; 3(3).
3. Kakoti LM, Sharma JD, Katak AC, Barmon D. Primary Ewing Sarcoma of Vulva: A Case Report and a Review of Literature. Indian Journal of Gynecologic Oncology. 2017 Mar 1;15(1):15.
4. Das S, Sarma A, Sharma JD, Ahmed S, Krishnatreya M, Katak AC. Value of urinary microalbumin test in cancer patients with borderline serum creatinine level. International Journal of Research in Medical Sciences. 2017 Jan 8;3(5):1199-202.
5. Kakati K, Das AK, Baishya N, Das K, Kakoti L, Sharma JD, Katak AC. Primary cutaneous tuberculosis associated with reactive cervical lymphadenopathy: a case report. International Journal of Research in Medical Sciences. 2017 Jan 3;4(7):3055-7.
6. Das S, Sarma A, Sharma JD, Ahmed S, Krishnatreya M, Katak AC. Value of urinary microalbumin test in cancer patients with borderline serum creatinine level. International Journal of Research in Medical Sciences. 2017 Jan 8;3(5):1199-202.
7. Barman D , Sharma JD, Barmon D , Katak AC , Sharma A , Kalita M*. Epidemiology of gynecological cancers in Kamrup Urban District Cancer Registry. . Indian Journal of Cancer 2017;54:388-91.
8. Das RJ, Katak AC, Sharma JD, Baishya N, Kalita M, Krishnatreya M. A study of head and neck cancer patients with special reference to tobacco use and educational level. Clin Cancer Invest J 2017;6:21-5 (SCI Impact Factor=Forthcoming).
9. Katak AC, Sharma JD, Krishnatreya M, Baishya N, Kalita M. Patterns of tobacco use in patients with upper aero-digestive tract cancers: A hospital-based study. J Cancer Res Ther 2018;14:437-440 (SCI Impact Factor=0.75)
10. Katak AC, Sharma JD, Krishnatreya M, Baishya N, Barmon D, Deka P, Kalita M. A survival study of uterine cervical patients in the North East India: Hospital-cancer registry-based analysis. J Can Res Ther [Epub ahead of print] [cited 2018 Apr 27]. Available from: <http://www.cancerjournal.net/preprintarticle.asp?id=184516> (SCI Impact Factor=0.75)

Dr Anupam Sarma
Prof., Dept of Pathology

Scientific meeting attended:

1. Attended the XXXIII Annual Review Meeting of the National Cancer Registry Programme (NCRP-NCDIR) held on 28th - 30th November 2017 at Amrita Institute of Medical Sciences, Kochi.
2. Attended as speaker at the Symposium entitled “Molecular Biology Tools and its application in Biomedical Research” on 22nd February 2018 at Fakhruddin Ali Ahmed Medical College, Barpeta.
3. Attended the “Dissemination of ICMR National Ethical Guidelines – 2017” held on 8th March 2018 at Gauhati Medical College, Guwahati.
4. Faculty & Jt. Organizing Secretary of 13th Annual Conference of Association of North East India (AONEI) and Pre- Conference Workshop on IHC held at Dr B Borooah Cancer Institute on 9th-10th of February, 2018.
5. Attended the Midterm CME of NERC IAPM in Dermatopathology held at Dr B. Borooah Cancer Institute, Guwahati

Publications:

1. Kakoti LM, Sharma JD, Ahmed S, Sarma A: Sinonasal teratocarcinosarcoma - A rare case report. Indian J Case Reports. 2017;3(3):164-166.

Posters:

1. Presented a poster entitled as “Burden of Tobacco Related Cancers in Kamrup Urban District” authored by Jagannath Dev Sharma, Anupam Sarma, Amal Chandra Kataki, Debanjana Barman, Arpita Sharma, Manoj Kalita, at XXXIII-ARM of NCDIR- NCRP from 28 - 30 November 2017, Amrita Institute of Medical Sciences, Kochi.

Research Project :

1. Working as Principal Investigator in Research Project “Study of ABL kinase domain mutation and promoter methylation status of multiple genes in chronic myeloid leukemia patients” sponsored by Indian Council of Medical Research, New Delhi.

Honorary Posts:

1. Secretary of Clinical Society of Dr.B.Borooah Cancer Institute, Guwahati.
2. Secretary of Guwahati Forum of N.E.R.C, Indian Association of Pathologist & Microbiologist.

Dr. Tashnin Rahman
Professor & I/C
Deptt. of Head & Neck Oncology

1. Invited to deliver the “Dr. S.N. Sarma Memorial Award Oration 2017” by North East Branch of Otolaryngologist of India in 'NEBOICON 17' at Dibrugarh on 28th October, 2017
2. Panelist in “Management of Oral Cancer” in the National CME in Oncology on 9th July 2017 organised by Indian Society Oncology.
3. Speaker of the topic “Orofacial reconstruction – Ten years experience of tertiary cancer centre” in the XIII Annual conference of Association of North East India on 10th February, 2018.
4. Chaired a Guest lecture session “ Management of Thyroid Cancer” in the National CME in Oncology on 9th July 2017 organised by Indian Society Oncology.
5. Chaired a session on “Tracheal Resection and reconstruction” in the National CME in Oncology on 9th July 2017 organised by Indian Society Oncology.
6. Chaired a Guest lecture session “ Thyroid Cancer” XIII Annual conference of Association of North East India on 10th February, 2018.
7. Attended 17th Annual conference of Foundation for Head & Neck Oncology (FHNO) at Mumbai in September 2017.
8. Attended Master class in “Lasers in Laryngeal Cancer” as a pre conference workshop at 17th FHNO at Mumbai.
9. Chaired a session in 4th North Eastern Regional conference of Head & Neck Oncology at Dr. B. Borooah Cancer Institute in June 2017.
10. Conducted a Oral Cancer Screening camp at Guwahati on 15th April, 2017
11. Participated in the workshop Dissemination of ICMR National Ethical Guidelines held on 8th March.
12. Principal Investigator of the DBT project “Identification of bio markers for hypopharyngeal cancer in high risk region of North East India (under review)

Dr. Ashok Kr. Das

Prof., Department of H & N Oncology

1. Attended Association of Oncologists of North East India (AONEI) 12 annual meeting at Silchar on 28th and 29th of January 2017 and participated in an oral cancer panel as a panelist.
2. Participated in the Standing Selection Committee meeting of CNCI, Kolkata as an expert for filling up of vacant post of specialist Grade II doctors on 27th & 28th February 2017.
3. Attended World No Tobacco day Celebration programme at Jorhat on 31st May as Guest of Honor organized by District Tobacco Control Cell.
4. Participated at a workshop on Tobacco Control for the stake holder on 22nd Feb, 2017 by District Tobacco Control Cell, Kamrup(M).
5. Attended 6th World Congress of International Academy of Oral Oncology at Bangalore and presented two paper on 'Study Of Genetic And Molecular Epidemiology Of Oral Cancer In Assam And Meghalaya Of North Eastern Region Of India' and 'Study of association of premalignant lesion of oral cavity with the use of areca nut in the state of Assam, India'. Also chair a scientific session from 17th to 20th May, 2017.
6. Participated in a CME on Esophageal and Laryngopharyngeal Cancers @ Shillong on June 10th, 2017, organized by Association of Oncologists of Northeast India and supported by Indian Association of Surgical Oncology (IASO) as a speaker.
7. Organized a core team (doctors) meet of VoTV, Northeast, on 17th July at Dr B Barooah Cancer Institute Guwahati in association with Sambandh Health Foundation.
8. Indo American Cancer Association Fellowship at Memorial Sloan Kattering Cancer Center, New York City from 8th August to 9th Sept. 2017.
9. Faculty for "Updates in Management of Head and Neck Cancer" from 3rd to 5th November 2017 to be held in JLN Auditorium, AIIMS, New Delhi
10. Participated as resource person for Training of Health Official organized by State Tobacco Control cell at Guwahati on 8th Nov.
11. Attended XXXIII Annual Review Meeting of NCDIR-NCRP on 28th - 30th November 2017 at Amrita Institute of Medical Sciences, Kochi.
12. Participated a series of Training Cum workshop on Tobacco Control Laws among the MPW workers, Stake holders and College Teachers of Kamrup Metropolitan

District on 7th, and 15th f Dec,2017, organized by DTCC,Kamrup Metro at Guwahati.

13. Meet the Honorable Governor of Assam and sensitized him regarding tobacco problem of Assam with a team from DrBBCI.

Publication:

1. RJ Das, Kunal Ranjan, A K Das, S K Medhi, Sudhakar GVS, Ashutosh Vatsyana. "Utilization of the forehead flap to repair skin defect following maxillectomy: a case report". J Dental and Maxillofacial Science, vol 16, Issue 5, 65-66.

Dr. Rajjyoti Das

Prof., Department of H & N Oncology

1. Chaired a session on Oral Cancer at the National CME in Oncology, organized by Indian Society of Oncology (ISO) at Dr B Borooah Cancer Institute in July, 2017.
2. Chaired a session on "Tracheal Resection and reconstruction" in the National CME Oncology organized by Dr B Borooah Cancer Institute society of Oncology in July 2017.
3. Attended 17th Annual Conference of Foundation for Head & Neck Oncology (FHNO) at Mumbai in September 2017.
4. Presented a paper "Sarcoma of Head & Neck - an Institutional Study" at Annual conference of Head & Neck Oncology Mumbai in September 2017.
5. Delivered a talk as invited speaker on "Papillary carcinoma thyroid - Controversies" in Head & Neck Update in September 2017, Organized by Nalbari Branch of Association of Oncologist of India.
6. Attended a CME on "Thyroid Cancer" and "Oral Cancer" organized by Narayana Super Speciality Hospital Kolkata at Pragati Manor Hotel.
7. Attended Master class in "Oral Cancer" as a pre conference workshop at 17th FHNO at Mumbai.
8. Participated as one of the Panelist in "Cancer of the Gingivo Buccal Malignancy" at 30th Annual Conference of North East Branch of Otolaryngologist of India at Assam Medical College.
9. Participated as Panelist in 4th North Eastern Regional Conference of Head & Neck Oncology at Dr. B. Borooah Cancer Institute in June 2017.
10. Chaired a Guest Lecture Session "Molecular Marker in recurrent Head & Neck carcinoma at 8th Head & Neck update on 2nd December 2018 at North East Cancer Hospital.

11. Chaired a session “Near Total Laryngectomy” at XII annual conference of Association of Oncologist of North East India at Dr B Borooah Cancer Institute in February 2018.
12. Chaired a session in XIII Conference of Association of Oncologist of North East India in a award paper session on 19th February 2018.
13. Chaired a session on “Thyroid Cancer Debate” at Anniversary celebration CME of State Cancer Institute for Guwahati Medical College on 16th February 2018.
14. Attended “ONCORECON 2018” - Journey to 5000 free flaps” at Tata Memorial Hospital, Mumbai in January, 2018.
15. Attended the XVI Annual conference on Evidence Based Management of Cancer in India at Tata Memorial Hospital, Mumabi in 23rd -25th February 2018.
16. Attended Cure - Surgical Approaches to the Thyroid - Open /Endoscopic / Robotic at Tata Medical Centre, Kolkata.
17. Has become the Life member of the Indian Society of Oncology (ISO with membership No. ND 152).

Publications :

1. Sarcoma in Head & Neck - a study of 25 cases in Regional Cancer Centre, published in Journal of Medical Science and clinical research on October 2017.
2. Ameloblastic Fibrosarcoma of Mandible : a journey of a benign tumour to an aggressive malignancy accepted for publication in International Journal of Medical and Health Research.
3. A study of Head and Neck Cancer patient with special reference to tobacco use and educational level, in clinical cancer investigation journal in February, 2017.

Dr. Kishore Das

Associate Professor

Dept of Head and Neck Oncology

1. Participated as panelist in 4th North Eastern Regional Conference on Head and Neck Oncology in June 2017.
2. Attended CME on oesophageal and laryngopharyngeal carcinoma organised by AONEI and IASO at shillong in June 2017.
3. Attended as chairperson in national CME in oncology held at BBCI,ghy in July 2017
4. Attended FHNO 2017 held in Mumbai in Sept 2017.

5. Attended 8th Head and Neck update at NECHRI, Jorabat in Dec 2017
6. Attended Convence 2018 organized by Nightingale hospital in March 2018

Publication:

1. Scalp Melanoma-What Lies Beneath Is More Important:A Case Report Published in IOSR Journal of Dental and Medical Sciences Vol.16,Issue 6,Ver.2,june 2017

Dr. Kaberi Kakati

Assistant Professor

Dept. of Head and Neck Surgery

Paper Publication :

1. “Ameloblasticfibrosarcoma of mandible : a journey of a benign tumor to an aggressive malignancy” accepted in International Journal of Medical and Health Sciences

Abstract Publication :

1. “Rare malignancies of Sinonasal Tract”published in *Skull Base Journal* in February, 2018.

Podium Presentation :

1. “Rare malignancies of Sinonasal Tract” presented in Annual Conference of North American Skull Base Society held at Coronado Island, California from 16-18 February, 2018.

Poster Presentation :

1. “Surgical Management of Temporal Bone malignancies” presented in FHNO-2017 held at Mumbai from 15-17 September, 2017.

Award :

1. Received Gold medal for Best Poster for “Surgical Management of Temporal Bone malignancies” at FHNO-2017 held at Mumbai from 15-17 September, 2017.

Training :

1. Completed 1 year Fellowship in Skull Base Surgery in August, 2017 from Tata Memorial Hospital, Mumbai.

Workshop :

1. Attended workshop in Anterior Skull base surgery held at Bombay Hospital, Mumbai in May, 2017.
2. Attended workshop in Temporal Bone Dissection and Surgery held at DY Patil Hospital, Mumbai in September, 2017.

Dr. Debabrata Barmon, MD

Associate Professor & I/c

Department of Gynaecologic Oncology

1. Delivered a talk on management of CIN at ISO meet at BBCI, Guwahati on 08.07.2017.
2. Delivered a talk on ASCO update at Clinical Society meet on 04.08.2017.
3. Attended the update on the management of Gynaecologic cancer at AIIMS; New Delhi on 05.08.2017 & 6.08.2017.
4. Delivered a talk on CA Cervix at the CME organized by Shillong OBG Society (SOGS) at Nazareth Hospital on 24.09.2017.
5. Attended ICC meeting at Bengluru and presented a poster on fallopian tube carcinoma on 9th to 12th Nov 2017.
6. Delivered a talk on premalignant disease of vulva at the YUVA FOGSI meeting at GMCH, Guwahati on 25.11.2017.
7. Attended Oncosung meet at TMC Mumbai on 07.12.2017 to 10.12.2017.
8. Invited as Expert for the development of POCSS (Gynae malignancy) proforma at NCDIR-Begguru on 12.01.2018.
9. Invited faculty-workshop moderator at the AICOG 2018 held at Bhubaneswar on 18.01.2018 to 19.01.2018.

Publications :

1. Epidemiology of Gynaecological cancers in Kamrup urban district cancer registry; Indian Journal of cancer 2017
2. A rare case of concurrent steroid cell tumour of ovary with struma ovarii; Indian Journal of Gynaecologic Oncology 2018.

Memberships:

Life Member of AOGIN-2018

Dr. Mouchumee Bhattacharyya

Addl. Professor, Dept of Radiation Oncology cum

Principal Coordinator, BBCI Academia &

Member Secretary, Medical Ethics Committee, BBCI

Scientific meeting attended:

1. Nominated as Panel Member for selection of best speaker (Biotechnology) on 29th April 2017 at Assam Down town University, Guwahati.
2. Attended as Panelist on Breast Cancer in National CME in Oncology organized by Indian Society of Oncology & Dr. BBCI
3. Delivered talk on "Advances in Dosing and Delivery of Radiotherapy in Haematological Disorders at 58th Annual Conference of Indian Society of the Haematology & Blood Transfusion (ISHBT)-Haematocon on 2nd to 5th November 2017 at Guwahati.
4. Attended as Chairperson for Anniversary CME of State Cancer Institute, Gauhati Medical College, Guwahati on 16th Feb 2018.
5. Attended as Speaker to speak on Ethical Issues on 13th Annual Conference of Association of Oncologist of North East India (AONEI) on 9th & 10th Feb 2018.
6. Attended as Panelist in a case based discussion on Lung Cancer on the 13th Annual Conference of Association of Oncologist of North East India (AONEI) on 9th Feb 2018 & 10th Feb 2018.
7. Attended in the Dissemination Program of National Ethical Guidelines for Biomedical and Health Research Involving Human Participants and National Ethical Guidelines for Biomedical Research involving Children 2017 at Gauhati Medical College, Guwahati on 8th March 2018.
8. Attended in the Dissemination of ICMR-DBT National Guidelines for Stem Cell Research 2017 at Gauhati Medical College, Guwahati on 8th March 2018.

Publication:

1. Standard-dose versus high-dose radiotherapy with concurrent chemotherapy in esophageal cancer: A prospective randomized study Navin Nayan, **M. Bhattacharyya**, Vikas K. Jagtap¹, A.K. Kalita, R. Sunku, P. S. Roy² South Asia Journal of Cancer, Volume 7, Issue 1, January – March 2018.

Dr. Binoy Kumar Choudhury

Associate Prof, Department of Radio-diagnosis

1. Myself along with Deptt. of Surgical Oncology started weekly Clinico-Radiological Meeting in our department. PG Students, Residents, Fellowship Trainee and consultants of both departments are attending the same regularly.
 2. Attended Mid-Term CME on Radiology held at Jorhat Medical College, Assam on 10th & 11th July organized by Jorhat Subchapter of Assam Chapter of IRIA. I was felicitated at the conference as President of Assam Chapter of IRIA.
 3. I organized a Seminar in Oncology on 27th June 2017 at BBCI Auditorium. Guest Lecture was delivered by Dr. Chandan Jyoti Das, Associate Professor of Radio-diagnosis, AIIMS New Delhi on the topic of "Imaging in Hematological Malignancy: Head to Toe."
 4. Attended CME cum Workshop on "Hepato-biliary Interventional Radiology" on 19th August 2017 held at Gauhati Medical College. Dr. Amar Mukund, Associate Professor, Institute of Liver & Biliary Surgery (ILBS), New Delhi delivered lectures and conducted the Workshop.
 5. Attended Mid-Term CME on Radiology held in Guwahati on 14th November 2017 organized by Assam State Chapter of Indian Radiological & Imaging Association (IRIA).
 6. Attended Korean Congress of Radiology (KCR 2017) held in Seoul, South Korea from 24th to 28th October 2017.
 7. I presented oral scientific presentation on "Image-guided Biopsy of thoracic masses & Minimizing risk of Pneumothorax: Experience in a cancer Centre" on 27-10-17 at Korean Congress of Radiology (KCR 2017)
 8. I was awarded Travel Award (USD 500) for my oral presentation at Korean Congress of Radiology (KCR 2017).
 9. Attended 43rd Annual Conference of Assam State Chapter of Indian Radiological & Imaging Association (IRIA) held in Shillong, Meghalaya from 4th to 5th November.
 10. I chaired the session of Annual Oration i.e. S C Gohain Memorial Oration in the above mentioned IRIA conference.
 11. I delivered my Annual Presidential Report as President of Assam Chapter of IRIA in the above mentioned IRIA conference.
1. "Effectiveness of ultrasonography and computed tomography in assessing thyroid cartilage invasion in laryngeal and hypopharyngeal cancers." This has been published in "Journal of Ultrasound" August 2017. (Nilu Malpani Dhoot, B Choudhury, A C Katak, L Kakoti, S Ahmed, J Sharma). (J Ultrasound DOI 10.1007/s40477-017-0259-0). (J Ultrasound (2017) 20:205-211)
 2. Attended 17th Asian Oceanian Congress of Radiology (AOOCR) and 71st Annual Conference of Indian Radiological Imaging Association (IRIA) held in Mumbai from 24th to 28th January.
 3. Attended Inaugural Conference of Society of Oncologic Imaging India (SOII) held in Chennai on 3rd & 4th February 2018.
 4. I participated as a national Faculty in "Hands-on Workshop on Ultrasound-Guided Biopsy" in Inaugural Conference of Society of Oncologic Imaging India (SOII) held in Chennai on 3rd & 4th February 2018.
 5. Attended XIII Annual Conference of Association of North East Oncologists of India (AONEI) held on 9th & 10th Feb 2018 at BBCI Guwahati.
 6. I participated as a Panelist in Panel discussion on Carcinoma Esophagus in XIII Annual Conference of Association of North East Oncologists of India (AONEI) held at BBCI Guwahati. Dr. Arvind Krishnamurti, Professor of Surgical Oncology Cancer Hospital Adiyar was the moderator.
 7. I presented a scientific paper on "Clinical Application of CT Scan in Oncology" in XIII Annual Conference of Association of North East Oncologists of India (AONEI) held at BBCI Guwahati.
 8. Attended "Radiology CME" held at Radisson Blue Hotel, Guwahati on 18th March 2018 organized by Bayer Zydus Pharma Pvt Ltd. I chaired the 1st Session on "Oncologic Imaging".
 9. Attended "1st Indo-US Onco-Imaging Conference" held from 20th to 23th March 2018 at Tata Memorial Hospital (TMH), Mumbai organized by TMH & MSKCC (Memorial Sloan Klaterring Cancer Centre), USA.

Publication :

Dr. Bhargab Jyoti Saikia

Professor, Dept of Medical Oncology

1. Attended the National CME in Oncology organized by Dr.B.Borooah Cancer Institute and Indian Society of Oncology from 8th & 9th July 2017.
2. Attended 58th Annual National Conference of Indian Society of Haematology & Blood Transfusion held on 3rd to 5th Nov 2017 at Guwahati.
3. Attended the 2nd Indian Cancer Congress at Bengaluru from 9th to 12th Nov 2017.

Dr Partha Sarathi Roy

Associate Professor

Department of Medical Oncology

Publications:

1. 'Physical Factors of Carcinogenesis – Review Article' as a first author, published in Assam Journal of Internal Medicine (Indexed Journal). July 2017, Vol. 7, Issue 2.

Presentations/Conferences attended:

1. 'Best of ASCO' at Chandigarh (14th to 16th May'17) - as a faculty.
2. 'Annual ESMO congress meeting 2017' at Madrid Spain (Sept'17).
3. 'Breast Cancer Update' at Guwahati in Oct'17 – as a faculty.
4. '2nd Indian Cancer Congress' meeting at Bangalore (9th to 12th Nov'17) – as a faculty.
5. 'HAEMATOCON' meeting at Guwahati (2nd to 5th Nov'17) – as a faculty.
6. 'CME on Cancer Prevention' at Kohima on 25th Nov'17 – as a speaker.
7. 'AONEI' at Guwahati on 9th-10th Feb'18 – as a speaker/faculty.
8. 'CME on Lung Cancer' at TMC, Kolkata on 17th Feb'18 – as a speaker.
9. 'CME on RCC' at TMC, Kolkata on 17th March'18 – as a speaker.

Dr. Anupam Das

Professor & I/c, Dept. of Anesthesiology

1. Participated as delegate in the “CME on updates in obstetric anaesthesia” organized by ISA, Guwahati City Branch in association with Association of obstetric Anaesthesiologists and PAWS held at Gauhati Medical College and Hospital on 27th of April'18
2. Attended the XIII Annual Conference of Association of Oncologists of North-East India held at Dr.B.Borooah Cancer Institute on 9th – 10th February'2018 (MCI credit hours -2)
3. Delivered a CME lecture on “Anaesthetic challenges in cancer surgery” in the 30th Annual state conference of the Anaesthesiologists of Assam (ISACON ASSAM 2018) held on 20th of January 2018 at Tezpur, Assam (MCI credit hours – 3)
4. Attended a workshop on “Ventilators” held at GNRC hospitals, Guwahati on 10th of December'2018
5. Attended the CME cum National conference of Indian Society of Anaesthesiologists' 2017 held at Kolkata on 26th – 28th of November, 2017 (MCI credit hours – 8.5)
6. Attended the Breast Cancer Update cum Hands on Workshop'2017 held at Dr.B.Borooah Cancer Institute on 15th – 16th of October'2017 (MCI credit hours – 4)
7. Attended the National CME in Oncology organized by Dr.B.Borooah Cancer Institute in association with Indian Society of Oncology held at Dr.B.Borooah Cancer Institute on 8th-9th of July'2017 (MCI credit hours – 2)
8. Attended the “CME on Paediatric Anaesthesia” organized by Indian Society of Anaesthesiologists in association with Mission smile held at Guwahati on 6th of May'2017 (ACMR credit hours – 3)
9. Attended the “CME on Regional Anaesthesia” organized by Indian Society of Anaesthesiologists, Guwahati city branch in association with PAWS held at Guwahati on 1st of April'2017 (ACMR credit hours – 2)

Dr Rubu Sunku

Assistant Professor, Radiation Oncology

1. XIII annual conference of Association of Oncologist of North East India
2. Participated as Panellist in “Cancer of Oral Cavity” in XIII annual conference of Association of Oncologist of North East India
3. Participated as Faculty in Workshop on “IGRT” in XIII Annual Conference of Association of Oncologist of North East India
4. Participated in Panel “Soft Tissue Sarcoma” in Anniversary CME of State Cancer Institute, Guwahati Medical College Assam
5. Participated as Speaker in Update on Oncology organised by Dr. B. Borooah Cancer Institute, Guwahati in association with Nation Center for Disease Informatics and Research, Bangalore and Nazareth Hospital, Shillong.

Dr. Partha Pratim Medhi

Registrar, Department of Radiation Oncology

1. Attended “AMRITA ANNUAL HIGH PRECISION RADIATION THERAPY 2017” Conference at AIIMS, Kochi from 30th June, 2017- 2nd July, 2017.
2. Underwent Clinical Observership on Brachytherapy at Tata Memorial Hospital, Mumbai from 3rd July, 2017- 2nd August, 2017
3. Delivered talk on “Role of Radiotherapy in Retinoblastoma” at a CME on Retinoblastoma at Sri Sankaradeva Nethralaya, Guwahati on 9th September, 2017
4. Attended Hands-on workshop on Interstitial Multicatheter Brachytherapy in Breast Cancer at Dr. B. Borooah Cancer Institute, Guwahati on 15th October, 2017
5. Delivered talk on “Brachytherapy in Breast Cancer” at Breast Cancer Update cum Hands on Workshop 2017 held at Dr. B. Borooah Cancer Institute, Guwahati on 16th October, 2017
6. Attended 12th Annual Conference of Association of Radiation Oncologists of India- North East Chapter at Aizawl, Mizoram on 27th- 28th October, 2017
7. Participated in ESTRO School- AROI Teaching Course 2017 Advanced Technology in Radiation Oncology at Medanta-The Medicity, Gurgaon from 3rd- 6th December, 2017

8. Attended XIIIth Annual Conference of Association of Oncologists of North East India and Preconference workshop on IMRT and IGRT held at Dr. B. Borooah Cancer Institute on 9th- 10th February, 2017

Dr. Shashank Bansal2nd Year Post Graduate Trainee,
Dept. of Radiotherapy , BBCI**Conference Attended:**

1. 12th Annual NE-AROI conference, Oct, 2017
2. 2nd Indian Cancer Congress, Nov, 2017
3. 13th AONEI Conference, Feb, 2018
4. Preconference Workshop on IMRT and IGRT at 13th AONEI conference, Feb, 2018

Poster Presentations:

1. Dosimetric Analysis of two 3D conformal treatment plans in Rectal cancer, NEAROI, 2017
2. Rosaidorfman disease of CNS with Lymphadenopathy mimicking Tuberculoma : A case report and review of Literature, 2nd ICC.
3. Interfraction variation in Applicator Geometry and dose to point A and OAR in patients undergoing Brachytherapy for Cervical cancer : A retrospective Analysis, 13th AONEI.

Paper Publications:

1. Spinal glioblastoma Multiforme with Brain and spinal seedings : Treatment Approach from various view points, IJCR
2. Cardiac doses in Left sided Breast Cancer Radiotherapy Treated with Bi-Tangential conventional beams: Data from regional cancer centre (RCC) In North East India, IJCRME

Achievements:

1. Oncology Quiz: AONEI CME on Laryngeal and Esophageal Cancer, Winner

Dr. Ghritashree Bora

2nd Year Post Graduate Trainee,
Dept. of Radiotherapy , BBCI

Conferences Attended:

1. Updates in Management of Breast Cancer (6th-7th May, 2017) at AIIMS, New Delhi.
2. Breast Cancer Updates Cum Hands on Workshop (15th - 16th Oct, 2017) at BBCI.
3. 12th Annual Conference of Association of Radiation Oncologists of India, North East Chapter (27th-28th Oct, 2017) in Aizawl , Mizoram.
4. 2nd Indian Cancer Congress (8th – 12th Nov, 2017) in Bengaluru.
5. XIII Annual Conference of Association of Oncologists of North East India (9th – 10th Feb, 2018) at BBCI.

Workshops :

1. Short Observer ship Program on Basic Principles of Cancer Care (8th -13th May) at AIIMS, New Delhi.
2. Workshop on IMRT/IGRT in the XIII AONEI Conference at BBCI.

Poster Presentations:

1. “Dosimetric Analysis of HDR Brachytherapy for Cervical Cancer Based on variations in point definitions”- awarded best poster in the 12th Annual Conference of NE-AROI at Aizawl, Mizoram (27th -28th Oct, 2017).
2. “Malignant melanoma of the parotid-case report and review of literature”- e-poster presentation in the 2nd Indian Cancer Congress at Bengaluru (8th -12th Nov, 2017).
3. “Role of cranio-spinal Irradiation In CNS tumours-case series and review of literature in the XIIIth annual conference of AONEI (9th – 10th Feb, 2018).

Publications :

1. “Cardiac doses in left sided breast cancer radiotherapy treated with bitangential conventional beams: Data from Regional Cancer Centre (rcc) in North East India”- Published in International Journal of Cancer Research and Modern Education (IJCRME), Vol. 3, Issue 1, 2018.

Dr. Luri Borah

1st Year Post Graduate Trainee,
Dept. of Radiotherapy , BBCI

Conferences attended :

1. Breast Cancer Updates cum hands on Workshop at BBCI (15- 16th Oct, 2017) .
2. 12th Annual Conference of Association of Radiation Oncologists of India, North- East Chapter at Aizawl, Mizoram (27th -28th Oct, 2017) .
3. XIII Annual Conference of Association Oncologists of North- East India at BBCI (9th -10th Feb, 2018) .

Workshops:

1. Workshop on IMRT/IGRT in the XIII Annual Conference of Association Oncologists of North- East India at BBCI.

Poster Presentations :

1. “Extaskkeletal Ewing’s Sarcoma : A rare case report” at 12th Annual Conference of Association of Radiation Oncologists of India, North- East Chapter at Aizawl, Mizoram (27th -28th Oct, 2017).
2. “Comparisons of IMRT and 3D Conformal Technique in Reducing Spinal Dose in the treatment of Esophageal Cancers” at XIII Annual Conference of Association Oncologists of North- East India at BBCI (9th -10th Feb, 2018).

Dr. Moumita Paul

1st Year Post Graduate Trainee,
Dept. of Radiotherapy , BBCI

Conferences Attended :

1. Breast Cancer Updates Cum Hands on Workshop (15th - 16th Oct, 2017) at BBCI.
2. 12th Annual Conference of Association of Radiation Oncologists of India, North East Chapter (27th -28th Oct, 2017) in Aizawl , Mizoram.
3. XIII Annual Conference of Association of Oncologists of North East India (9th – 10th Feb, 2018) at BBCI.

Workshops:

1. Workshop on IMRT/IGRT in the XIII AONEI Conference at BBCI.

Poster Presentations :

1. Synchronous Malignancy in Head & Neck Cancer : Papillary carcinoma thyroid and squamous cell carcinoma tongue - Presentation in the 12th Annual Conference of NE-AROI at Aizawl, Mizoram (27th-28th Oct, 2017).
2. Epidemiological profile of Primary Brain Tumours in pediatric age group : A hospital based analysis– Presentation in the XIII Annual Conference of AONEI (9th-10th Feb, 2018).

Dr. Srinivas Bannoth

M.Ch. Surgical Oncology Resident. 1st Year
Dept. of Surgical Oncology, BBCI

List of CME , Workshop & conferences attended :

1. Breast cancer update cum hands on workshop : 15 & 16th October 2017
2. Hands on workshop on chemoport and picc line insertion : 4th November 2017
3. Advanced minimally invasive surgery workshop and CME held at GMCH guwahati : 16 & 17 December 2017.
4. Onco surg 2017 held at TMH MUMBAI: 8 to 10 December 2017.
5. Annual conference of AONEI : held at BBCI on 9 & 10th February 2018

Poster presentation :

1. En- BLoc resection , Extra corporeal irradiation and re-implantation in bone tumours .presented at AONEI and received consolation prize .

Dr. Nizara Baishya

Research Scientist (Medical)
Hospital Based Cancer Registry (HBCR)
Dr.B.Borooah Cancer Institute

1. Attended the AONEI conference held at BBCI in February 2018.
2. Organised the NCDIR conference on software module in Oncology at BBCI in March 2017.
3. Attended Head and Neck updates held at Guwahati by Nightingale Hospital.
4. Attended conference held at Gauhati Cancer Centre, Guwahati in February 2018.
5. Attended Dissemination of ICMR National Ethical Guidelines held on MARCH 08, 2018 at Gauhati Medical College, Guwahati, Assam.
6. Conducted classes of two weeks summer training both practical and theory as faculty at Dr.B.Borooah Cancer Institute in July 2017.
7. As Faculty for anatomy classes for the DMLT, CSSD,OT technician students.
8. As faculty trainer of the Hospital Based Cancer Registry staff of Chittaranjan National Cancer , Kolkata(4days) at BBCI in the month of March 2018.

Publications :

1. Katak AC, Sharma JD, Krishnatreya M, Baishya N, Barmon D, Deka P, Kalita M. A survival study of uterine cervical patients in the North East India: Hospital-cancer registry-based analysis. J of Can Res and Therapeutics 2017.
2. Katak AC, Sharma JD, Krishnatreya M, Baishya N, Kalita M. Patterns of tobacco use in patients with upper aero digestive tract cancers: A hospital-based study. J of Can Res and Therapeutics 2017.
3. Das RJ, Katak AC, Sharma JD, Baishya N, Kalita M, Krishnatreya M. A study of head and neck cancer patients with special reference to tobacco use and educational level. Clin Cancer Invest J 2017;6:21-5.
4. Das AK, Kakati K, Baishya N, Roy PS, Katak AC. Neoadjuvant chemotherapy in locally advanced cancers of oral cavity: A case report. Clin Cancer Invest J 2017; 6 : 116-18.

Dr Manigreeva Krishnatreya

Medical Officer, Cancer Registry and Epidemiology

1. Attended the Conclave of Health Minister of North Eastern States at Administrative Staff College, Guwahati on 29th May 2017.
2. Organized the 2nd Foundation Day of Cancer Research Foundation, India on 6th June 2017.
3. Attended CME on Oncology organized by the Indian Society of Oncology on 8th and 9th July 2017 at Dr.B Borooah Cancer Institute (BBCI).
4. Programme Coordinator for the two weeks summer training on Cancer Registry, Epidemiology, and Biostatistics held in August 2017.
5. Attended as one of the expert members from BBCI in the orientation meeting to start population-based universal screening of common cancers in five Districts of Assam, which was convened by the National Health Mission, Assam on 9th August 2017.
6. Attended the Implementation Science Workshop during the World NCD Congress organized by Global Alliance for Chronic Disease and National Cancer Institute, USA held at Chandigarh, India on 3rd and 4th November 2017. Presented a workshop deliberation on "Capacity Development of Health Workers for Oral Cancer Control" at World NCD Congress.
7. Organized a scientific session on "Arsenic and Risk of Cancer" at BBCI on 9th December 2017.
8. Met Hon'ble Governor of Assam Prof Jagdish Mukhi as member of the delegation of tobacco control activists on the 22nd December 2017.
9. Attended the 13th Association of Oncologists of North East India conference on the 9th and 10th February 2018 held at BBCI
10. Delivered guest lecture during technical meeting on "Potential effects of contaminated water on health-mitigation options" organized by Senior Engineers Forum-Guwahati at the Institution of Engineers, Guwahati on 20th February 2018.
11. Reviewer: Head & Neck, Cancer Medicine, Annals of Neurological Surgery, Journal of Advances in Oncology, and BOAJ Cancer Research & Therapy
12. Attends the monthly Oral Cancer screening at Rani CDC in rural Kamrup, Assam
13. Contributed 800 patient's follow-up data for Hospital-based Cancer Registry

Publications:

1. Matz M, Coleman MP, Sant M, Chirlaque MD, Visser O, Gore M, Allemani C; & the CONCORD Working Group*. The histology of ovarian cancer: worldwide distribution and implications for international survival comparisons (CONCORD-2). *Gynecol Oncol* 2017;144:405-13(SCI Impact Factor=4.959)
2. Das RJ, Katak AC, Sharma JD, Baishya N, Kalita M, Krishnatreya M. A study of head and neck cancer patients with special reference to tobacco use and educational level. *Clin Cancer Invest J* 2017;6:21-5 (SCI Impact Factor=Forthcoming)
3. Opinion Article: Krishnatreya M. Head and neck cancers: Common Indian cancer. *J Cancer Ther Sci* 2017;1:1-2
4. Bonaventure A, Harewood R, Stiller CA, [...] Coleman MP, Allemani C; CONCORD Working Group*. Worldwide comparison of survival from childhood leukaemia for 1995-2009, by subtype, age, and sex (CONCORD-2): a population-based study of individual data for 89 828 children from 198 registries in 53 countries. *Lancet Haematol* 2017;4:e202-e217(SCI Impact Factor=7.123)
5. Katak AC, Sharma JD, Krishnatreya M, Baishya N, Kalita M. Patterns of tobacco use in patients with upper aero-digestive tract cancers: A hospital-based study. *J Cancer Res Ther* 2018;14:437-440 (SCI Impact Factor=0.75)
6. Allemani C, Matsuda T, Di Carlo, [...] Weir HK, Coleman MP; CONCORD Working Group*. Global surveillance of trends in cancer survival 2000-14 (CONCORD-3): analysis of individual records for 37513725 patients diagnosed with one of 18 cancers from 322 population-based registries in 71 countries. *Lancet* 2018 Jan 30 [Ahead of print] (SCI Impact

Mr. Tarun Sonowal*Social Worker (Project- JDF)*

1. Successfully completed the Six Weeks Training in Pain and Palliative Care from 05th to 15th July 2017 at MNJ Institute of Oncology and Regional Cancer Center, Hyderabad, India.
2. Attended the 25th International Conference of Indian association of Palliative Care in AIIMS, Delhi from 23th to 25th February 2018.
3. Organized a Skill Development Training Program for the Patients and their relatives at BBCI from 16th May to 31st may 2017.

Dr Kabindra Bhagabati

Medical Officer, Palliative Medicine, BBCI

1. Completed Diploma in Palliative Medicine from Cardiff University, UK in the month of September, 2017.
2. Delivered a talk on Breaking Bad News in Nurses Training Program held on 24th June, '17
3. Delivered talks as resource person in Workshop on Palliative Care, jointly organized by Guwahati Pain & Palliative Care Society and BBCI on 19th & 20th February, 2018.
4. Attended 25th International Conference of Indian Association of Palliative Care in AIIMS, New Delhi from 23rd to 25th February, '18.
5. Working as Project Collaborator for the Project name "India Cancer Palliative Care Initiative". It is a Joint project of Jiv Daya Foundation, USA and BBCI.

Dr. Dipankar Dakua

Project Doctor, Pain & Palliative Medicine, BBCI

1. Organised a Rehabilitation Training Program for the Patients and their Relatives from 16th to 31st May, 2017, at BBCI.
2. Organised and participated as a spokesperson in the 'Nurses Training Program', at BBCI, on 24th June 2017.
3. Participated as a Delegate in the 2nd Indian Cancer Congress at Clark's Convention Centre, Bengaluru held from 9th to 12th November 2017.
4. Participated as a Delegate in the 13th Annual Conference of AONEI held at BBCI, on 9th and 10th February 2018.
5. Participated as a Speaker in the 'Workshop on Palliative Care', jointly organised by Guwahati Pain & Palliative Care Society and the Department of Palliative Medicine, BBCI on 19th & 20th February 2018.
6. Attended the "Become an EPEC (Education in Palliative and End of Life Care) Trainer" Workshop held at AIIMS, New Delhi, India on 21st and 22nd February 2018.
7. Participated as a Delegate in the 25th International Conference 'IAPCON 2018' in AIIMS, New Delhi, from 23rd to 25th February 2018.

Dr S M Bhagabaty

Medical Officer, Palliative Medicine, BBCI

1. Attended as a resource person State level workshop on tobacco control program in Higher Educational Institute, organized by State Tobacco Control Cell on 16th February 2018.
2. Attended as a resource person "Police officer orientation course organised by police academy at Kahilipara 4th Assam Battalion
3. Resource person in a state level workshop for tobacco control organized by consumer protection forum, assam in association with Delhi based NGO Voice on 2nd June 2017 at Panbazar Guwahati on 02/06/2017
4. Resource person in North East based Academic program for home care nursing organized by institute of child and mother welfare, ulubari on 29/007/2017
5. Resource person in BSC Nursing Training program on tobacco control and tobacco Cessation organized by District Tobacco Control Cell at Dispur Hospital, Guwahati on 29/08/2017
6. Departmental Internal faculty in BBCI Academia Classes on Cancer prevention and control and public health issues related to Cancer / programs for cancer control and tobacco control
7. Co-ordinated and guided observer ships under the department of preventive oncology

Designed, organized, co-ordinated (as Departmental Academia Co-ordinator) and took up training sessions for the below mentioned Training/ capacity development at BBCI under Preventive Oncology department.

1. DESH project team training : Total 15 numbers of recruited manpower including medical paramedical and supporting staff from 05/10/2017 to 14/11/2017. the training included theory and practical sessions throwing lights on basics of cancer, about the risk behaviors of cancer s and risk reduction. The training also included session on organizing and carrying out awareness and screeing camps of common cancers, community mobilization and increasing community participation, tobacco cessation, early diagnosis of common cancers using screeing tests and procedures, patient follow up, data entry, data management, patient counseling etc.
2. Staff training recruited under a Joint Assam Govt. Project with TATA Trust and Doctors for you NGO for detection of common cancers in Kamrup 7th Feb, 2018, 27th February 2018, 10th March, 2018.
3. Repeat cervical cancer screening hands on session for DESH medical and paramedical staff on 6th February 2018.
4. Training of the newly recruited medical staff under DESH project : ten days in the month of March on community oncology and early detection of common cancer.
5. Internship/block placement course for Medical Social Work : Four Batches of Interns, two batches from NERIM - North East Regional Institute of Management) and two batches from USTM (University of science and technology, Meghalaya) has successfully completed their internship during this period.

Dr. Chandana Kalita

Medical Officer

Blood Bank, Dr.B.Borooah Cancer Institute

1. Participated in the breast cancer update cum hands on workshop 2017 on 15th and 16th October 2017 at Dr. B. Borooah Cancer Institute : mci credit points -4
2. Participated in the 13th Annual Conference of Association of Oncologists of North East India at Dr. B. Borooah Cancer Institute on 9th and 10th February 2018 : theme Tobacco related cancer: mci accredited credit hours-2
3. Participated in the National Aids Control Organization/National Blood Transfusion Council Training program for Medical Officers at Regional Training Centre, Gauhati Medical College from 04-07-17 to 07-07-17.

Achievement:

1. Completed Post Graduate Diploma in Blood Banking Management offered by Global Institute of Health Science during April 2017 to March 2018 under MHRD, Gov. of India.

Dr. Debanjana Barman

Medical research Officer, PBCR- Guwahati

1. Attended XIII Annual Conference of Association of Oncologists of North East India on 9th and 10th February, 2018 organised by Dr. B. Borooah Cancer Institute
2. Organised All India Workshop on oncology software modules of NCDIR –NCRP on 2nd and 3rd March 2017 held at Dr B Borooah Cancer Institute, Guwahati.
3. Attended 32nd Annual Review Meeting (ARM) of NCDIR –NCRP and gave two oral presentations as faculty in 32nd Pre- Annual Review Meeting (ARM) workshop, held at Naga Hospital Authority, Kohima, Nagaland on 11th-12th Nov 2016.

Poster:

1. A poster entitled as “Burden of Tobacco Related Cancers in Kamrup Urban District” authored by Jagannath Dev Sharma, Anupam Sharma, Amal Chandra Katak, Debanjana Barman, Arpita Sharma, Manoj Kalita, was presented at XXXIII-ARM of NCDIR- NCRP from 28 - 30 November 2017, Amrita Institute of Medical Sciences, Kochi.

Publications:

1. Debanjana Barman, JD Sharma, Debabrata Barmon, AC Katak, Arpita Sharma, Manoj Kalita; Epidemiology of gynaecological cancers in Kamrup Urban District Cancer Registry. Indian Journal of Cancer 2017;54:388-91
2. Arpita Sharma, Jagannath Dev Sharma, Amal Chandra Katak, Debanjana Barman, R Lahon, B Roy Deka, C Misra, M Kalita Quality assessment and improvement of cancer registration system in Kamrup Urban District: A report. Indian Journal of Cancer | Volume XX | Issue XX | Month 2018
3. Jagannath Dev Sharma, AC Katak, Debanjana Barman, Arpita Sharma, Manoj Kalita. Cancer statistics in Kamrup Urban District: Incidence and Mortality in 2007-2011. Indian Journal of Cancer 2016
4. Jagannath Dev Sharma, Manoj Kalita*, Debanjana Barman, Arpita Sharma, Amal Chandra Katak, Ranjan Lahon, Jamil Ahmed Barbhuiya, Barsha Roy Deka. Pattern of Upper Aero-digestive Tract Group of cancers in Kamrup Urban District of Assam, A retrospective study. Asia Pacific Journal of Cancer Prevention 2014; 15 (17), 7267-7270.
5. Jagannath Dev Sharma, Debanjana Barman*, Mridul Kumar Sharma, Arpita Sharma, Manoj Kalita, Amal Chandra Katak, Jamil Ahmed barbhuiya, Ranjan Lahon (2014). Burden of Head and Neck cancers in kamrup Urban District Cancer Registry of Assam (India). International Journal of Medical Research 2014.

Arpita Sharma

Computer programmer, PBCAR-Guwahati

NCDIR, ICMR

Dr. B Borooah Cancer Institute, Ghy-16

Workshop participated/ poster /power point presentation:

1. Participated in All India Workshop on oncology software modules of NCDIR –NCRP on 2nd and 3rd March 2017 held at Dr B Borooah Cancer Institute, Guwahati.
2. Gave a power point presentation on Cancer Registry Data Management software application at Summer Training programmer of Epidemiology and Bio statistics conducted at Dr. B. Borooah Cancer Institute, Guwahati (July 2017).
3. A poster entitled as “Burden of Tobacco Related Cancer in Kamrup Urban District (2010-2014)- report from PBCR-Guwahati” authored by Jagannath Dev Sharma, Anupam Sarma, Amal Chandra Katak, Debanjana

Barman, Arpita Sharma was presented at XXXIII-ARM of NCDIR- NCRP from 28 - 30 November 2017 , Amrita Institute of Medical Sciences, Kochi.

Journal Publications:

1. Arpita Sharma, Jagannth Dev Sharma, Amal Chandra Katak, Debanjana Barman, Kalita M*. Quality assessment and improvement of cancer registration system in Kamrup Urban District: a report. Indian Journal of Cancer 2018 (Ahead of print)
2. Barman D , Sharma JD, Barmon D , Katak AC , Sharma A , Kalita M*. Epidemiology of gynecological cancers in Kamrup Urban District Cancer Registry. . Indian Journal of Cancer 2017;54:388-91
3. Sharma JD, Katak AC, Barman D, Sharma A, Kalita M*. Cancer statistics in Kamrup Urban District: Incidence and Mortality in 2007-2011. Indian Journal of Cancer 2016.

Manoj Kalita

Statistician, Population Based Cancer Registry-Guwahati National Cancer Registry programme NCDIR, ICMR

Workshop/Training/Seminar Participated:

1. Attended Summer school on Cancer Survival Methods for Cancer Registries (19-23 June 2017) organized by International Agency for Research on Cancer (World Health Organization) at Lyon, France.
2. Attended the Annual Review Meeting (ARM) of Cancer Registry organized by National Cancer Registry Programme (NCRP) of ICMR on 9th Nov to 12th Nov, 2016 at Kohima, Nagaland.
3. Participated in a three day conference organized by International Association on Cancer Registries at Mumbai (8th – 10th Oct, 2015).
4. Participated in a one day workshop on Can Reg5 software organised by International Association on Cancer Registries at Tata Memorial Hospital, Mumbai. (7th October, 2015).
5. Certification course on Advance Statistics organised by Division of Biostatistics, National Institute of Epidemiology (ICMR), Chennai (1st – 5th Dec, 2014).
6. Participated in a Three day Regional workshop for North East Cancer Registries organised by National cancer registry programme (ICMR) and Dr. B. Borooah Cancer Institute, Guwahati (30th Oct – 1st November, 2014).

Abstract /Poster:

1. A poster entitled as “BRAIN AND NERVOUS SYSTEM CANCER DIAGNOSED IN THE KAMRUP URBAN DISTRICT IN 2008–2012” authored by Manoj Kalita, Jagannath Dev Sharma, Amal Chandra Katak was presented at International Association of Cancer Registries (IACR - 2015) conference, Mumbai, India.
2. A poster entitled as “Cancer: Scenario and Pattern among Northeastern states of India with Special Reference to Kamrup Urban District” authored by Manoj Kalita, Jagannath Dev Sharma, Amal Chandra Katak was presented at XXXIII-ARM of NCDIR- NCRP from 28 - 30 November 2017 , Amrita Institute of Medical Sciences, Kochi.

Journal Publications :

First/Corresponding Author -

1. Sharma JD, Katak AC, Kalita M*. Years of potential life lost as due to cancer in Kamrup Urban District of Northeast India, 2010-2014. Indian Journal of Medical Research, 2017.
2. Sharma JD, Katak AC, Barman D, Sharma A, Kalita M*. Cancer statistics in Kamrup Urban District: Incidence and Mortality in 2007-2011. Indian Journal of Cancer 2016.
3. Barman D , Sharma JD, Barmon D , Katak AC , Sharma A , Kalita M*. Epidemiology of gynecological cancers in Kamrup Urban District Cancer Registry. . Indian Journal of Cancer 2017;54:388-91
4. Jagannath Dev Sharma, Manoj Kalita*, Tulika Nirmolia, Sidhartha Protim Saikia, Arpita Sharma, Debanjana Barman (2014). Cancer: Scenario and Relationship of Different Geographical Areas of the Globe with special Reference to North East India. Asia Pacific Journal of Cancer Prevention 2014; 15(8), 3721-9.
5. Jagannath Dev Sharma, Manoj Kalita*, Jamil Ahmed Barbhuiya, Ranjan Lahon, Arpita Sharma, Debanjana Barman, Amal Chandra katak, Barsha Deka (Roy). Descriptive report on pattern of variation in cancer cases within selected ethnic groups in Kamrup Urban District of Assam, 2009-2011. Asia Pacific Journal of Cancer Prevention 2014; 15(15), 6381-6.
6. Jagannath Dev Sharma, Manoj Kalita*, Debanjana Barman, Arpita Sharma, Amal Chandra Katak, Ranjan Lahon, Jamil Ahmed Barbhuiya, Barsha Roy Deka. Pattern of Upper Aero-digestive Tract Group of cancers in Kamrup Urban District of Assam, A retrospective study. Asia Pacific Journal of Cancer Prevention 2014; 15 (17), 7267-7270.

7. Manoj kalita*, Tulika Nirmolia. Denominators: An Attempt to adjust for Cancer Incidence and Mortality Rates and its role in Cancer Registries. South Asian Journal of cancer 2014. Journal of Medicine and Public Health 2015; 5(4), 353-6.
- Co Author:**
8. Tapan Dey, Kabita Gogoi, Bala Gopalan Unni*, Munmi Kalita, Moonmee Bharadwaz, Minakshi Bhattacharjee, Pranab Kumar Boruah, Thanewar Bora, Dibyajyoti Ozah, Manoj Kalita . Role of Glutathione S Transferase Polymorphism in COPD with Special Reference to Peoples Living in the Vicinity of the Open Cast Coal Mine of Assam. PLoS One. 2014;9(5)
9. Manigreeva Krishnatreya*, Jagannath Dev Sharma, Amal Chandra Katak, Manoj Kalita. Survival in carcinoma of unknown primary to neck nodes treated with neck dissection and radiotherapy. Annals of Medical and Health Sciences research 2014; 4(2), 165-166.
10. Manigreeva Krishnatreya*, Amal Chandra Katak, Jagannath Dev Sharma, Bibhuti Bhusan Borthakur, Manoj Kalita. Epidemiology of primary cell carcinoma of the oesophagus: A retrospective study. South Asian Journal of cancer, 2014.
11. Jagannath Dev Sharma, Debanjana Barman*, Mridul Kumar Sharma, Arpita Shrama, Manoj Kalita, Amal Chandra Katak, Jamil Ahmed barbhuiya, Ranjan Lahon (2014). Burden of Head and Neck cancers in kamrup Urban District Cancer Registry of Assam (India). International Journal of Medical Research 2014.
12. Tapan Dey, Kabita Gogoi, Bala Gopalan Unni*, Moonmee Bharadwaz, Munmi Kalita, , Dibyajyoti Ozah, Manoj Kalita, Jatin Kalita, Pranab Kumar Boruah, Thanewar Bora. Role of environmental pollutants in liver physiology: special references to peoples living in the oil drilling sites. PLoS One. 2015; 10(4).
13. SM Bhagabaty, AC Katak, M Kalita, S Salkar. Community based intervention for tobacco cessation : a pilot study experience, north East India. Asian Pacific Journal of Cancer Prevention 2015; 16(2), 811-4.
14. Tapan Dey, Prachurjya Dutta, Jatin Kalita, Hari Prasanna Deka Boruah, Manoj Kalita and Balagopalan Unni .Glutathione S-transferase gene polymorphism and lung cancer in Indian population: a meta-analysis of case-control studies. CURRENT SCIENCE 2015; VOL. 109.
15. Srabana Misra Bhagabaty, Amal Chandra Katak, Manoj Kalita, Shekhar Salkar. Quitting: In male versus female users of different types of tobacco at 8 months postintervention in a community setting. International Journal of Cancer Research and Therapeutics 2016.
16. Amal Chandra Katak, Jagannath Dev Sharma, Manigreeva Krishnatreya , Nizara Baishya , Debabrata Barmon , Pankaj Deka , Manoj Kalita. A survival study of uterine cervical patients in the North East India: Hospital-cancer registry-based analysis. Journal of Cancer Research and Therapeutics 2016.
17. Katak AC, Sharma JD, Krishnatreya M, Baishya N, Kalita M. Patterns of tobacco use in patients with upper aero-digestive tract cancers: A hospital-based study. Journal of Cancer Research and Therapeutics, 2016.

Dr. Bhubaneswar Borooh Cancer Institute

Patient's During : April 2017 to March 2018

Tabular Presentation of Monthly Hospital Statistical Report

Patients	Male	Female	Total
New Patients registered	6136	4846	10982
Total Number of OPD consultation			79151
Total numbers of old cases visit			68169
Patients Admitted Indoor			8855
Total number of Free Patients			1100
Number of patients availed Free Chemotherapy Scheme of Government of Assam at BBCI			627

Year wise statistics : Patients Turn Over (2017-18)

Year	New Patients Registratoin	No. of OPD Consultation	No. of Indoor Patients	No. of Hospital Deaths	Radiotherapy to new Cases	Radiotherapy Workload of Patients /FY	Total No. of Chemotherapy	No. of Major Surgeries
2001-02	5404	32694	1321	55	2313	—	-	309
2002-03	5714	27594	1320	56	1945	-	-	336
2003-04	6071	29366	1356	54	1117	-	-	393
2004-05	6246	33561	1655	91	2422	-	-	326
2005-06	6596	38471	1665	79	2012	-	-	414
2006-07	6757	36366	1925	111	2167	-	-	446
2007-08	7315	39062	1895	91	2068	-	-	522
2008-09	8141	45942	2882	112	2635	-	-	611
2009-10	8229	47086	2823	92	2830	-	-	667
2010-11	8433	50400	2786	100	3400	-	-	752
2011-12	8708	54081	3185	129	3344	-	-	769
2012-13	9080	56746	3526	136	3311	-	-	865
2013-14	9848	55236	4213	150	3444	-	-	933
2014-15	10,566	82825	4279	356	3253	73021	13990	974
2015-16	10,852	85448	4855	321	3847	75103	14406	999
2016-17	11864	89321	5234	345	4009	77003	15204	1171
2017-18	10,982	79151	5855	403	3594	70230	15028	1224

Table 1 : Total Registered Patients.

State	2014-2015	2015-2016	2016-2017	2017-2018
Assam	9729	9912	10886	9864
Arunachal Pradesh	179	223	217	234
Meghalaya	217	254	238	230
Nagaland	142	129	167	177
Manipur	177	201	221	295
Mizoram	29	39	34	38
Tripura	12	23	29	49
Sikkim	1	2	3	5
Other States	50	74	65	84
Outside India	-	6	4	7
Total	9848	10566	11864	10982

Table 2 : Total Cancer Patients

State	2014-2015	2015-2016	2016-2017	2017-2018
Assam	8975	9403	9900	Scientific data collection is ongoing at HBCR
Arunachal Pradesh	160	217	205	
Meghalaya	198	240	221	
Nagaland	129	123	159	
Manipur	147	183	205	
Mizoram	28	39	36	
Tripura	12	23	21	
Sikkim	1	2	2	
Other States	75	16	67	
Total	9725	10246	10816	

Table 3 : District wise break-up of patients of Assam for the following period of 2013-14 to 2017-18.

District	2013-14	2014-15	2015-16	2016-17	2017-18
1. Kokrajhar	134	176	162	203	215
2. Dhubri	442	525	534	570	516
3. Goalpara	334	362	388	387	380
4. Barpetra	646	759	761	822	762
5. Morigaon	363	388	402	444	325
6. Nagaon	1002	1030	1036	1088	695
7. Sonitpur	643	633	597	598	509
8. Lakhimpur	259	276	288	365	339
9. Dhemaji	90	83	87	91	146
10. Tinsukia	155	138	131	161	189
11. Dibrugarh	159	150	174	224	195
12. Sivsagar	205	227	210	266	20
13. Jorhat	337	424	402	447	395
14. Golaghat	273	339	317	381	352
15. Karbi Anglong	131	144	146	179	162
16. Dima Hasao	17	15	12	21	27
17. Cachar	47	51	50	68	74
18. Karimganj	29	32	63	51	51
19. Hailakandi	15	19	29	24	25
20. Bongaigaon	281	324	322	366	326
21. Chirna	117	100	107	138	163
22. Kamrup (Rural & Metro)	1988	2046	2119	2118	1775
23. Nalbari	423	479	501	521	358
24. Baksa	312	324	292	353	344
25. Darrang	440	465	531	585	440
26. Udalguri	271	213	240	295	236
27. NC Hill	4	7	6	5	0
28. Charaideo	-	-	-	22	51
29. South Salmara	-	-	-	1	48
30. Hojai	-	-	-	92	281
31. Biswanath Chariali	-	-	-	-	163

Tabular Presentation of Monthly Hospital Statistical Report.

Month Wise Break-up of New Cases :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Male	505	629	545	561	531	457	573	475	436	446	422	556	6136
Female	395	501	434	435	417	344	415	401	342	359	372	431	4846

Month Wise Break-up of OPD visits :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Numbers	8228	6121	6244	6147	1106	3956	5963	6208	5235	4793	9128	5040	68169

Month Wise Break-up of New Private OPD patients :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Numbers	–	–	–	–	–	–	–	–	91	93	86	149	419

Department Wise Break-up of New Cases:

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Surgical Oncology	381	490	445	443	453	358	448	404	320	366	344	450	4902
Head & Neck	300	398	339	331	298	276	334	288	265	243	256	336	3664
GOPD	85	98	81	72	68	68	71	64	62	77	74	80	900
RT	18	17	23	17	19	5	–	–	–	–	–	–	99
MOPD	113	124	89	127	107	90	121	101	104	110	102	113	1301
Pain & Palliative	3	3	2	5	3	1	1	3	2	2	5	1	31
Nuclear Medicine	0	0	0	1	0	3	4	5	4	0	1	2	20

Month Wise Indoor Admission :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Radiotherapy	123	117	162	152	135	110	155	135	125	140	111	157	1622
Chemotherapy	77	101	116	133	126	128	143	149	137	135	140	143	1528
Surgery	191	231	213	207	221	182	253	230	215	226	203	251	2623
Deluxe PC	29	29	31	28	25	23	34	26	31	30	40	38	364
Pain & Palliative	87	103	113	91	120	48	124	111	105	107	78	115	1202
Emergency ICU admission	102	134	133	120	130	129	123	125	135	125	114	146	1516

Month Wise Chemotherapy :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Day Care	1399	1570	1459	1267	1403	1231	1316	1360	1524	1212	1264	1289	15028

Month Wise Death :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Radiotherapy	7	12	20	13	10	13	11	18	15	13	10	10	152
Surgery	3	3	4	2	8	5	6	5	2	6	1	4	49
Deluxe PC	4	1	0	1	1	0	0	1	2	1	1	3	15
ICU	11	17	17	16	12	13	17	8	20	12	13	28	184
Chemotherapy	0	0	0	0	0	0	0	0	0	1	1	1	3

Total Blood Collection & Transfusion at BBCI Blood Bank :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Collection	178	238	117	44	319	275	315	264	268	230	255	311	2914
Whole Blood	167	220	197	49	164	164	150	136	204	162	239	214	2066
PCV	0	0	0	25	38	48	118	138	64	68	0	45	544
Platelets	0	0	0	0	2	0	9	40	20	0	0	0	71
FFP	0	0	0	0	0	6	4	138	64	68	0	8	288
Serology	178	238	117	44	319	275	315	264	268	230	255	311	2814
Grouping	342	459	295	116	522	446	442	387	411	432	451	556	4859

Total Patients in Pathology :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Histopathology	694	843	782	754	798	735	770	772	731	750	694	840	9163
Cytology	167	225	197	180	226	193	173	201	166	177	214	184	2303
Frozen Section	39	33	33	15	21	23	28	39	20	20	25	39	335

Immuno - Histochemistry :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Case	71	90	92	88	95	85	111	96	791	81	82	84	1066
Marker	210	307	302	302	327	325	362	335	351	262	253	286	3625

Total Patients in Bio-Chemistry :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Total Tests	9674	11127	9458	10941	10918	9048	10971	11528	10691	10954	9578	11706	226594
Number of Samples	2797	3226	2799	3051	3283	2821	3312	3250	3153	3243	2899	3414	37248

Tumour Marker Tests :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Total Tests	854	916	802	977	901	780	899	884	856	949	884	1014	10716
Number of Samples	593	618	533	663	627	547	658	645	620	653	618	702	7477

Total number of Hematology Cases :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Routine Blood	2801	3284	2821	3064	3320	2886	3244	3353	3210	3235	2943	3353	37518
Flow cytometry	–	–	–	–	–	–	–	–	–	–	–	1	1
Bone Marrow	8	11	6	10	13	19	12	18	16	18	16	17	164

Total Patients in Radiological Investigation Done :**1. Month wise CT Scan :**

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
CT Scan	800	1013	830	865	832	747	981	801	713	845	726	842	9194
CT Simulation	34	22	34	25	42	46	46	44	35	43	58	104	487
CT guided FNAC	7	6	4	2	6	9	3	3	7	8	5	4	54

2. Month wise USG :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Morning	205	203	183	139	164	154	223	178	252	198	190	250	2339
Evening	448	566	422	289	463	395	437	228	329	477	513	443	5010
Guided FNAC	20	21	22	16	43	26	16	21	19	18	29	14	265

3. Month wise MMG :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Number of MMG	20	28	05	15	21	20	27	21	13	37	29	41	227

4. Month wise X-ray :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Number of X-ray	703	699	632	621	646	585	711	732	578	824	754	710	8195

5. Month wise Nuclear Medicine Workload :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Bone Scan	39	23	50	47	60	29	75	70	43	60	56	63	615
Penal Scan	7	6	4	6	7	2	1	7	14	10	5	6	86
Parathyroid Scan	0	0	0	0	0	0	0	1	0	1	0	0	2
Thyroid Scan	1	2	5	5	4	6	10	8	8	4	4	5	62
Whole Body Scan	4	2	3	5	3	2	6	11	11	7	4	12	70
MIBG Scan	0	0	0	0	0	0	0	0	1	0	0	0	1
HIDA Scan	0	0	0	0	0	0	0	0	2	0	1	1	4

6. Month wise MRI :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Number of MRI	24	113	89	101	115	76	110	111	75	103	103	100	1120

Total ECG Done :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Number of ECG	293	267	303	275	336	302	367	352	340	334	300	378	3847

Total Patients in Endoscopic Clinic :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
UGI Endoscopy	379	0	305	454	307	45	412	152	5	138	376	432	3005
Colonoscopy	15	24	15	11	19	23	17	23	26	25	18	25	241
Biopsy	130	124	145	170	169	130	166	110	87	95	128	185	1639
Bronchoscopes	6	11	2	5	12	9	8	6	5	18	4	3	89
Nasal Endoscopy	6	3	4	6	10	13	18	9	6	11	14	13	113
Direct Laryngoscopy	12	75	47	27	30	137	23	79	122	53	29	24	658

Total Patients in Pain & Palliative Clinic :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
New Consultation	277	314	316	335	374	245	320	298	273	268	217	307	3544
Old Consultation	750	864	691	766	880	783	910	895	824	760	596	866	9585

Department of Radiation Oncology

1. Total workload of patients/month wise.

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Linac-B	1173	1366	1107	1353	1285	1294	1369	1375	1154	977	1202	1246	14901
Linac-C	1219	1436	1110	1322	1351	1034	1241	1314	1113	1323	1244	1240	14947
Phoenix	1541	1920	1687	1647	1807	1637	1660	1849	1618	1721	1432	1456	19975
Bhabatron-II	1436	1802	1621	1646	1835	1659	1755	1860	1703	1465	1449	1556	19787
Brachytherapy	31	113	68	100	76	44	71	73	19	0	0	25	620

2. Total new patients included / month wise.

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Linac-B	64	80	60	64	73	61	74	85	62	47	58	69	797
Linac-C	60	41	46	65	65	40	58	57	63	50	58	47	650
Phoenix	73	83	84	72	80	66	99	82	79	63	64	77	922
Bhabatron-II	91	98	84	107	64	81	81	89	77	69	84	69	994
Brachytherapy	18	35	28	34	24	13	30	29	3	0	0	17	231

Total Surgical Patients :

1. Major Cases :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Head & Neck	42	47	42	41	48	35	44	48	52	49	40	54	543
Gen. Surgery	41	42	35	47	41	48	41	51	54	45	49	51	545
Gynecology	14	8	18	8	12	8	12	11	9	16	11	9	136

2. Major Cases :

Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	TOTAL
Head & Neck	56	56	57	51	62	62	68	68	54	52	53	82	721
Gen. Surgery	5	7	16	9	9	7	10	7	15	6	8	17	116
Gynecology	19	25	22	16	24	16	20	15	16	19	16	24	232

Total Operations Performed :

Department	Major	Minor	Total
General Surgery	545	116	661
Head & Neck Surgery	543	721	1264
Gynecology Surgery	136	232	368

Dietetics Department :

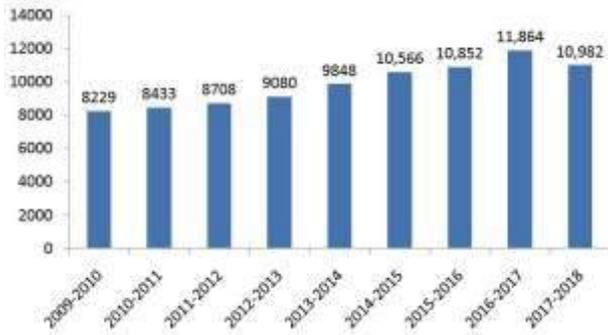
Month	Inpatient	OPD
w.e.f. 9th March	70	79
April	35	49



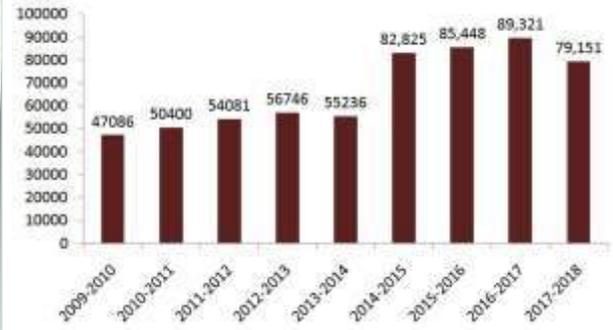
Recreational Programme for Patients

Trends of Basic Hospital Statistics (2008 - 2017)

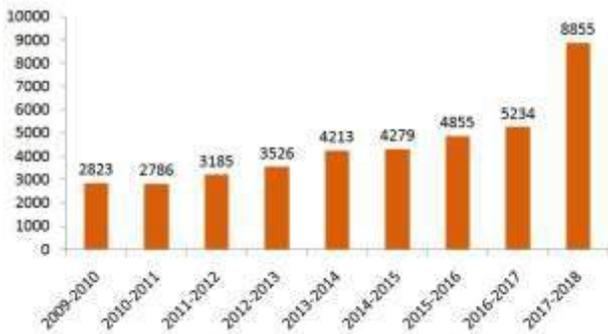
New Patient Registration



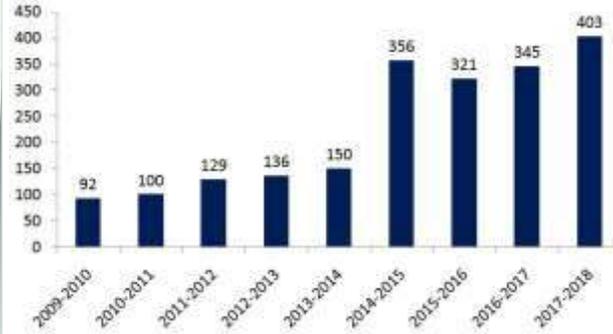
OPD Consultation



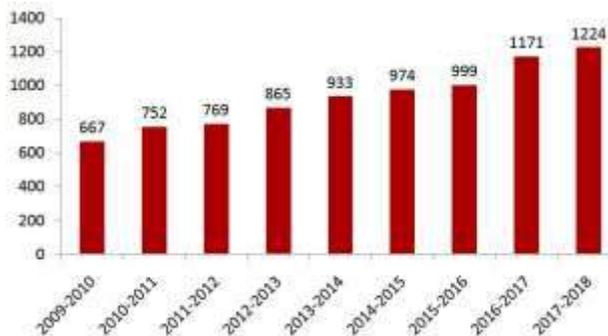
Indoor Patients



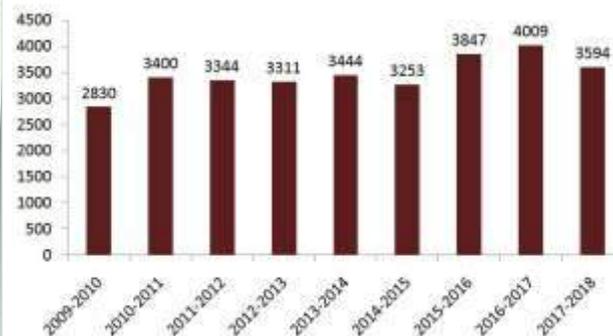
Hospital Deaths



Major Surgeries

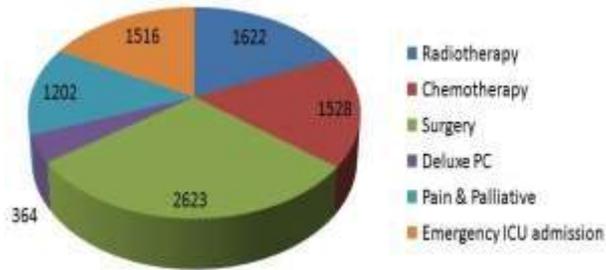


Radiotherapy to New Cases

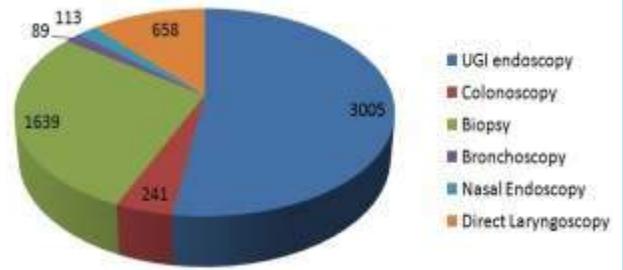


Pie diagrams of Hospital Statistics (2008 - 2017)

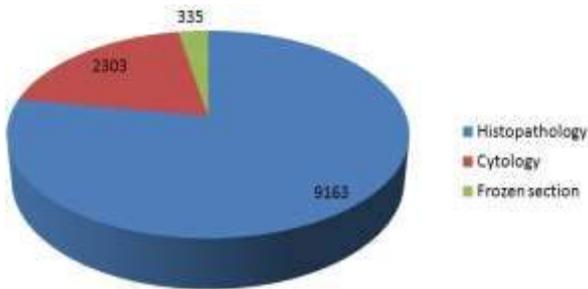
Admission Workload



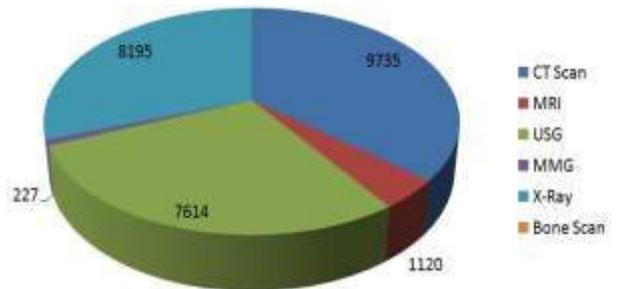
Endoscopy Workload



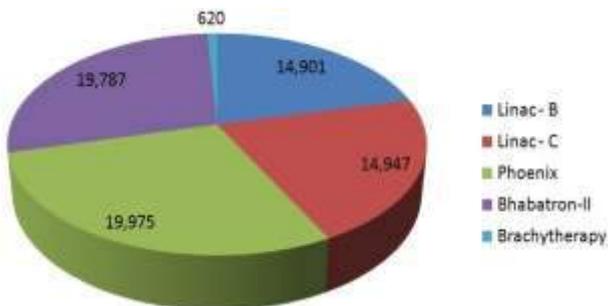
Pathology Workload



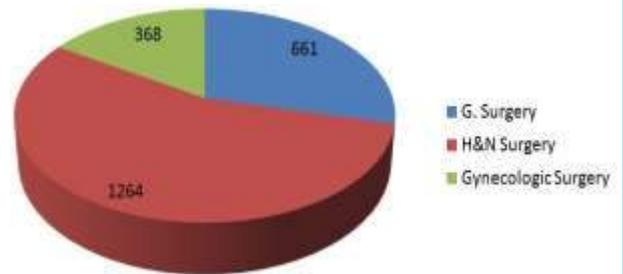
Radiology Workload



Radiotherapy Workload



Surgical Workload



New Cancer Cases Registered at Hospital Based Cancer Registry During the Period: January to December 2016 Scientific Data Collection

SITES	MALE	%	FEMALE	%	TOTAL	%
C00(Lip)	56	0.9	21	0.5	77	0.7
C01-C02(Tongue)	405	6.5	85	1.8	490	4.5
C03-C06(Mouth)	450	7.2	228	5.0	678	6.3
C07-C08(Salivary Gland)	25	0.4	11	0.2	36	0.3
C09(Tonsil)	194	3.1	47	1.0	241	2.2
C10 (Oropharynx)	96	1.5	23	0.5	119	1.1
C11(Nasopharynx)	48	0.8	20	0.4	68	0.6
C12-C13(Hypopharynx)	855	13.8	119	2.6	974	9.0
C14(Pharynx)	3	0.0	0	0.0	3	0.0
C15(Esophagus)	842	13.6	421	9.1	1263	11.7
C16(Stomach)	349	5.6	180	3.9	529	4.9
C17(Small Intestine)	12	0.2	16	0.3	28	0.3
C18(Colon)	145	2.3	55	1.2	200	1.8
C19-C20(Rectum)	169	2.7	91	2.0	260	2.4
C21(Anus & Anal Canal)	30	0.5	18	0.4	48	0.4
C22(Liver)	171	2.8	114	2.5	285	2.6
C23-C24 (Gallbladder etc.)	299	4.8	603	13.1	902	8.3
C25 (Pancreas)	69	1.1	37	0.8	106	1.0
C30-C31 (Nose, Sinuses etc.)	23	0.4	6	0.1	29	0.3
C32 (Larynx)	211	3.4	35	0.8	246	2.3
C33-C34(Lung etc)	468	7.5	164	3.6	632	5.8
C37-C38(Other Thoracic Organs)	24	0.4	8	0.2	32	0.3
C40-C41(Bone)	46	0.7	32	0.7	78	0.7
C43(Malignant Melanoma)	15	0.2	11	0.2	26	0.2
C44(Skin)	71	1.1	64	1.4	135	1.2
C45(Mesothelioma)	2	0.0	0	0.0	2	0.0
C47+C49(Conn. & Soft Tissue)	80	1.3	46	1.0	126	1.2
C50(Breast)	19	0.3	695	15.1	714	6.6
C51(Vulva)	0	0.0	14	0.3	14	0.1
C52(Vagina)	0	0.0	20	0.4	20	0.2
C53(Cervix Uteri)	0	0.0	557	12.1	557	5.1
C54(Corpus Uteri)	0	0.0	62	1.3	62	0.6
C55(Uterus Uns.)	0	0.0	13	0.3	13	0.1
C56(Ovary etc.)	0	0.0	286	6.2	286	2.6
C58(Placenta)	0	0.0	2	0.0	2	0.0
C60(Penis)	35	0.6	0	0.0	35	0.3
C61(Prostate)	79	1.3	0	0.0	79	0.7
C62(Testis)	44	0.7	0	0.0	44	0.4
C63(Other Male Genital)	1	0.0	0	0.0	1	0.0
C64(Kidney)	56	0.9	22	0.5	78	0.7
C66(Ureter)	2	0.0	0	0.0	2	0.0
C67(Urinary Bladder)	45	0.7	8	0.2	53	0.5
C69(Eye)	19	0.3	8	0.2	27	0.2
C70-C72(Brain, Nervous System)	86	1.4	59	1.3	145	1.3
C73(Thyroid)	56	0.9	140	3.0	196	1.8
C74(AdrenaGland)	9	0.1	1	0.0	10	0.1
C81(Hodkins Disease)	24	0.4	14	0.3	38	0.4
C82-C85(NHL)	160	2.6	53	1.2	213	2.0
C90(Multiple Myeloma)	37	0.6	13	0.3	50	0.5
C91(Lymphoid Leuk)	31	0.5	15	0.3	46	0.4
C92-C94(Myloid Leukaemia)	29	0.5	20	0.4	49	0.5
C95(Leukaemia Uns)	15	0.2	8	0.2	23	0.2
C77-C80 (Unknown Primary)	309	5.0	137	3.0	446	4.1
Total	6214	100.0	4602	100.0	10816	100.0

Dr B Borooah Cancer Institute, Guwahati

Distribution of various Cancers by site in Male and Female (Year 2017-18)

Male		Female	
Hypopharynx	: 855 (13.8%)	Breast	: 694 (15.1%)
Oesophagus	: 842 (13.6%)	Gallbladder	: 603 (13.1%)
Lung etc.	: 468 (7.5%)	Uterine cervix	: 557 (12.1%)
Mouth	: 450 (7.2%)	Oesophagus	: 421 (9.1%)
Tongue	: 405 (6.5%)	Ovary etc.	: 286 (6.2%)
Stomach	: 349 (5.6%)	Mouth	: 228 (5.0%)
Gallbladder etc.	: 299 (4.8%)	Stomach	: 180 (3.9%)
Liver	: 171 (2.8%)	Lung etc.	: 164 (3.6%)
Larynx	: 211 (3.4%)	Thyroid	: 140 (3.0%)
Tonsil	: 194 (3.1%)	Hypopharynx	: 119 (2.6%)



Hospital Based Cancer Registry-Guwahati (NCRP-ICMR) Dr. B Borooah Cancer Institute, Guwahati

Principal investigator :
Dr. J D Sharma, MD
HoD, Dept. of Pathology
BBCI, Guwahati

Director :
Dr. A C Katak, MD (Hons)
Dr. B. Borooah Cancer Institute
Guwahati

OBJECTIVES:

GENERAL:

1. Assess Patient Care
2. Participate in Clinical Research to Evaluate Therapy
3. Provide an idea of the patterns of cancer in the area
4. Help plan hospital facilities

SPECIFIC:

1. Contribute to active follow-up of the cancer patient.
2. Describe length and quality of survival in relation to anatomical site, clinical stage and aspects of various types of treatment.
3. Contribute to the Population Based Cancer Registries (PBCRs) in the given area
4. Undertake epidemiological research through short-term case control studies.
5. Show time trends in proportion of early to late stages at the time of diagnosis

Hospital Based Cancer Registry (NCRP-ICMR) had started functioning at Dr. B. Borooah Cancer Institute from 1st October'2010. The Hospital Based Cancer Registry at Dr. B. Borooah Cancer Institute is collecting demographic and clinical data including patient follow-up data of all cancer patients registered at Dr. B Borooah Cancer Institute from 1st January, 2010.

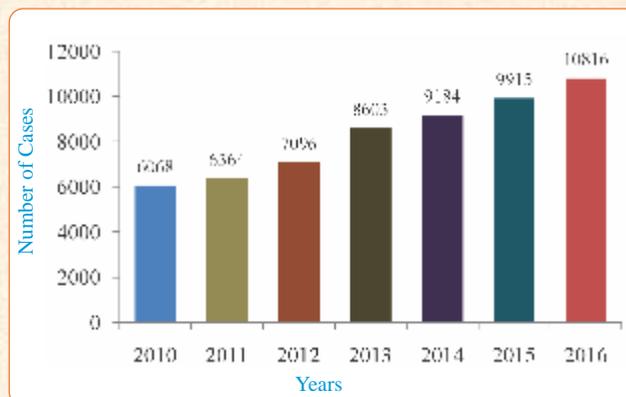
Data of the period from *January, 2010 to December, 2016* has been submitted to the National Centre for Disease Informatics and Research (NCDIR) - Indian Council of Medical Research. Data of 58,046 cancer patient's

demographic and clinical information has been submitted to NCDIR so far. Follow up of the treated patients at RI is done by both clinical, telephonic and hospital records to know the vital status of the patients.

Staff of HBCR :

1. Dr Nizara Baishya - *Research Scientist -1 (Medical)*
2. Mr. Chandi Ram Kalita - *Statistician*
3. Mr. Nazmul Hoque - *Social Worker*
4. Ms. Gayatri Gogoi - *Social Worker*
5. Mrs. Binita Das - *Social Worker*
6. Ms. Tapti Kumari - *Social Worker*
7. Mr. Bhriugu Mishra - *Data Entry Operator*

Number of cancer cases registered in HBCR at BBCI in different years



Dr B Borooah Cancer Institute, Guwahati

Top Ten Leading Sites in Male and Female (2016)

Male	#	%	Female	#	%
Hypopharynx	855	13.8	Breast	695	15.1
Oesophagus	842	13.6	Gallbladder	603	13.1
Lung etc	468	7.5	Cervix Uteri	557	12.1
Mouth	450	7.2	Oesophagus	421	9.1
Tongue	405	6.5	Ovary etc.	286	6.2
Stomach	349	5.6	Mouth	228	5.0
Gallbladder etc.	299	4.8	Stomach	180	3.9
Larynx	211	3.4	Lung etc.	164	3.6
Tonsil	194	3.1	Thyroid	140	3.0
Liver	171	2.8	Hypopharynx	119	2.6

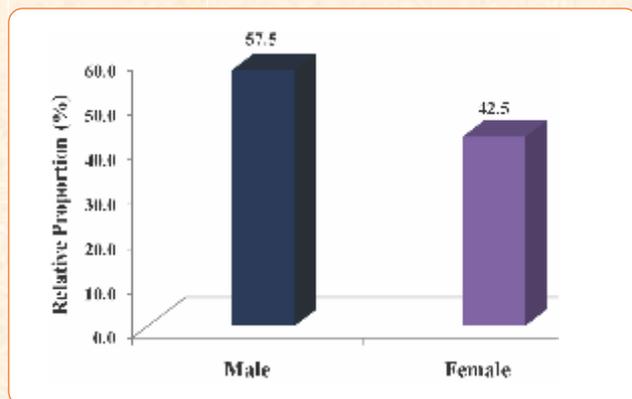
1. Gender group distribution of cases.

A total of 10816 patients were registered in Hospital Based Cancer Registry at Dr. B. Borooah Cancer Institute, Guwahati in the year 2016. Out of which 6214 registered patients were male and 4602 were female. The details of the data are shown in Table 1.1 & Fig.1.1 below:

Table 1.1: Gender wise Relative proportion of cases

Gender	2016	
	Frequency	RP (%)
Male	6214	57.5
Female	4602	42.5
Total	10816	100.0

Fig 1.1: Gender wise distribution of cases.

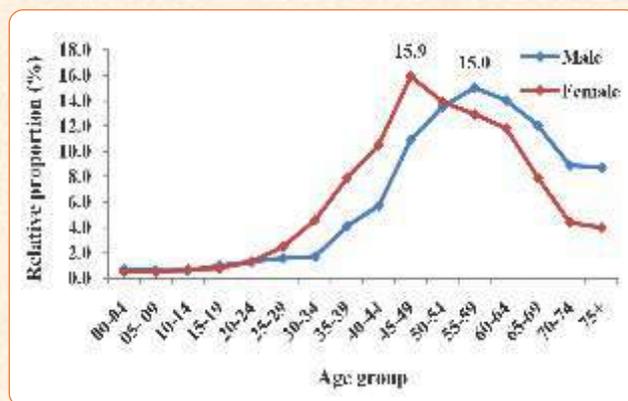


2. Age group distribution of cases.

2.1 Distribution of Cancer Cases by 5 year Age Groups

In the year 2016, the relative proportion of Male was high in the age-group 55-59 and in female it was high in the age group 45-49. The details of the age groups are shown in Fig. 2.1.

Fig 2.1: Relative Proportion of cases by Five Year Age Group (2016)



3. Leading sites of cancer

The number and relative proportion of the ten leading sites of cancer according to ICD-10 in males and females in the year 2016 are 3.2 and represented in Fig. 3.1 and 3.2 respectively. In the year 2016, the site Hypopharynx occupied the highest place among the male cases (13.8%) whereas in female group, Breast was the highest leading site which constituted 15.1% of the total female patients.

Fig. 3.1: Ten Leading Sites of Cancer-Males, 2016

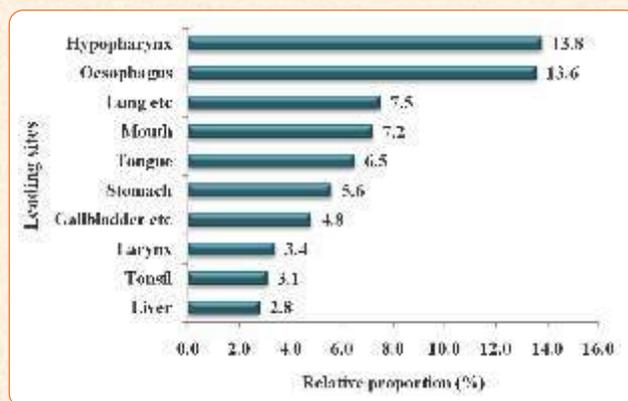
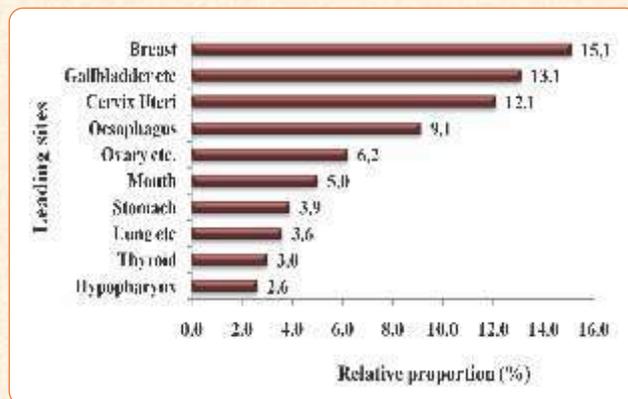


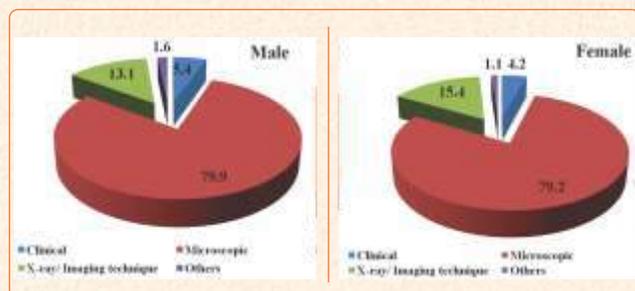
Fig 3.2: Ten Leading Sites of Cancer-Females, 2016



4. Basis of Diagnosis.

The basis of diagnosis for male and female of all cancer cases registered at Dr. BBCI in the year 2016 are shown in Fig. 4.1.

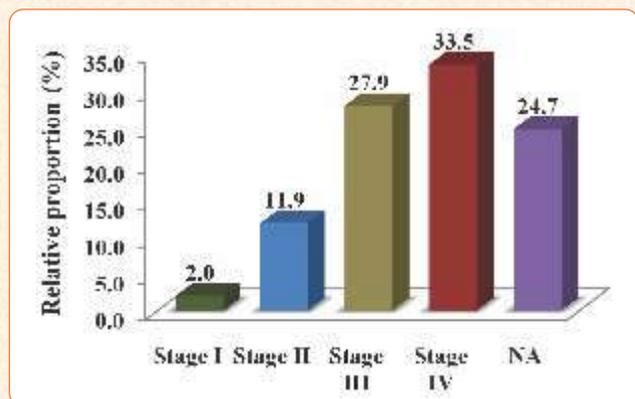
Fig.4.1: Pie Diagram Showing Proportion (%) of Patients according to Method of Diagnosis (2016).



5. Stages at Diagnosis.

The overall stages of all cancer patients registered under HBCR in the year 2016 are described in the following Fig. 5.1. Among all the cancer patients registered under HBCR in the year 2016, we have 75.3 % information regarding stage at diagnosis. Out of which most of them presented in Stage-IV (33.5%) followed by Stage-III (27.9%), Stage-II (11.9%) and Stage-I (2.0%).

Fig 5.1: Stage wise distribution of cases in the year 2016



6. Treatment Group:

Table 6.1: Number (#) and Relative Proportion (%) of Cancer Patients according to Broad Groups of Treatment at Reporting Institution (2016)

Treatment Group	Male		Female		Total	
	#	%	#	%	#	%
Prior Tmt. Only	520	8.4	504	11.0	1024	9.5
Prior & Tmt. at RI	546	8.8	586	12.7	1132	10.5
Tmt. only at RI	2141	34.5	1293	28.1	3434	31.7
No CDT.	3007	48.4	2219	48.2	5226	48.3
Total	6214	100.0	4602	100.0	10816	100.0

Fig 6.1: Stack (100%) diagram showing Relative Proportion (%) of Patients according to treatment status.

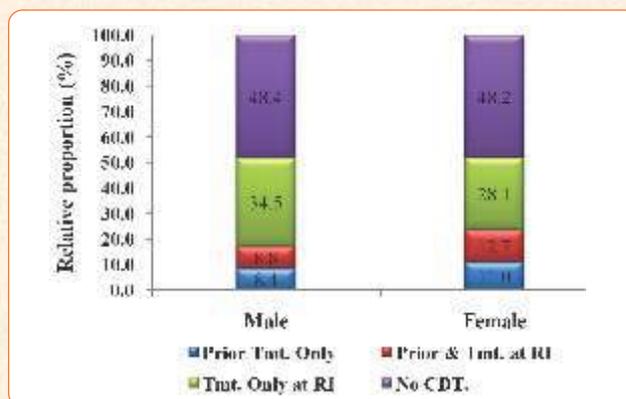


Fig 6.1 reveals that almost 48% patients in both male and female group neither accepted any form of treatment nor completed the directed treatment. And from the remaining cases, 34.5% male cases and 28.1% female cases completed the cancer directed treatment at the reporting institute.

Types of Treatment:

Table 6.2: Number (#) and RP (%) of Cancer Patients by Treatment Status at RI (2016)

(Excluding the cases previously treated)

Treatment Status	Male		Female		Total	
	#	%	#	%	#	%
Received	2141	41.6	1293	36.8	3434	39.7
Not Received	1791	34.8	1238	35.3	3029	35.0
Not Accepted	227	4.4	122	3.5	349	4.0
Incomplete	180	3.5	154	4.4	334	3.9
Palliative Care	809	15.7	705	20.1	1514	17.5
Total	5148	100.0	3512	100.0	8660	100.0

Table 6.3: Number (#) and RP (%) of non treated Cancer Patients by reason (2016)

(Excluding the cases previously treated)

Reason for no treatment	Male		Female		Total	
	#	%	#	%	#	%
Declined Treatment	1743	97.3	1217	98.3	2960	97.7
Advised to take planned	19	1.1	13	1.1	32	1.1
Advised to take symptomatic	1	0.1	0	0.0	1	0.0
Death before initiating treatment	22	1.2	5	0.4	27	0.9
Others	8	0.4	7	0.6	15	0.5
Total	1791	100.0	1238	100.0	3029	100.0

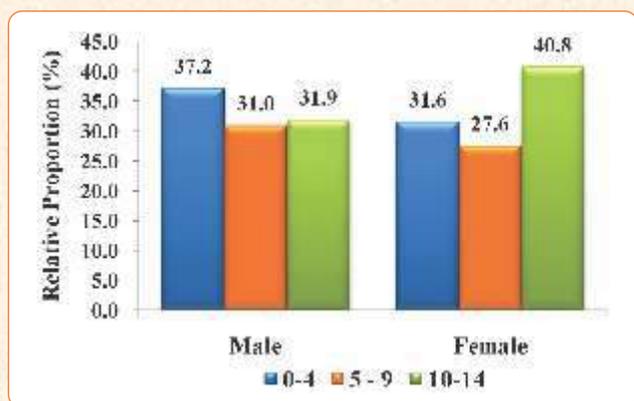
Table 6.4: Number (#) and Relative Proportion (%) of Cancer Patients according to Type of Treatment given (2016)

Type of Treatment	Male		Female		Total	
	#	%	#	%	#	%
Surgery (S)	67	3.1	53	4.1	120	3.5
Radiotherapy (R)	827	38.6	321	24.8	1148	33.4
Chemotherapy (C)	165	7.7	136	10.5	301	8.8
S+R	128	6.0	56	4.3	184	5.4
S+C	34	1.6	97	7.5	131	3.8
R+C	814	38.0	423	32.7	1237	36.0
S+R+C	99	4.6	118	9.1	217	6.3
Other	7	0.3	89	6.9	96	2.8
Total Patients	2141	100.0	1293	100.0	3434	100.0

7. CHILDHOOD CANCERS

This section highlights the burden of childhood cancers in HBCR, Guwahati in the year 2016. In this year, 1.7% relative to all other cancers is the childhood cancers among which 59.8% is for Boys and 40.2% is for Girls respectively.

Fig. 7.1: Gender wise Age Group distribution of Childhood Cancer (2016)



In the age group 0-4, the leading cancer for both boys and girls is Retinoblastoma which constituted 21.4% and 25.0% of the childhood cancers belonging to that age group. For Boys in the age group 5-9, it was Brains, Nervous System (17.1%) and for Girls in the age group 5-9, the leading site was Brains, Nervous System (23.9%).

For Boys in the age group 10-14, Brain, Nervous system (13.9%) was the leading site in 2016 whereas among the girls it was occupied by Bones (19.4%).

8. UTERINE CERVIX CANCER (New cases diagnosed in 2016)

Age Distribution:

Table 8.1: Number (#) and Relative Proportion (%) according to Five-Year Age Group (2016)

Age Groups	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+	Total
#	10	11	43	65	91	74	76	47	38	17	15	487
%	2.1	2.3	8.8	13.3	18.7	15.2	15.6	9.7	7.8	3.5	3.1	100.0

Table 8.2: Number (#) and Relative Proportion (%) according to stage at diagnosis (2016) - Uterine Cervix

Stages	I	II	III	IV	NA	Total
#	42	153	179	54	59	487
%	8.9	31.4	36.8	11.1	12.1	100.0

9. BREAST CANCER (New cases diagnosed in 2016)

Age Distribution:

Table 9.1: Number (#) and Relative Proportion (%) according to Five-Year Age Group (2016)

Age Groups	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+	Total
#	10	11	43	91	74	65	76	47	38	17	15	15	15	487
%	2.1	2.3	8.8	18.7	15.2	13.3	15.6	9.7	7.8	3.5	3.1	3.1	3.1	100.0

Table 9.2: Number (#) and Relative Proportion (%) according to stage at diagnosis (2016) - Female Breast

Stages	I	II	III	IV	NA	Total
#	12	89	231	95	153	580
%	2.1	15.3	39.8	16.4	26.4	100.0

10. HEAD AND NECK CANCERS.

Table 10.1: Number (#) and Relative Proportion (%) of Head and Neck Cancers relative to all sites of Cancer (2016)

Sites of Cancer	Male		Female		Total	
	#	%	#	%	#	%
Tongue	405	6.5	85	1.8	490	4.5
Mouth	450	7.2	228	5.0	678	6.3
Tonsil	194	3.1	47	1.0	241	2.2
Oropharynx	96	1.5	23	0.5	119	1.1
Nasopharynx	48	0.8	20	0.4	68	0.6
Hypopharynx	855	13.8	119	2.6	974	9.0
Larynx	211	3.4	35	0.8	246	2.3
Head and Neck	2259	36.4	557	12.1	2816	26.0
All Sites.	6214	100	4602	100	10816	100

Table 10.2: Number (#) and Relative Proportion (%) of Specific Head and Neck Cancers relative to all Head and Neck Cancer (2016)

Sites of Cancer	Male		Female		Total	
	#	%	#	%	#	%
Tongue	405	17.9	85	15.3	490	17.4
Mouth	450	19.9	228	40.9	678	24.1
Tonsil	194	8.6	47	8.4	241	8.6
Oropharynx	96	4.2	23	4.1	119	4.2
Nasopharynx	48	2.1	20	3.6	68	2.4
Hypopharynx	855	37.8	119	21.4	974	34.6
Larynx	211	9.3	35	6.3	246	8.7
Head and Neck	2259	100.0	557	100.0	2816	100.0

Table 10.3: Number (#) and Relative Proportion (%) of Head and Neck Cancer Patients according to their stages at diagnosis (2016)

Stages	Male		Female		Total	
	#	%	#	%	#	%
I	19	0.8	11	2.0	30	1.1
II	192	8.5	54	9.7	246	8.7
III	869	38.5	155	27.8	1024	36.4
IV	1050	46.5	300	53.9	1350	48.0
NA	129	5.7	37	6.6	166	5.9
Total	2259	100	227	100	2816	100

Population Based Cancer Registry, Guwahati
 Dr B Borooah Cancer Institute, Guwahati
 National Cancer Registry Programme - Indian Council of Medical Research

Kamrup Urban District Cancer Registry (PBCR, Guwahati)
Consolidated Report, 2010-2014

Principal Investigator :

Dr. Jagannath Dev Sharma
 Prof., & Head, Dept. of Pathology
 Dr. B. Borooah Cancer Institute
 Guwahati

Director:

Dr. Amal Chandra Katak
 Dr. B. Borooah Cancer Institute
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Staff of Polulation Based Cancer Registry, Guwahati
 (NCRP-ICMR)

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Computer Programmer
3. Mr. Manoj Kalita, MSc.
Statistician
4. Mr. Ranjan Lahon, MA
Social Investigator
5. Mrs. Barsha Roy, MA
Social Investigator
6. Mr. Chinmoy Misra, MA
Social Investigator
7. Mr. Kamal Kr. Deka, MSc-IT
Computer Operator

Rationale :

Population Based Cancer Registry –Guwahati was established in 2003 in the department of pathology at Dr. B. Borooah cancer Institute; as a sequel of 'Development of Atlas of Cancer in India' project in 2001 by Indian Council of Medical Research as a part of National Cancer Registry Programme of India. PBCR–Guwahati is responsible for to describe and elucidate cancer occurrence in Kamrup Urban District of India. The PBCR project Compiles, estimates, and reports cancer statistics. The key focus is to collect systematic and ongoing cancer data and statistics for cancer control action.

Coverage:

PBCR-Guwahati covers an area of 336 sq km and a total population of 11, 79, 405 out of which 6, 08,844 were males and 5, 705, 61 were females (Census 2011, C-14 data). The combined five year 2010-2014 estimated total population calculated as 65,89,139 with 34,66,762 males and 31,22,377 females respectively with an average annual population of 13,17,828 which is shown in population pyramid (Figure 1).

Fig 1: Population Pyramid showing 5 years age distribution for 2010-2014:

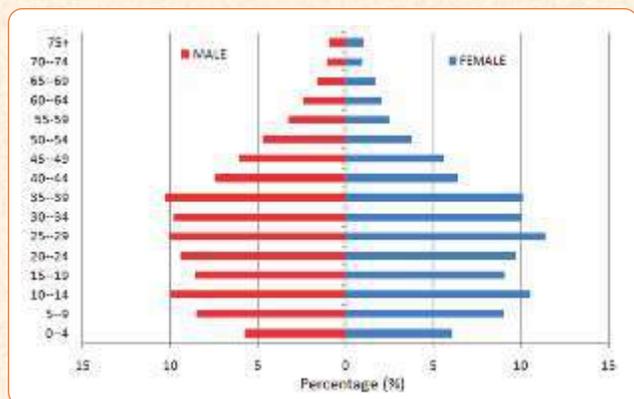


Table 1: Percentage Distribution of Estimated Resident Population by Age and Sex, Kamrup Urban area for 2010-14 is calculated using difference distribution method taking 2001 as base year.

Age Group	Males		Females	
	#	%	#	%
00-04	201076	5.8	190531	6.1
05-09	294481	8.5	281368	9.0
10-14	345276	10.0	329322	10.5
15-19	297578	8.6	283831	9.1
20-24	326733	9.4	303238	9.7
25-29	350221	10.1	356475	11.4
30-34	339893	9.8	314368	10.1
35-39	356843	10.3	315636	10.1
40-44	256605	7.4	199314	6.4
45-49	211091	6.1	175430	5.6
50-54	163194	4.7	117577	3.8
55-59	113542	3.3	77731	2.5
60-64	83308	2.4	64709	2.1
65-69	56251	1.6	52392	1.7
70-74	37175	1.1	29463	0.9
75+	33495	1.0	30992	1.0
Total	3466762	100.0	3122377	100.0

Data collection procedures :

In India collection of data on cancer incidence and mortality is an active one, **since in India cancer is not a notifiable disease**. The primary source of data collection for our registry is Dr. B. Borooah Cancer Institute (BBCI), a regional cancer centre in Guwahati, 51.4% of incident cancer cases were collected from this centre alone for the period of 2010-2014. Other than BBCI data were collected from 40 other hospitals & 31 diagnostic centres, along with a pain & palliative care centre and a state referral board. After the complete information has been attained data are entered into online PBCRDM software and submit to NCRP Bangalore for further necessary action.

Incidence Cases (2007-2014)

Figure 2. Showing Year wise Number of Incidence cases diagnosed in Kamrup Urban District

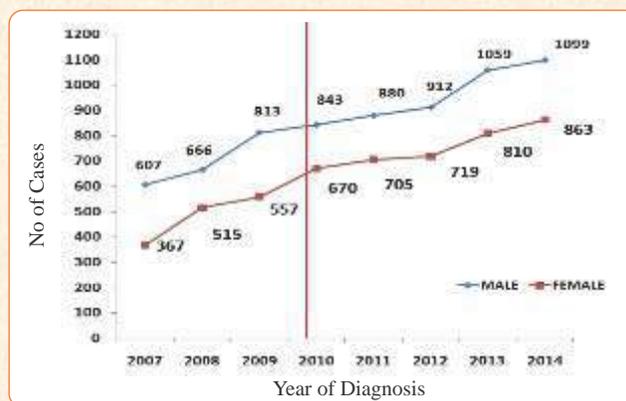
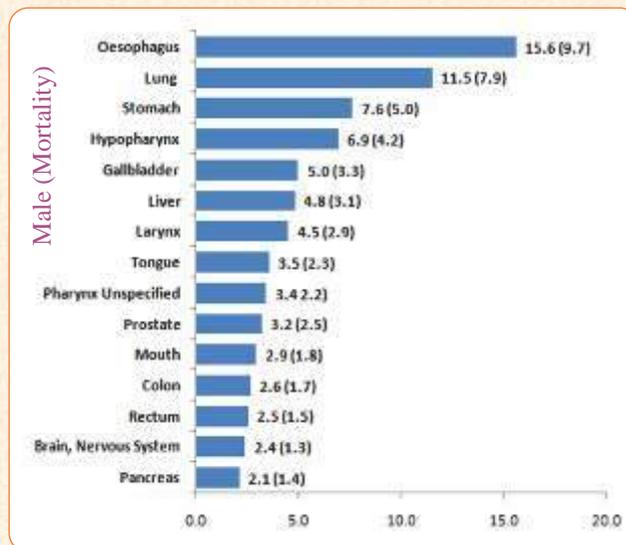
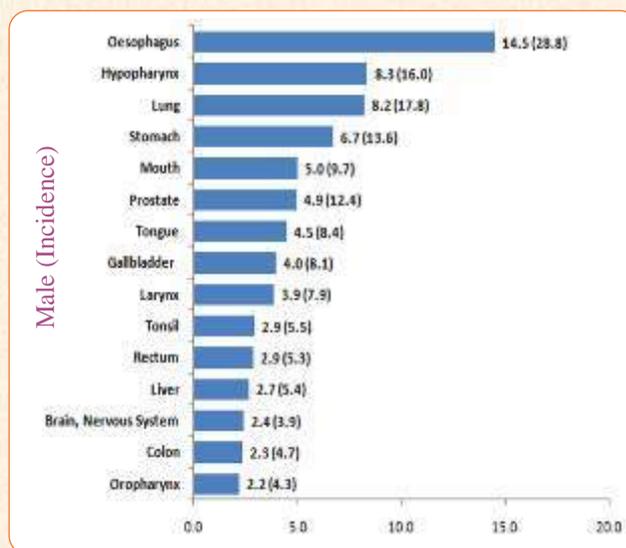
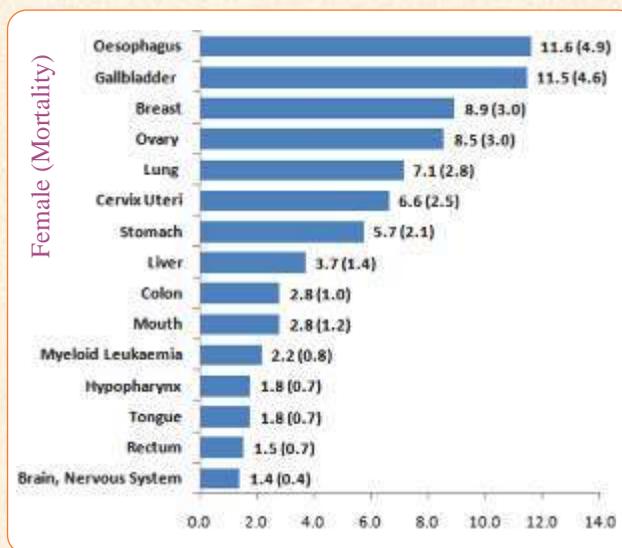
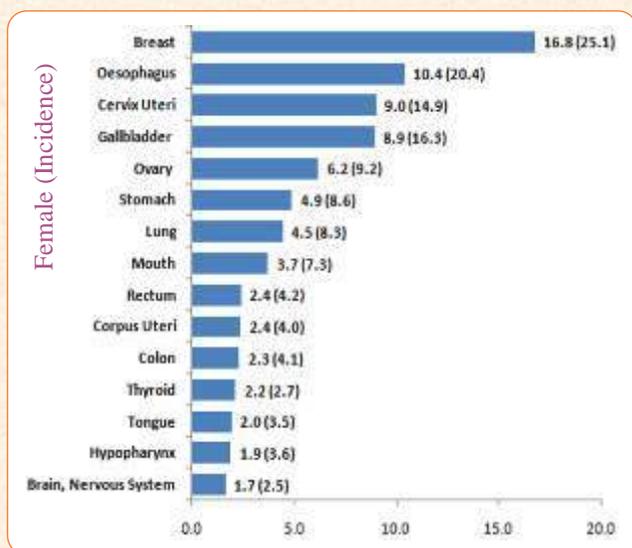


Figure 3. Leading sites (Incidence and Mortality), 2010-2014



Relative Proportion % (Age Adjusted rates given in parentheses)



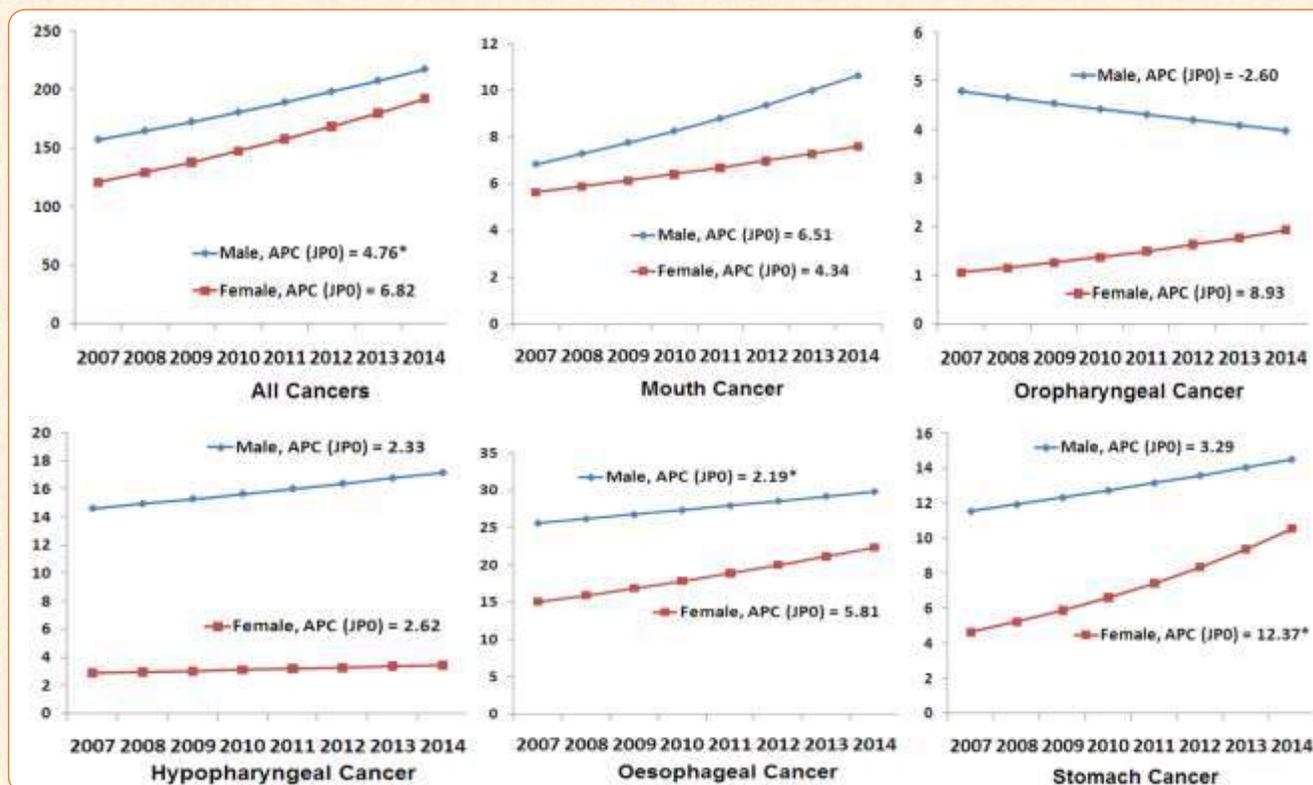
Relative Proportion % (Age Adjusted rates given in parentheses)

Cancer Incidence- Trend Analysis

Trends in incidence or mortality rates over a specified time interval are usually described by the annual per cent change (APC), under the assumption of a constant rate of change. The join-point analysis of the trends in

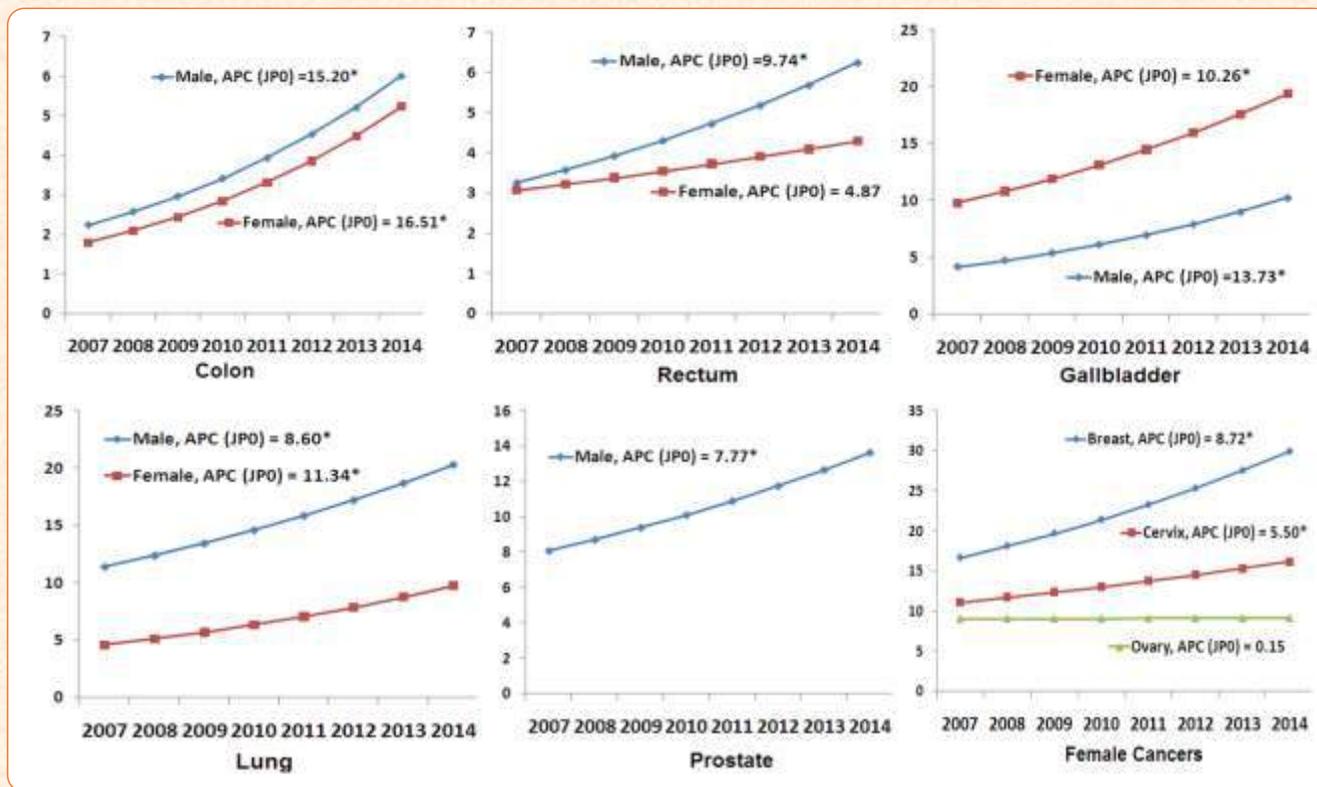
the age-adjusted cancer incidence and mortality rates allows the user to more accurately interpret changes over time and, more importantly, to determine if those changes are statistically significant.

Figure 4. Cancer Trends (Age Standardized Rate, 2007-2014)



ANNUAL PERCENTAGE CHANGE (APC %), Trends analyzed by the Join point Regression Program, version 4.3.1.0. Statistical Research and Applications Branch, National Cancer Institute.

Figure 4(a). Cancer Trends (Age Standardized Rate, 2007-2014)



ANNUAL PERCENTAGE CHANGE (APC %), Trends analyzed by the Join point Regression Program, version 4.3.1.0. Statistical Research and Applications Branch, National Cancer Institute.

Scientific Publications (Abstract/Key Content)

Person Years of Life Lost (TLL) due to cancer in Kamrup Urban District (Accepted by - Indian Journal of Medical Research) - Jagannath Dev Sharma, Amal Chandra Kataki, Manoj Kalita

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Years of potential life lost (YPLL) or potential years of life lost (PYLL), is an estimate of the average years a person would have lived if he or she had not died prematurely. It is, therefore, a measure of premature mortality. Estimates of the years of life lost due to cancer (YLL) are generated by

comparing the life expectancy at age interval with the number of deaths from cancer that occurred at that age group. The projected level of the expectation of life at birth for 2010-2015 for Assam state is calculated as 63.6 years for male and 64.8 for females (Source : Report of the Technical Group on Population projections, 2001-2026 : M/O Health & family Welfare).

Sites of Cancer	Male			Female			
	Total YLL	Average YLL	% of all years lost	Sites of Cancer	Total YLL	Average YLL	% of all years lost
Oesophagus (C15)	1367	11	16.8	Breast (C50)	925.2	15.7	12.1
Hypopharynx (C12-13)	723	10	7.8	Ovary etc. (C56)	865.0	17.3	11.3
Lung etc. (C33-34)	691	8	7.4	Gallbladder (C23-24)	735.2	12.5	9.6
Stomach (C16)	633	11	6.8	Oesophagus (C15)	581.2	10.8	7.6
Liver (C22)	444	12	4.8	Cervix Uteri (C53)	534.2	13.7	7.0
Larynx (C32)	401	11	4.3	Lung (C33-34)	516.4	13.6	6.7
Gallbladder etc. (C23-24)	396	10	4.3	Stomach (C16)	511.2	17.6	6.7
Brain, Nervous System (C70-72)	355	16	3.8	Colon (C18)	329.2	23.5	4.3
Rectum (C19-20)	353	15	3.8	Liver (C22)	280.4	15.6	3.7
Pharynx Unspecified (C14)	307	12	3.3	Myeloid Leukemia (C92-94)	215.8	19.6	2.8
Tongue (C01-02)	291	9	3.1	Brain, Nervous System (C70-72)	172.4	21.6	2.2
Myeloid Leukemia (C92-94)	277	16	3.0	Hypopharynx (C12-13)	169.6	24.2	2.2
Mouth (C03-06)	268	9	2.9	Mouth (C03-06)	148.6	12.4	1.9
Tonail (C09)	264	13	2.8	Tongue (C01-02)	102.4	12.8	1.3
Colon (C18)	239	11	2.6	Tonail (C09)	91.8	15.3	1.2
All Sites	9305.4	11.0	100.0	All Sites	7668.6	15.0	100.0

A total of 9305.4 YLL was estimated for men and 7668.6 for women who died from cancer in-between 2010-2014, an average of 11 years and 15 years per men and women respectively (Table 1). The greatest percentage of YLL in men was due to oesophageal cancer, contributing a total of

16.8% followed by Hypopharyngeal cancer (7.8%) and Lung cancer (7.4%). Among women the greatest percentage of YLL was from breast cancer, making up almost 12.1% followed by ovary cancer 11.3%.

ORIGINAL ARTICLE
Year 2017 | Volume 54 | Issue 1 | Page 388-391

Epidemiology of gynecological cancers in Kamrup Urban District cancer registry
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Abstract
BACKGROUND: Cancer of the female reproductive system, namely cancer of the cervix, ovarian, uterus, ovarian, vaginal, fallopian tube cancers and choriocarcinoma are an important cause of cancer morbidity and mortality among women worldwide. It is estimated to be the third most common group of malignancies in women. The comprehensive global cancer statistics from the International Agency for Research on Cancer indicate that gynecological cancers accounted for 20% of the 14.1 million estimated new cancer cases and 9.2 million cancer deaths among women in the world in 2012. The estimation of cancer burden is necessary to set up priorities for disease control. Gynecological cancers have increased in India and are estimated to be around 133,000 by the year 2020 constituting about 35% of the total cancer among women in India. Among these, cancer of the uterine cervix followed by ovary and corpus uteri are the major contributors. **METHODS AND MATERIALS:** Cancer is not notifiable in India, so instead of collecting information on cancer as active with voluntary participation of different societies including major hospitals, diagnostic centers, state referral board and birth and death registration centers within registry area. **RESULTS:** A total of 3767 (54%) cases were registered in women out of the total number of 6941 cancer cases during the period from 2010-2014. In case of gynecological cancers a total of 641 cases of cervical, ovarian and corpus uteri cancers were registered out of the total 3767 female cancer cases (37.5%) for the year 2010-2014. The annual average male rate at a mean for all sites of cancer was 117.4 per 100,000 population. The corresponding female rate was 166.6. **CONCLUSIONS:** Women's health issues have obtained high concern in recent decades. Utmost efforts should be made to educate women in early cancer detection by creating awareness on risk factors and symptoms.

How to cite this article:
Sharma U, Sharma J D, Sharma U, Kati K, Sharma A, Kalita M. Epidemiology of gynecological cancers in Kamrup Urban District cancer registry. *Indian J Cancer* 2017;54:388-91.

Original Article
DOI: 10.4103/0378-1710

Quality assessment and improvement of cancer registration system in Kamrup Urban District: A Report
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Abstract
INTRODUCTION: The global burden of cancer incidence and mortality are rising continuously worldwide. As per the GLOBOCAN 2012 estimates, about 14.1 million cancer cases and 9.2 million cancer deaths occurred and 32.6 million people living with cancer within 5 years of diagnosis in 2012 worldwide. Reliable data on the magnitude and the pattern of cancer are essential for monitoring the health of the community, assessing the performance of the health care system. Cancer registries should pay greater attention to quality of their data. The completeness of cancer registry data is essential to which all of the incident cancers occurring in the population are included in the registry database. It is extremely important attribute of a cancer registry. There are many factors influencing the quality of data namely, completeness, timeliness, validity and feasibility. **MATERIALS AND METHODS:** Data regarding incidence and mortality with methods of diagnosis for individual years were obtained from the National Cancer Registry Program database of the Indian Council of Medical Research for 2009 to 2014 periods and recalculated for combined years (2009-2014). **RESULTS:** In year 2009-11, 77.1% were microscopically confirmed cases which are increased in the later years and for the year 2012-2014, 81.2% cases. It indicates also the percentage of microscopically confirmed cases were increased from 80.2% to 82.3%. An improvement in mortality to incidence ratio was obtained over the years. BR rate in males was improved to 32.8% to the year 2012-14 as compared to 28.8% for the year 2009-11 while in female BR rate also increased from 18.8% to 21.8% over the period from 2009-11 to 2012-14. Spreadsheets were developed from 12% to 15.7% in males and 13% to 16.5% in females respectively from the period 2009-11 to 2012-14. **CONCLUSION:** Although there is a slight improvement in data quality in data, there is an enormous scope for population based cancer registry Guwahati to improve the data quality.

Key Words: Cancer, death certificate only, incidence, mortality, mortality-to-incidence

ORIGINAL ARTICLE
Year 2016 | Volume 53 | Issue 4 | Page 699-706

Cancer statistics in Kamrup urban district: Incidence and mortality in 2007-2011
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Abstract
Purpose: The aim of this study was to report cancer statistics in Kamrup Urban District, including incidence and mortality. **Introduction:** In the last five year (2007-2011) Guwahati witnessed a remarkable growth in cancer incidence cases. The number of new cases of all cancer was increased from 133.3 to 188.5 and 162.7 to 143.3 per 100,000 men and women respectively from the year 2007 to 2011 in KUD. The data from KUD also have shown that for some of the specific types of cancer are highest or some of the highest incidence rates in the world; particularly cancers of upper aero-digestive tract consist of anatomical sites such as oral cavity, hypopharynx, larynx, pharynx, stomach, lung, prostate and oesophageal cancer. **Materials and Methods:** Age-standardized rates (ASR) (per 100,000 person-years) for incidence, mortality were calculated using the World Standard Population as proposed by Segi and modified by Doll et al. Descriptive statistics were presented by tables and figures. **Results:** A total of 6623 number of cases (male = 3699, female = 2924) were diagnosed with cancer in the last five years (2007-2011) period of time. The overall age standardized cancer incidence rate is almost 21% higher in men than in women. The pooled ASR for the five year period is 175.2 and 144.7 per 100,000 men and women. **Conclusion:** Overall cancer incidence and mortality rates have increased since 2007.

How to cite this article:
Sharma J D, Kataki AC, Barman D, Sharma A, Kalita M. Cancer statistics in Kamrup Urban District incidence and mortality in 2007-2011. *Indian J Cancer* 2016;53:699-706.

Descriptive Report on Pattern of Variation in Cancer Cases within Selected Ethnic Groups in Kamrup Urban District of Assam, 2009-2011
Jagannath Dev Sharma, Manoj Kalita¹, Jamil Ahmed Barbhuiya, Ranjan Lahon, Arpita Sharma, Debanjana Barman, Amal Chandra Kataki, Barsha Deka Roy

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Abstract
Background: The global burden of cancer is continuously increasing. According to recent report of the National Cancer Registry Programme (NCRP) on time trends it is estimated that future burden of cancer cases for India in 2020 will be 1,230,000. It is well known that knowledge of the incidence of cancer is a fundamental requirement of rational planning and cancer control programs. It would help health planners to formulate public health policy if relevant ethnic groups were considered. North East India alone constitute over 140 Scheduled Tribes and 400 other tribes and groups, whose cancer incidence rates are high compared to mainland India. As since no previous study was done focusing on ethnicity, the present investigation was performed. **Materials and Methods:** In this paper PBCR-Guwahati data on all cancer registrations from January 2009 to December 2011 for residents of the Kamrup Urban District, comprising an area of 261.8 sq. km with a total population of 900,818, including individual records with information on sex, age, ethnicity and cancer site are presented. Descriptive statistics including age-adjusted rates (AARs) were tabulated as provided by NCRP. For comparisons of proportional incidence ratios (PIR) the Student's t test was used, with p < 0.05 considered as statistically significant. **Results and Conclusions:** Differences in leading sites of Kamrup Urban District since from the beginning of the PBCR-Guwahati were revealed among different ethnic groups by this study. The results should help policy makers to formulate different strategies to control the level of burden as well as for treatment planning. This study also suggests that age is an important factor of cancer among different ethnic groups as well as for overall evaluation of Kamrup Urban District.

Keywords: Cancer - age adjusted incidence rates - ethnic groups - Assam - India

Asian Pac J Cancer Prev, 18 (16): 6301-6306

Sharma, JJ et al. *Int J Prev Med* 2014; 9(10):1367-1377
DOI: 10.5455/2395-9412.ijpm09101367

Research Article
Burden of head and neck cancers in Kamrup urban district cancer registry of Assam, India: a retrospective study
Jagannath Dev Sharma¹, Debanjana Barman², Mridul Kumar Sarma³, Arpita Sharma⁴, Manoj Kalita⁵, Amal Chandra Kataki⁶, Jamil Ahmed Barbhuiya⁷, Ranjan Lahon⁸, Barsha Roy Deka⁹

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Abstract
Background: Head and Neck cancers are basically squamous cell carcinomas. It is the fifth most common cancer and the sixth most common cause of mortality in India. Incidence of cancer in a country for all sites is fourth highest in Kamrup Urban District (KUD) in males (AAR: 185.3) and second highest (AAR: 156.3) in females out of all Population Based Cancer Registries (PBCRs) in India. Incidence of head and neck cancers in KUD is quite high both in absolute and proportionally. This retrospective study was carried out to assess the incidence pattern of head and neck cancers in Kamrup Urban District of Assam, India for the period of 2008-2011. **Methods:** Cancer in Kamrup Urban District of Assam, India, as a method of capturing information on cancer was started in PBCR-Guwahati. A total of 4416 cases were registered during the last three years (1st January 2009-31st December 2011) of which 2908 were male and 1508 female. Statistical analysis were: Age Adjusted Rate (AAR), (male: 185.3) and Population estimates are provided by NCRP/IASO. **Results:** The relative proportion of cancer of head and neck sites registered in KUD between males (44.1%) (1054/2398) and 12% (123/1018) in males and female respectively. In males consist of hypopharynx (AAR: 14.7) were most common followed by tongue (AAR: 9.4) and mouth (AAR: 7.7). In females cancer of mouth (AAR: 7.6) is most common followed by tongue (AAR: 3.2). **Conclusion:** The pattern and structure of various head and neck cancers is of utmost importance for primary prevention and early detection to adequately manage the consequences in the community.

Keywords: HNSCC, KUD, AAR, CR, Carcinoma

Patterns of Upper Aero-digestive Tract Cancers in Kamrup Urban District of Assam: A Retrospective Study
Jagannath Dev Sharma¹, Manoj Kalita², Debanjana Barman³, Arpita Sharma⁴, Ranjan Lahon⁵, Jamil Ahmed Barbhuiya⁶, Barsha Deka⁷, Amal Chandra Kataki⁸

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Abstract
Background: The incidence of upper aero-digestive tract (UADT) cancers, including C10-C14, C30-C32, C18 and C16, is increasing rapidly in Kamrup Urban District (KUD) of Assam, North East (NE) India. According to the NCRP (2012) report 37.6% of all cancers in both sexes are UADT cancers in the NE region, accounting for 53.2% in males and about 27.2% in females of the total cases. **Materials and Methods:** A retrospective study was conducted for patient information from the period of 2008-2011. Age-standardized or age-adjusted rates (AAR or AAR) (per 100,000 person-years) were calculated using the World Standard Population as proposed by Segi and modified by Doll et al. The registry population area at risk was estimated using the 1994 and 2001 census population by sex, as well as the growth rate during that interval using the difference distribution method. **Results:** There were 5,638 cases registered during the last four years of the study (2008-2011) accounting for 36.7% (1,196/3,258) of the total in males and 43.3% (3,442/7,936) in females. The male:female ratio was 1.34:1.00. The overall age adjusted rates (AAR) were 179.4 and 153.8 per 100,000 males and females respectively. Cancer of the oesophagus was most common in both sexes, with most appreciable gender variation for tongue and hypopharynx, presumably reflecting differential exposure to risk factors.

Keywords: Upper aero-digestive tract cancer - AAR - risk factors - Kamrup Urban District - Assam - India

Asian Pac J Cancer Prev, 18 (17): 7267-7270

Cancer: Scenario and Relationship of Different Geographical Areas of the Globe with Special Reference to North East-India
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Abstract
Background: Cancer is becoming the most important public health burden around the globe. As per the GLOBOCAN 2008 estimates, about 13.7 million cancer cases and 7.6 million cancer deaths were estimated to have occurred in 2008. The burden of cancer cases for India in the year 2020 is calculated to be 1,448,757 (male 834,314, female 614,443) compared to 776,786 in 2010. The pattern of cancer incidences in varying among geographical regions, oesophageal cancer for example being high in China, lung cancer in USA, and gallbladder cancer in Chile. The question remains why? It is due to the diversity in genetic pool, food habits, risk factor associated and role of genetic susceptibility or some other factors associated with it. In India, the North East (NE)-India region is seeing a marked increase in cancer incidence and deaths, with a very different cancer incidence pattern compared to mainland India. The general goal of the region is also quite distinct from the rest of India. Notwithstanding the fact that NE-India region is quite distinct from other regions, they are more closely related to East Asians than to other Indians. In this paper an attempt was made to see whether there is any similarity among the pattern of cancer incidence cases for different sites of NE-India region to South or East Asia. **Materials and Methods:** Principal Component Analysis (PCA), Hierarchical Cluster Analysis (HCA), Pearson Correlation coefficient test was assumed to evaluate the linkage of North-East India region to other regions. A p value < 0.05 was considered as statistically significant. **Results:** The results clearly show that there are similarities in occurrence of cancer incidence pattern for various cancer sites of NE-India with South and East-Asian regions, which may lead to the conclusion that there might be a genetic linkage between these regions.

Keywords: Cancer - oesophagus - lung - stomach - hypopharynx - nasopharynx - TBC

Asian Pac J Cancer Prev, 18 (16): 3721-3729

TOBACCO RELATED CANCERS IN KAMRUP URBAN DISTRICT: PATTERN & INCIDENCE (REPORT FROM POPULATION BASED CANCER REGISTRY GUWAHATI) JAGANNATH DEV SHARMA; DEBANJANA BARMAN; ARPITA SHARMA; AMAL CHANDRA KATAKI

Abstract
Background
Indian Council of Medical Research (ICMR) launched National Cancer Registry Programme (NCRP) in 1982 to measure the burden of cancer in India & pattern. No data on cancer was available till 2001 from NE-region when the "Development of an Atlas of Cancer in India" a WHO-sponsored ICMR project started in the Department of Pathology of Dr. B. Boruah Cancer Institute (BCCI). The relatively high frequency with which cancer cases observed in this later project was the reason for commencing Population Based Cancer Registry (PBCR) in Kamrup Urban District of North Eastern Region of India from 2003. The incidence and relative proportion of specific sites of cancer associated with the use of tobacco varies according to the type of tobacco and the manner of its consumption. TRCs are important to implement cancer control activity in the population. The aim of this study is to highlight the incidence and pattern of TRCs in PBCR-Guwahati and compare these with those of other registries of India.

Methods and materials: Cancer is not notifiable in India, so method of collecting information on cancer was active with voluntary participation of different societies including major hospitals, diagnostic centers, state referral board and birth and death registration centers within registry area.

Results: The three year report (2009-2011) of PBCR-Guwahati shows incidence and pattern of tobacco-related cancer in Kamrup Urban District. About 40% of all cancers are tobacco related. TRC of Kamrup Urban District comprised 49.1% of cancers in males and 23.7% of cancers in females.

Conclusions: Tobacco is the single most important cause of preventable cancer death globally. Prevention of tobacco-habits and early detection of these cancers are most important strategy in cancer control.

An overview of the Project “Patterns of Care & Survival Studies on Cancer Cervix, Cancer Breast & Head & Neck Cancer”

POCSS which was started at Dr. B. Borooah Cancer Institute from Oct' 2006 has come a long since its inception. All the patients suffering from cancer Cervix, Breast & Head & Neck Cancer are included in the study. The basic methodology of this project envisages capturing core patient identifying information with details of clinical stage, types of treatment and follow-up parameters as per standards specified. The study was started with the following objective.

1. To obtain the details of clinical stage & types of treatment in the Hospital Based Cancer Registries under the National Cancer Registry Programme (NCRP) & in other selected canter & medical colleges across the country.
2. To obtain clinical stage & treatment based survival in all registered and treated patients at this center. Sixteen Institutions are participating in this.

The NCRP is aiming to obtain information from all Hospital Cancer Registries which are in the NCRP Network. It is Multi-centric study. Since hospitals are the main sources for obtaining information on the clinical status, treatment and follow up information, utilization of this network would help immensely to obtain varied information of the pattern of cancer, diagnostic, treatment and follow-up information for these cancers. There is no unified national database on survival of cancer patients in India and NCRP would like to develop this for better patient care and as a useful research material.

Here are some of the important data of this study to reflect upon the facts-

Treatment details of Ca Cervix, Breast and Head & Neck Cancer (**Year 2006-2016**)

Total Cases Registered :

Head & Neck Cancer Total Case : 5748 (Year :2006-15)

Year	Expected	Received cases	%
2006	1885	283	15
2007	1885	1128	59.38
2008	1885	1052	55.8
2009	1885	1123	59.6
2010	1885	1022	54.2
2011	1964	913	46.5
2012	2071	250	12.1
2013	2172	97	4.5
2014	2161	16	0.7
2015	2161	2	0.1

Cancer Cervix Total Case : 1832 (Year : 2006-16)

Year	Expected	Received cases	%
2006	397	47	11.8
2007	397	251	63.2
2008	397	137	34.5
2009	397	215	54.2
2010	397	225	56.7
2011	442	201	45.5
2012	405	179	44.2
2013	442	145	32.8
2014	438	124	28.3
2015	438	160	36.5
2016	438	148	33.8

Cancer Breast Total Case : 1191 (Year :2006-15)

Year	Expected	Received cases	%
2006	416	28	6.7
2007	416	172	41.3
2008	416	127	30.5
2009	416	181	43.5
2010	416	113	27.2
2011	393	124	31.6
2012	487	160	32.9
2013	568	193	34
2014	592	143	24.2
2015	592	58	9.8

Follow-up is the main component of this study & the success of this project depends on the percentage of the patients being followed-up.

Survival Analysis Table (Patients Treated only at Reporting Institute) period of follow-up 12 months.

Sites	Diagnosed Year	Treated only at RI#	Alive (A)	Dead (D)	A+D	Unknown Blank	No-Follow-up	Follow-up
Ca Cervix	2006-2016*	1230	1014	184	1198	3	29	97.4
Ca Breast	2006-2015*	563	472	67	539	3	21	95.7
H. & N. Ca	2006-2015*	3685	2501	858	3359	45	281	91.2

*Data Collection for the year 2010 to 2016 is going on.

Vital status and Survival Percentage (%) according to Type of Treatment (2006-2016*)
(Treated only at Reporting Institute) **CANCER CERVIX**

Type of Treatment	On Follow-up				Survival %	No Follow-up Unknown		Total Cases
	Alive	Dead	Alive + Dead			#	%	
			#	%				
Radiotherapy	522	138	660	97.3	77.0	18	2.7	678
Radiotherapy + Chemotherapy	464	44	508	98.1	89.6	10	1.9	518
Surgery + Radiotherapy	9	1	10	90.9	81.8	1	9.1	11
Surgery	7	–	7	70.0	70.0	3	30.0	10
Surgery + Radiotherapy + Chemotherapy	9	–	9	100.0	100.0	–	–	9
Chemotherapy	3	–	3	100.0	100.0	–	–	3
Surgery + Chemotherapy	–	1	1	100.0	–	–	–	1
Total	1014	184	1198	97.4	82.4	32	2.6	1230

Vital status and Survival Percentage (%) according to Type of Treatment (2006-2015*)
(Treated only at Reporting Institute) **HEAD & NECK CANCER**

Type of Treatment	On Follow-up				Survival %	No Follow-up Unknown		Total Cases
	Alive	Dead	Alive + Dead			#	%	
			#	%				
Radiotherapy	1684	697	2381	90.6	64.1	247	9.4	2628
Surgery + Radiotherapy	353	52	405	94.2	82.1	25	5.8	430
Radiotherapy + Chemotherapy	294	53	347	93.8	79.5	23	6.2	370
Surgery	121	29	150	87.2	70.3	22	12.8	172
Chemotherapy	19	20	39	88.6	43.2	5	11.4	44
Surgery+Radiotherapy +Chemotherapy	28	6	34	91.9	75.7	3	8.1	37
Surgery + Chemotherapy	2	1	3	75.0	50.0	1	25.0	4
Total	2501	858	3359	91.2	67.9	326	8.8	3685

Vital status and Survival Percentage (%) according to Type of Treatment (2006-2015*)
(Treated only at Reporting Institute) **BREAST CANCER**

Type of Treatment	On Follow-up				Survival %	No Follow-up Unknown		Total Cases
	Alive	Dead	Alive + Dead			#	%	
			#	%				
Surgery + Radiotherapy + Chemotherapy	156	4	160	96.4	94.0	6	3.6	166
Chemotherapy	60	34	94	92.2	58.8	8	7.8	102
Surgery + Chemotherapy	57	8	65	90.3	79.2	7	9.7	72
Radiotherapy + Chemotherapy	58	5	63	100.0	92.1	–	–	63
Surgery+Radiotherapy+Chemotherapy+Hormone Therapy	45	–	45	100.0	100.0	–	–	45
Surgery	38	5	43	97.7	86.4	1	2.3	44
Radiotherapy	14	9	23	95.8	58.3	1	4.2	24
Radiotherapy +Chemotherapy+Hormone Therapy	12	1	13	100.0	92.3	–	–	13
Surgery+Radiotherapy	11	–	11	100.0	100.0	–	–	11
Surgery+Chemotherapy+Hormone Therapy	9	–	9	100.0	100.0	–	–	9
Radiotherapy+Hormone Therapy	5	–	5	83.3	83.3	1	16.7	6
Surgery+Radiotherapy+Hormone Therapy	3	–	3	100.0	100.0	–	–	3
Chemotherapy+Hormone Therapy	3	–	3	100.0	100.0	–	–	3
Hormone Therapy	–	1	1	100.0	–	–	–	1
Surgery+Hormone Therapy	1	–	1	100.0	100.0	–	–	1
Total	472	67	539	95.7	83.8	24	4.3	563

Some steps were taken from 2009 to improve our pattern of data collection so as to improve our results:

- Tumour Board Meeting:** All our SI started joining in the tumour board meeting as all the patients' treatment plan is discussed. So, we get the chance to meet them on that day itself and collect all the necessary information (i.e. ph. no. etc) from the patient's attendant & also the attending Doctors.
- Monthly Review Meeting:** Once a month review meeting is held under the chairmanship of the Director (PI) with the project staff & consultants of various departments of the concerned tumour site. This provides an opportunity to update the progress of work done. Many clarification of medical/technical matters are sorted out during the meeting.
- ASHA/ANM Workers-** As we have a very good network of ASHA/ANM workers in every nook & corner of our state, so all the patients who cannot be contacted, their addresses are noted down & the ASHA/ANM worker of that particular area is called up & asked to enquire about the patient. Mobile telephone handsets distributed to ASHA/ANM workers by the Govt. of Assam under NRHM, Ministry of Health & Family Welfare are of great help in contacting the ASHA/ANM workers.
- Office Address:** Office address of Patients/Care takers has also come to our help on few occasions when we had to call up their office addresses & enquire about the patients.
- Gaon Burha (Village Head):** We have collected the phone numbers of Gaon Burha of Various Villages of the state, and in many occasions they have really helped us in finding the whereabouts of many missing patients. Presently we are trying to collect the phone number of all the Gaon Burhas of the state which will immensely help us to collect information about the missing patients.
- Post Card:** We also send Postcard to those patients who are lost to follow up for many years.
- The POCSS Social Investigator doing Telephonic follow-up for patient detail information.
- Other cancer Registries of North East:** We have collected the phone numbers of other registry staff of North East region. They have helped us to find the vital status of the patients of North East Region.

Home Visit: Recently our Social Investigator have started home visit of Ca Breast, Ca Cervix & Head & Neck Cancer cases of all over Assam and it has shown very satisfactory results. And we are hopeful that it will increase the followup percentage in near future.

Annual Report from April 2017 to March 2018

Project : Capacity Building in Pediatric Oncology (IPOI, JDF)

Dr. B. Borooah Cancer Institute, Guwahati

It is our pleasure to present before you the 5th Annual Report of the project Indian Paediatric Oncology Initiative (IPOI, JDF). The report is a descriptive analysis of the pediatric cancer patients from April 2017 to March 2018.

Data Abstraction (Old+ New Cases):

The project completed 5 years of service at the Regional Cancer Centre. Jiv Daya Foundation (JDF) provided a Social Worker, Social Worker cum Data Manager and two Staff Nurse under the Project Co-ordinator. The data collection is done on basis of the core performa provided by India Pediatric Oncology Initiative Database (IPOI). The Data obtained hereby is entered onto IPOD management software developed by JDF.

Collection of identifying information and basic demographic data regarding previous diagnosis/treatment details and personal interview/Counseling on the day of registration at Dr. BBCI and additional Data cum post counseling are done by Social Workers, thus accordingly try to support and raise fund from different sources to help the patient to access treatment / quality care.

The collected Data is further managed by Data Manager and entered into the IOPD. Even a separate Hospital based pediatric registry is maintained.

Active follow –up has contributed to assess patient care and reduce abandonment.

The Social Workers also coordinates between NGO'S, Social wings, SCR programme, Blood Donors and pediatric patients not only from Dr.BBCI but also from other Institutions of the City like Gauhati Medical College and SNN Beltola for investigational help and support throughout the treatment. Even education on health nutrition and hygiene is also provided by the Social Workers.

The Pediatric Staff Nurses looks after the Pediatric patients in the day care and in patient department. They mixes and administers chemotherapy, prepares the patients for procedures like bone marrow aspiration, lumbar puncture , PICC Line , sedation prior to CT scan and MRI, blood and component transfusion etc. They also take care of infections and hygiene, counseling of parents about proper nutrition of the children from the age group of zero to 18 yrs.

India POD data from April 2017 to March 2018

Total No. of Patients : 240

Gender Distribution : Female = 100(40%), Male=140(58%)

Gender Distribution

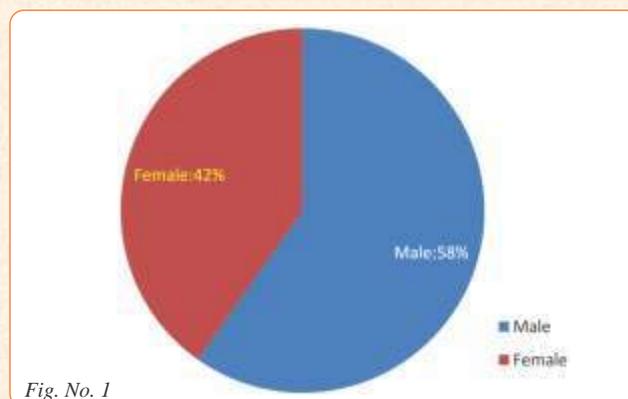


Fig. No. 1

Survival Status :

* Alive	: 170
* Expired	: 23
* Non-Malignant	: 10
* Lost to follow up	: 7
* Refused/Abandoned treatment:	6
* On Palliation	: 10
* Unknow	: 14

Age Distribution:

From 2017 we have increased the age of pediatric patients upto 18 years (0-18). Total Count : 240

Age	Patient Count	Patient Count %
1	2	0.83
2	17	7.08
3	27	11.25
4	22	9.17
5	21	8.75
6	15	6.25
7	15	6.25
8	14	5.83
9	5	2.08
10	13	5.42
11	8	3.33
12	9	3.75
13	9	3.75
14	16	6.67
15	12	5.0
16	12	5.0
17	13	5.42
18	10	4.17

Cancer Type :

Year April, 2017 to March, 2018

Sl. No.	Cancer Type	Patient Count
1	Leukemia (ALL)	55
2	Retinoblastoma	38
3	CNS Tumour	14
4	Bone Tumour	30
5	Lymphoma	19
6	Kidney Tumour	9
7	Other Cancer	23
8	Germ Cell Tumour	5
9	Rhabdomyosarcoma	11
10	Neuroblastoma	4
11	Ca Nasopharynx	2
12	Soft Tissue Sarcoma	4
13	Hepatic Tumour	2
14	Unknown	14
15	Non-Malignant	10
Total		240

Patients Follow-up : From April 2017 to March 2018

Sl.No.	Cancer Type	Alive	Expired	Lost of Follow-up	Refused Abandoned	On Palliation	Grand Total
1	Leukemia	42	10	3	-	-	55
2	Retinoblastoma	36	2	-	-	-	38
3	CNS Tumour	12	-	-	1	1	14
4	Bone Tumour	27	3	-	-	-	30
5	Lymphoma	15	1	2	1	-	19
6	Kidney Tumour	5	-	1	1	2	9
7	Other Cancer	10	5	-	2	6	23
8	Germ Cell Tumour	4	-	-	-	1	5
9	Rhabdomyosarcoma	8	1	1	1	-	11
10	Neuroblastoma	3	1	-	-	-	4
11	Ca Nasopharynx	2	-	-	-	-	2
12	Soft Tissue Sarcoma	4	-	-	-	-	4
13	Hepatic Tumour	2	-	-	-	-	2
14	Unknown	-	-	-	-	-	14
Grand Total		170	23	7	6	10	230

Miscellaneous activities throughout the year .

Apart from data collection, fund raising and follow ups done, some miscellaneous activities is also carried out in the Medical/Pediatric department because Kids cannot fight cancer alone. Here we present a brief summary of the events.

Date- 28.4.17

Paramedical update program on Safe handling of cytotoxic drug.

Date-09.09.17

CME on Retinoblastoma - an awareness among ophthalmologist , Pediatrician and Oncologist at SSN in collaboration with BBCI and Cankids.

Date-02.10.17

Drawing competition on the occasion of Gandhi Jayanti was organised at our hospital OPD with themes of

Save earth / swachh Baharat / Cleanliness.

Children Day 2017

We celebrated National Childhood Cancer Day”, along with Children's Day on 14th Nov.2017. The celebration was a delightful at the same time colorful. The gathering was welcomed by the Director of the institute. A ceremonial cake was cut by the children and then a magic show delighted the kids with joy excitement. Even various poems being recited, songs and dances were performed by our Cancer children. After that gifts were distributed along refreshments for all.

Date- 17th ICCD Febuary 2018

On 17.2.18 Children with cancer were taken to Guwahati Planetarium and War memorial for site to mark *International Childhood Cancer Day* (ICCD).

Date- On 19.2.18

PICC line demonstration arranged free of cost for children who require long duration and frequent chemotherapy on the occasion of 17th ICCD 2018. Patient will not required repeated IV access which will reduce the pain burden on patients.

Fund Raised:

- Total patients helped with Govt. schemes: - 60 nos.
- Fund raised through Government Schemes, NGOs and Misc. for pediatric patients in the year april'17 to March'18 : Rs. 1,39,22,125

Sources of Funds and Support for pediatric cancer :

- Health Minister Cancer Patient Fund under RAN.
- Prime Minister relief Fund.

- Sneha Sparsha scheme under assam Govt. for children below 12 yrs.
- Chief Minister Relief Fund
- Aprajeeya- Assam Gas Company, Duliajan donated Rs. 1.5 crore for pediatric cancer treatment.
- Deepsikha Cancer Care Foundation (NGO)- Sishu Asray Sthal (provides Free fooding and Lodging for outstation patients)
- NBM Cancer Relief Fund
- Cankids (New Delhi) – Medicines + Prosthesis and recreational activities.
- Atal Amrit Abhiyan (under Assam Arogya Nidhi)
- MLA Fund.
- KL Group, Guwahati.
- Bhagwan Vahavir Viklang Samiti, Jaipur Foot.
- Karunadhara Trust, GL Publication.
- Dr. BBCI Concession Card.
- Nirmal & M.P Aggarwal Trust.
- Ashray Concept Foods (Nutritional Supplements).
- Choudhury Pharmacy.
- Barman Pharmacy.
- Al-Ameen Welfare Society.
- Akshay Patra Foundation- Nutritional support on each Monday and Tuesday for OPD Children.
- Saint Jude-NGO, Bombay- Home Away From Home (under construction) at BBCI Guest House.
- Individual Donors.



“Aparajeeya” Free Card for all poor pediatric Patients (28.11.17)

Glimpses of the Activities of April 2017 and March 2018

Drawing competition on the occasion of Gandhi Jayanti 2nd October



Cake cutting ceremony on Children's Day



Magic Show on Children's Day



Gift Distribution on Children's Day



Sightseeing Program for Pediatric Cancer Patients.



PICC Line for repeated IV access



Pediatric patient's Birthday Celebration at BBCI



Annual Report of Palliative Medicine

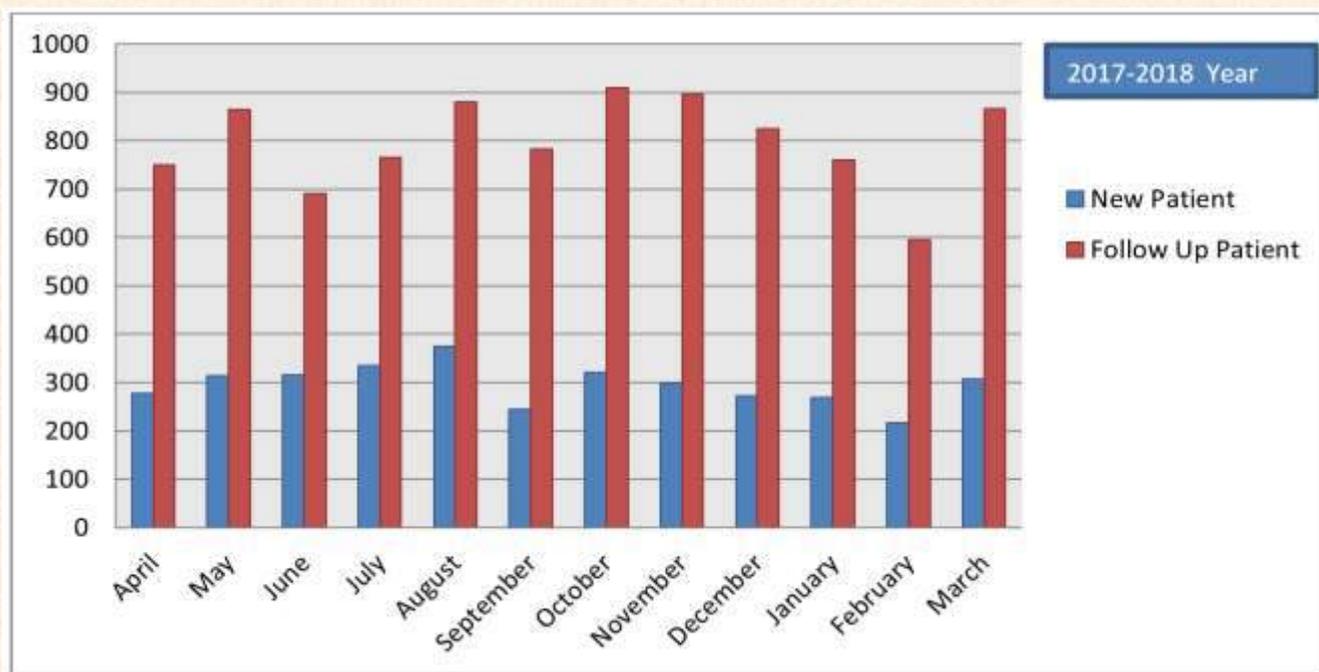
Dr. B. Borooah Cancer Institute, Guwahati

Palliative care is the active total care applicable from the time of diagnosis, aimed at improving the Quality of Life of patients and their families facing serious life-limiting illness, through the prevention and relief of suffering from pain and other physical symptoms as well as psychological, social and spiritual distress through socially acceptable and affordable interventions.

Palliative Medicine Deptt. of BBCI is providing holistic support to the cancer patients and also to family members by OPD service, Day-Care and In-patient services. A multidisciplinary team comprises of Specially trained team of Doctors, Nurses, Social Worker Cum Counselor, Spiritual Workers and Volunteers are working relentlessly to provide an extra layer of support.

Jiv Daya Foundation, USA has collaborated with BBCI and Palliative Medicine Department for the project – 'India Cancer Palliative Care Initiative'. Owing to the good work done by the staff of this project and the rise in number of patients, Jiv Daya Foundation has increased the support of the project by another three years. JDF sponsored nurses are now working in the ward to look after the admitted patients by the palliative care team. This facility has boosted the proper and timely care of the admitted patients.

The Department of Palliative Medicine Consulted 3544 nos. of New Patients and 9585 nos. of Follow up patients during the financial year 2017-2018.



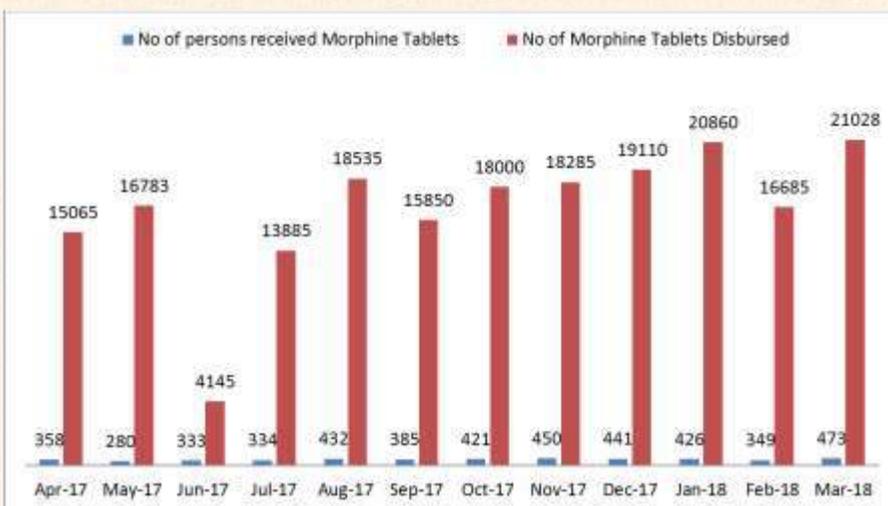
Month Wise Patient in Palliative Care (2017-2018)

1. Skill Development Training Program for patients and relatives: The Department of Palliative Medicine, Dr B Borooah Cancer Institute, Guwahati in collaboration with Inner Vision a Voluntary organization of Duni, Darrang has taken an initiative for financial rehabilitation of the people suffering from Cancer by providing hands on training in Water Hyacinth Craft from 16th to 31st May, 2017. All together 30 nos. of people including patients have participated in the training program. The Training Program was also supported by North Eastern Development Finance Corporation Ltd (NEDFi). Mrs. Rohini Deka, a cancer survivor who was treated in BBCI and who is also well trained in water hyacinth craft was present during the training program to encourage the participants.
2. 3rd Summer Camp in Palliative Care: 3rd Session of Summer Camp in Palliative Care was conducted from 1st July to 14th July 2017 in Palliative Medicine Department. Altogether 9 participants from different walks of life participated in the program.
3. Nurses Training Program: Mr. Sudip Rudra Paul and Mr. Joydip Deb, Staff Nurse of Palliative Medicine Department underwent ELNEC Training Program at Cipla Palliative Care & Training Centre, Pune. This course is administered by the American Association of Colleges of Nursing (AACN) and the City of Hope Medical Center, USA. As a part of the course curriculum they organized a Nurses Training Program and information sharing to the other nursing staffs of the Institute/Registered Nurses from Assam on 24th June 2017. Around 60 nurses from different parts of Assam participated in the program.
4. Hospice Day Celebration: On 13th October 2017 the Department of Palliative Medicine celebrated World Hospice and Palliative Care Day by organizing a live event of continuous painting for two days named "Continuous Painting on Canvas" from 12th to 13th October, 2017. Final year students of Govt. College of Arts and Crafts, Guwahati have participated in the program. Altogether 7 paintings have been completed by them with themes related to Cancer diseases. Later the paintings were auctioned to raise funds for the poor and needy cancer patients of Assam.
5. Workshop on Palliative Care: A two day workshop on Palliative Care was successfully organized by Department Of Palliative Medicine, BBCI in association with Guwahati Pain and Palliative Care Society on 19th & 20th February, 2018. Dr. Robert

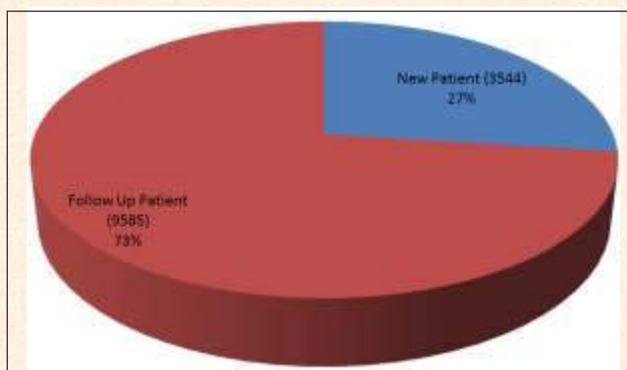
Twycross, Eminent Palliative Care Physician from UK conducted the workshop. Dr Dinesh Chandra Goswami, Secretary Cum CEO of GPPCS spoke on different topics related to Palliative Care. Dr Kabindra Bhagabati spoke on Breaking Bad News and Uses of Morphine. Dr Dipankar Dakua spoke on Assessment of Pain. Mr. Sudip Rudra Paul, Mr Joydip Deb & Ms Anindita Das spoke on Nursing issues of Palliative Care patients. Mr. Tarun Sonowal spoke on social work and advocacy.

6. Training of NEIGRIHMS staff: A social worker from NEIGHRIMS, Shillong underwent advanced training in patient care from 5th March to 10th March, 2018 at BBCI.
7. New staffs in IPCI – Mr Safiur Rahman has joined as Data Manager in Palliative Care in the month of June, '17.

Morphine Consumption in the year of 2017-18



Total patients in the Palliative Medicine Department 2017-18





**Continuos Painting on Campus
by Student of Govt of College of Arts and Crafts, Guwahati
from 12th -13th October, 2017**



**Workshop on Palliative Care at BBCI
from 19th -20th February, 2018**



**ELNEC training Program for North-East Nurses
at BBCI from 31st May -2nd June, 2017**



Workshop on Palliative Care from 19th -20th Feb, 2018



**Skill Development Training program for patients and relatives for financial rehabilitation
(Water Hyacinth Craft Training) from 16th -31st May, 2017**



Report on Clinical and Academic Activities of Medical Physics Division Including DBT Hub

1. Running 2 Years Diploma in Radiotherapy Technology Course under Srimanta Sankardeva University of Health Sciences, 2 years PG diploma in Radiotherapy Technology Course and 3 years MSc. in Radiological Physics course under Gauhati University.
2. Weekly Seminar by Faculties & Students
3. Weekly demonstration class for MD Radiotherapy students.
4. Mr. S.B. Sharma, Medical Physicist cum RSO attended “AMRITA Annual High Precision Radiation Therapy 2017” conference held at AIMS, Kochi from 30th June 2017 to 2nd July 2017.
5. Mr. S.B. Sharma, Medical Physicist cum RSO done observership on Brachytherapy for 1 month from 3rd July 2017 to 2nd August 2017 at TMH, Mumbai.
6. Mr. S.B. Sharma, Medical Physicist cum RSO Delivered speech on “Brachytherapy Planning in Breast Cancer” in Breast Cancer Update CME organized by Dr. B. Borooah Cancer Institute on 16th October 2017.
7. Three Medical Physicist Mr. Pranjal Goswami, Mr. M. Nara Singh, Mr. S.B. Sharma attended ESTRO-AROI Teaching Course 2017 at Medanta Cancer Institute, Gurgaon from 3rd December 2017 to 6th December 2017
8. Ms. Shrutisikha Goswami, Intern Medical Physicist, and Mr. Apurba Kr. Das, Intern Medical Physicist Participated in Poster Presentation in XIII Annual Conference of Association of Oncologists of Nort-East India organized by Dr. B. Borooah Cancer Institute on 9th & 10th February, 2018 and was awarded 3rd and consolation Prize respectively.
9. Mr. Bhaveshwar Yadav, Medical Physicist cum RSO, attended one month training in the department of Radiotherapy, Basavatarakam Indo-American Cancer Hospital & Research Institute, Hyderabad from 01-11-2018 to 30-11-2018.
10. Mr. Shantanu Kr. Mishra, Medical Physicist Presented the paper on “ Review of dosimetry for Total Skin Electron Therapy Using different detector” in the Annual Conference of AMPI held at SMS college, Jaipur on 6.11.2017 which was also published in the Journal of Medical Physics November,2017 (Volume 42)
11. Master Classes by Dr. R A Kinkhikar , Associate professor , Department of Medical Physics , TMH, Mumbai for P.G. Radiotherapy & M.Sc. Radiological Physics students on 10th and 11th April, 2017.

Annual Report for April 2017 to March 2018 [Dental OPD]

The Department of Dental OPD is providing support to the cancer patient and also to the family members of the indoor patients.

Dental OPD in the Dr. B. Borooah Cancer Institute is run solely by Dr Kaberi Kakoti Das and assisted by a Ward boy Amal Deka. This OPD is operational twice a week on Wednesday and Friday. It caters to with Indoor, Out Patient of both General, Reimbursement and Private categories. It provides all the dental procedures required for pre and post cancer treatment as well as follow up and check-up.

Instruments in the Dental OPD are :-

Dental chair	::	1 no.
Ultra Sonic Scalar	::	1 no.
Stabilizer	::	1 no.
Autoclave	::	1 no.
X-ray Machine	::	1 no.
Sterilizer	::	1 no.
Extrodontia Set	::	1 no.
Hand scalar set	::	1 no.

**Number of patients who attended the dental OPD.
(1st April 2017 to 31st March, 2018) :: 3512**

Break-up of treatment done :-

No. of patients that undergone extraction	::	1589
No. of patients prior to Radiation and Chemotherapy	::	3050
No. of patients during and after Radiation	::	2890

No. of new patients in OPD	::	425
No. of patients post operative	::	3151
No. of patients who visited for awareness	::	14
No. of patients from private OPD	::	27

All the above procedures are done on the same patients who visited the Dental OPD for different problems.

No. of patients have been reduced due to staff of the Dental OPD to the old block and was not operational for more than a month.

Ongoing Research :

1. Co-investigator in a Project entitled "Determine salivary microbiome signatures in tobacco and betel quid associated oral cancer of North East India."
2. A case control study on dietary and life style factors for development of oral mucositis in patients receiving external beam radiotherapy (ongoing).
3. A comparative study of head and Neck Cancer with respect to gender, age and morphological location (ongoing).

Activity Report April 2017 to March 2018

Department of Preventive Oncology

Dr B Borooah Cancer Institute, Guwahati

Community Awareness Programs :

- Cancer awareness at Gopinath Nagar on 15/04/2017
- Cancer awareness at Rani on 13/04/2017
- Cancer awareness at Lakhara on 09/05/2017
- Cancer awareness at Panikhaiti on 21/06/2017
- Cancer awareness at Rani on 15/05/2017
- Tobacco sensitization for BBCI security staff on 9th and 10th may 2017
- Tobacco sensitization for BBCI academia students on 19th may 2017
- Cancer awareness at Rani on 16/06/2017
- Cancer awareness and screening camp on 17/06/2017 at Ghograpara Nalbari
- Cancer awareness at Patsala on 17/06/2017
- Cancer awareness at Rani on 17/06/2017
- Cancer awareness and screening program at ulubari health centre on 30/07/2017
- Cancer awareness at Kharguli on 08/08/2017
- Cancer awareness program at Nabagraha on 15/08/2017
- Cancer awareness at Rani on 21/08/2017
- Cancer screening and awareness program at Mangaldoi on 22/08/2017
- Cancer awareness at Baktya on 28/08/2017
- Cancer and Tobacco awareness program at Nabin Nagar on 29/08/2017
- Cancer awareness at NERIM on 30/08/2017
- Cancer awareness and screening program at the Institute of child and Mother welfare Society Guwahati on 08/09/2017
- Cancer awareness at Rani on 18/09/2017
- Cancer awareness at Boromboi on 25/09/2017
- Cancer awareness at Dadara on 28/09/2017
- Cancer awareness at Rotary club on 09/10/2017
- Cancer awareness at Hajo on 10/10/2017
- Cancer awareness at Rani on 16/10/2017
- Cancer awareness at Kailta kuchi 17/10/2017
- Cancer awareness and oral cancer screening program at mailatenki slum on 20/10/2017
- Cancer awareness at Domdoma on 08/11/2017
- Cancer awareness at Rani on 20/11/2017
- Cancer awareness at Patsala on 23/11/2017
- Cancer awareness at Tarun nagar on 25/11/2017
- Cancer awareness at Solmaguri on 01/12/2017
- Cancer awareness at Amtola on 16/12/2017
- Cancer awareness at Rani on 18/12/2017
- Cancer awareness at Amingaon on 22/12/2017
- Cancer awareness and screening in Kulohati on 15/12/2017
- Cancer awareness and screening program at Suwalkuchi on 20th January 2018
- Cancer awareness and screening in gandhimandap on 27/02/2018
- Cancer awareness Bhangagarh on 14/02/2018
- Cancer awareness at Rani on 19/02/2018
- Hafiznagar slum awareness and screening on 20/02/2018
- Cancer awareness drive in Sankar Sanskriti Kendra area, Bhangagarh hillside on 2nd February 2018
- Cancer awareness in areas in narakasur hill top at Mrityunjay namghar and Silikhatol namghor on 3rd February 2018.

Community Oncology programs: In-house in the launching month of “Year of Community Activity”

Target population	Ways of reaching out	Dates
Outdoor patients and attendants	Awareness program , IEC distribution, group discussion	04/08/2017
Attendants OPD and indoor	Awareness program , IEC distribution, group discussion	07/08/2017
Attendants OPD and indoor	Awareness program , IEC distribution, group discussion	10/08/2017
Attendants OPD and indoor	Awareness program , IEC distribution, group discussion	11/08/2017
Attendants of indoor patients	Common cancer screening	14/08/2017
Indoor patients still using tobacco	Group counseling	17/08/2017
Outdoor patients and attendants	Awareness program , IEC distribution, group discussion	18/08/2017
Indoor attendants using tobacco	Group counseling	21/08/2017
Indoor attendants	Common cancer screening	25/08/2017
Attendants OPD and indoor	Awareness program , IEC distribution, group discussion	31/08/2017

Throughout the month, IEC was distributed amongst the attendants through Help desks/interns of the Institute

Year round in-house sensitization program:**Miking :**

About the tobacco harms and prohibitions of tobacco use.

Interaction :

Interns of preventive oncology/MSW trainee/ Volunteers interacting with the attendants to raise cancer awareness and early detection of cancer.

Tobacco cessation:

Tobacco cessation group counseling for attendants of patients

IEC Distribution :**School/college Cancer/Tobacco Sensitization Programs :**

Cancer and tobacco sensitization program at Sankruti Gurukul on 09/05/2017

Cancer and tobacco sensitization program at Kamrup Academy on 8th August 2017

Cancer and tobacco sensitization program at NERIM on 26/08/2017

Cancer and tobacco sensitization program at Gurunanak school on 22/09/2017

Cancer and tobacco sensitization program at ITI on 02/10/2017

Tobacco sensitization for BBCI academia students on 19th may 2017

BSC Nursing sensitization at Dispur Hospital, Guwahati on 28/08/2017

Common Cancer Screening programs:

Oral, breast and cervical cancer(done repeatedly) BBCI cleaners on 17th, 18th 22nd and 23rd May 2017

Screening camp on 17/06/17 at Ghograpara Nalbari

Cancer screening program at ulubari health centre, on 30/07/2017

Cancer screening and awareness program at Mangaldoi on 22/08/2017

Screening program at Suwalkuchi on 20th January 2018

Hafiznagar slum and screening on 20/02/2018

Cancer screening in Sankar Sanskriti Kendra area, 4th February 2018.

Cancer screening in Mrityunjay namghar on 4th February 2018.

Cancer screening in Sankar Sanskriti Kendra area, 4th February 2018.

New joint initiatives of BBCI and Pyramal Swasthya :

Free In-house common cancer Screening at BBCI playground on Saturdays (1st and 3rd) for attendants and public.

IEC material distribution:

IEC stall at OPL (Onco premier league: a cricket match between the staff of BBCI to raise awareness amongst the public) from 8th to 23rd January 2018

IEC material distribution in colleges(Cotton College, Handique Girls College, NEF law college, Arya Vidyapith College, B.Borua College, Pandu College, Guwahati college) of the city (1st to 15th May 2017)

IEC material distribution to the Kamrup rural areas Jalah, Changsari, Abaypurangmahal, Fulung, agyaturi Abaypur, Niz Hajo, Dampur, Dorakahara, Rangmahal, Chaygaon, Suwalkuchi, rangia during this period.

IEC material distribution in Meghalaya on 23/09/2017

IEC material distribution on 17/06/2017 at Ghograpara Nalbari

IEC material distribution at Patsala on 23/11/2017

IEC material distribution at Amingaon on 22/12/2017

IEC material distribution in Kulohati on 15/12/2017

IEC material distribution at Suwalkuchi on 20th January 2018

IEC material distribution at gandhimandap on 27/02/2018

IEC material distribution Bhangagarh area shopping malls on 14/02/2018

IEC material distribution at Rani on 19/02/2018

IEC material distribution at Hafiznagar slum on 20/02/2018

Mass Media awareness:

Awareness Dr.Srabana Misra Bhagabaty gave awareness bites through All India Radio on 7th April (world Health Day) on lifestyle and cancer.

Dr.Srabana Misra Bhagabaty as a penalist in the cancer awareness generation talk show through news 18 on 26 Feb 2018 namely Magic moments with vikram.

Teaching and Training under the Department : Internship trainings

Total MSW internship trainings on cancer prevention and control field work during this period: Four batches

Universities/ institutions sending students for internship under the department during this period:

University of Science and Technology, Meghalaya

North East Regional Institute of Management

NEF law college

Observers :

Dr. Saurav Goswami, final year MD student from MGIMS, Sewagram Community Medicine

January 16th to 2nd February 2018.

Shivani Parihar, B.DES,MITID Pune 7th January to 14th January 2018

Apurba chavan, M.DES, Shristi, Bangalore 7th to 14th January

Niyati Shah, M.DES, Shristi, Bangalore 7th to 14th January

Hector canases, Dr. PH Harvard School of Public Health 7th to 19th January 2018

Stefhanic Kang, USA, Dr.PH,MA Harvard School of Public Health 7th to 19th January 2018

Dominique Roulean, Dr. PH Harvard School of Public Health 7th to 19th January 2018

In-house Hands on training on community based cancer prevention and control(including screening procedures and techniques of common cancers):

1. DESH Project team: Total 15 numbers of recruited manpower including Medical paramedical and supporting staff from 05/10/2017 to 14/11/2017. The training included theory and practical sessions throwing lights on basics of cancer, about the risk behaviors of cancers, and risk reduction. The training also included sessions on organizing and carrying out awareness and screening camps of common cancers, community mobilization and increasing community participation, tobacco cessation, early diagnosis of common cancers using screening tests and procedures, patient follow up, data entry, data management, patient counseling etc.
2. **Staff training** recruited under a Joint Govt. Project with TATA trust and Doctors for you NGO for detection of common cancers in Kamrup 7th February 2018, 27th February 2018, 10th March 2018.

Repeat cervical cancer screening hands on session for DESH medical and paramedical staff on 6th February 2018

Training of the newly recruited medical staff under DESH project : ten days in the month of March on community oncology and early detection of common cancer

5. Internship/block placement course for Medial Social Work: Four batches of interns,two batches from NERIM -North East Regional Institute of Management and) and two batches from USTM(university of science and technology, Meghalaya) has successfully completed their internship during this period.

From the Department as External faculty in trainings/Sensitization :

Dr.Srabana Misra Bhagabaty attended as a resource person State level workshop on tobacco control program in Higher Educational Institute, organized by State Tobacco Control Cell on 16th February 2018.

Dr.Srabana Misra Bhagabaty attended as a resource person “ Police officer orientation course organiosed by police academyat Kahilipara 4th Assam Battalion

Dr.Srabana Misra Bhagabaty attended as a resource person in a workshop for tobacco control organized by consumer protection forum, assam in association with Delhi based NGO Voice on 2nd june 2017 at Panbazar Guwahati on 02/06/2017.

Dr.Srabana Misra Bhagabaty attended as a resource person in Academic program for home care nursing organized by institute of child and mother welfare, ulubari on 29/007/2017

Dr.Srabana Misra Bhagabaty attended as a resource person in BSC Nursing Training

Program on tobacco control and tobacco Cessation organized by District Tobacco Control Cell at Dispur Hospital, Guwahati on 29/08/2017

As a resource person in All India awareness through yubabani on

Departmental Internal faculty in BBCIAcademia

Classes on Cancer prevention and control and public health issues related to Cancer / programs for cancer control and tobacco control .

Project Connected to the Department:

Ongoing:

Preventive oncology is the point of contact and co-ordinating centre at BBCI for DESH project(Detect early, save her and Him): A Joint community based cancer prevention and control project by BBCI and Pyramal Swasthya from December 2017

Project : Adoption of Rani Community health centre as CDC(Cancer Detection Centre)

Project submitted as Principal investigator from the Department

Community based intervention for cancer screening and raising community awareness in a rural population of Kamrup: submitted to TATA trust.

Energy autonomous mobile processes for drinking water purification: An intervention project to control arsenic endemicity: submitted to European Commission

Project submitted as a project community oncology component co-ordinator

Integrative omics and systems biology based approach to identify molecular signatures in Gallbladder Carcinomas from Northeast India and Southern India(ONCOLOGY OUTREACH COMPONENT OF THE PROJECT) :proposal submitted for Comprehensive Cancer Research in NER in Twinning Consortium Mode to ICMR.

Date	Name of the Block	Name of the Village	Total Beneficiary Screened	Suspect Cases (Oral Cancer)	Suspect Cases (Breast Cancer)	Suspect Cases (Cervical Cancer)	Beneficiary Availing treatment at BBCI
13-Dec-17	North Guwahati	Jalah	27	2			1
14-Dec-17		Jalah	28				1
15-Dec-17		Jalah	37				1
18-Dec-17		Changsari	25	2			2
19-Dec-17		Changsari	23				1
20-Dec-17		Changsari	48	2			2
21-Dec-17		Jalah	27	1			1
22-Dec-17		Chandra	36	1			2
26-Dec-17		Changsari	34	1			2
29-Dec-17		Chandra	9	0			1

Date	Name of the Block	Name of the Village	Total Beneficiary Screened	Suspect Cases (Oral Cancer)	Suspect Cases (Breast Cancer)	Suspect Cases (Cervical Cancer)	Beneficiary Availing treatment at BCCI
02-Jan-18	North Guwahati	Abaypur	32				1
03-Jan-18		Abaypur	41				2
04-Jan-18		Abaypur	31				4
05-Jan-18		Rangmahal	21				4
08-Jan-18		Rangmahal	48				4
09-Jan-18		Fulung	27				2
17-Jan-18		Agyaturi	35	1			1
08-Feb-18	Hajo	Niz Hajo	45	3			2
09-Feb-18		Panipara	45	2	3		2
12-Feb-18		Bangalpara	31	2	1		3
13-Feb-18		Ramdia	55	2		1	
14-Feb-18		Nampara	62	2	1		
15-Feb-18		Nampara	55	1			
16-Feb-18		Ramdia	54	1			
19-Feb-18		Ramdia	52				
20-Feb-18		Nampara	54	1			
21-Feb-18		Bongaltola	59	2			
22-Feb-18		Majorkuri	56	2			
23-Feb-18		Majorkuri	33				
26-Feb-18		Koibartola	59	1			
28-Feb-18		New sastar	22				
05-Mar-18	Sualkuchi	Dampur	60				
06-Mar-18		Hogolabori	64	2			
07-Mar-18		Fakirsupa	76	1			
12-Mar-18		Bordampar	64	2		1	
13-Mar-18		Paschim Nowapara	56	1			
14-Mar-18		Pub Nowapara	60	2			
15-Mar-18		Dorakahara	39				
16-Mar-18		Dorakahara	54				
17-Mar-18		Dampur	40				
20-Mar-18		Pasaria	46	2			
21-Mar-18	Rangia	49	2				
22-Mar-18	Azara	68	6				
23-Mar-18	Chaygaon	80	3				
24-Mar-18	Sualkuchi	Siliguri	48	3			
26-Mar-18	Amingaon	Amingaon	75	9			
27-Mar-18	Sualkuchi	Siliguri	31	2			
28-Mar-18	Sualkuchi	Halugaon	66	1			
02-April-18	Sualkuchi	Siliguri	28	2			
03-April-18	Sualkuchi	Halugaon	5	2			
04-April-18	Sualkuchi	Khetri Hardia	47	4			
05-April-18	Sualkuchi	Bamundiya	40	2			
09-April-18	Sualkuchi	Sobanchah	32	1		1	
10-April-18	Sualkuchi	Sobanchah	37	10		1	
12-April-18	Sualkuchi	Gondmow	31	1			
17-April-18	Sualkuchi	Borosupa	43	4		1	
18-April-18	Sualkuchi	Rakshasani	21	4			
19-April-18	Suakuchi	Balartor	33		1		
23-April-18	Sualkuchi	Balartor	37	3	1		
24-April-18	Sualkuchi	Ambari	38	6			
25-April-18	Sualkuchi	Muslimsupa	29	4			
26-April-18	Sualkuchi	Hanpara	31			2	
27-April-18	Sualkuchi	Abhyapur	35				
30-April-18	Sualkuchi	Lah	36	1			
Total			2710	109	7	7	39

Adopting Rani CHC for setting up of Cancer Detection Centre by Dr. B. Borooah Cancer Institute:

A report by the Department of Preventive Oncology, BBCI

There is a big disparity in early reporting, detection and treatment of cancer amongst rural Vs. urban localities throughout the state of Assam. To address this disparity and breach the gaps of detection and awareness, a pilot approach was taken up by Dr. B. Borooah Cancer Institute under which Rani Community Health Centre was adopted by the Institute from 1st January 2015. Initiation of common cancer detection covering the block community consisting total 19000 populations was targeted by setting up a Cancer Detection Centre (CDC) based at the Rani CHC.

Two armed activities undertaken under this adoption approach.

One arm is sensitization of medical paramedical and grass root staff as well as community awareness generation. This is meant for community behavioral changes towards adopting lifestyles for cancer prevention and utilization of cancer screening services at CDC as well as improving service delivery towards early detection of cancer.

The second arm: Every third Monday of each month a team of doctors and paramedical staff from BBCI visit the Rani CDC where OPD based detection activities are carried out by the team.

What we have achieved so far:

A) Human resource development

Medical/paramedical and grass root level Staff Sensitization at CHC and by outreaching Sub/ Anganwadi centres:

At	Nos. Sensitized
Rani CHC	6
Rani CHC	5
Rani CHC	12
Rani CHC	7
Moirapur SC	7
Rani CHC	10
Mekurikuchi Anganwadi centre (under Nargaon SC)	12
Rani CHC	6
Rani CHC	12
Belguri Anganwadi centre (under Moirapur SC)	11
Ishlampur anganwadi centre (under pub dharampur SC)	16
Andherijuli Anganwadi centre (under Rani CHC)	3
Sajanpara Subcentre	8
Natun Rani Anganwadi centre (under Rani CHC)	3
NATUN Rani Anganwadi centre	2
Garopara SC	6
Jyantipur Club (Under Nargaon SC)	4
Rani CHC	5
Rani CHC	6
Rani CHC	3

B) Community Awareness at:

Rani CHC (patients and attendants)
Moirapur
Rani
Mekurikuchi
Moirapur
Rani CHC (patients and attendants)
Mekurikuchi
Rani CHC(patients and attendants)
Rani CHC(patients and attendants)
Belguri
Ishlampur
Andherijuli
Sajanpara
Natun Rani
Natun Rani
Garopara
Jyantipur

Cancer Detection: Detection was carried out at the CHC based Cancer Detection Centre (CDC) by the team of doctors from BBCI. As the CHC staff was already sensitized they could well identify the cases without cancer throughout the month. Only the suspected cases/cancer symptomatic cases were mobilized by the CHC Doctors during the third Monday each month for further expert opinion thereby getting maximum expert service output within limited hours of BBCI team visit to the CDC, Rani.

Considering the increased burden of other non-communicable diseases, BBCI team also screened for Blood Pressure and Random Blood sugar of the beneficiaries to provide added benefit to them.

Total 36 camps are held since inception

Screened for common cancers: 597

Out of the 597 people examined by BBCI team, 355 (59.4%) were female and 242 (40.6%) males. 203(34%) were below poverty line, 120(20%) illiterate. 189(33%) used tobacco in some form. Most common type of tobacco use was betel quid and khaini

239 people were screened for oral cancers. 7 (3%) had been suspected oral cancers. 27 of the examined beneficiaries had premalignant/ potentially malignant lesions of oral cavity.

Out of 355 women examined 13(11%) had breast lumps and 2 (2.2%) were provisionally diagnosed as Ca breast lump.

168 pap smears were taken so far are negative for malignancy and potentially malignant lesions

VIA done in 65 women. 1 found positive.

One of the screened individual was CINII.

Sample collected for HPV kit test was 66 and test done for 34. Out of 34, 17 women were found positive for high risk HPV DNA by automated hybrid capture 2 system.

Incidental provisional diagnosis of other head and neck cancers/ cancer of other body parts/system was: 1 stomach cancer (diagnosed and treated at BBCI as adenocarcinoma), eight suspected oesophageal cancer out of which two came to bbcI for further follow up and diagnosis.

Follow up: Five of the seven detected oral/head and neck cancer cases have reported at BBCI for treatment. Three of them have undergone treatment at BBCI but two defaulted. 14 of potentially malignant cases out of the twenty seven detected reported at BBCI for further follow up and tobacco cessation. Out of one suspected breast cancer got treated at BBCI. Four breast lumps (to rule out malignancy) detected gone further follow up at BBCI. Ca cervix case detected was lost to follow up. HPV positive cases will be followed up further since the presence of HPV DNA is though not a confirmation of ca cervix but yet a high risk.

Observations and Issue under Consideration

Number of beneficiaries increasing year wise :



1. It is seen that year wise Rani CDC is showing a better response from the community in terms of raising community awareness and gradually increasing numbers of beneficiaries seeking common cancer screening services at CDC Rani year wise.
2. Most of the screen positives were either below poverty line or in the lower economy status. That is found to be the main reason of gap in reporting for further follow up.

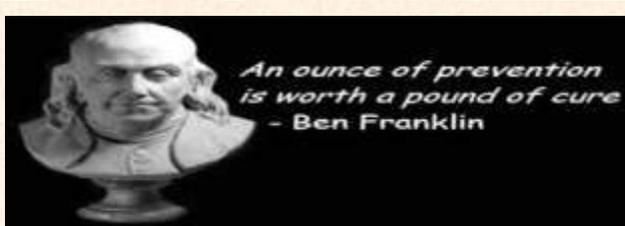
Intervention :

1. The contact numbers of respective Ashas of the areas from were premalignant/suspected cases are heiling will be recorded hereafter. Repeat Asha sensitization is planned.
2. A software development (under process) with more detail about the patients (for better follow up) hence making the data keeping better.

3. Fund raising for the preliminary support of the premalignant cases till need full intervention/ suspected cases till final diagnosis for the coming year (as after final diagnosis of cancer Atal Amrit support will cover the poor).Hence some agencies were contacted by Preventive Oncology Department so that for the coming year the fund support can be given to the poor till final diagnosis done hence addressing the gaps in follow up and early treatment.

Album Glimpse : Preventive Oncology 2017-18

Teaching and training for capacity development in cancer prevention and control.



Adopting Rani CHC for setting up of Cancer Detection Centre Dr B Borooah Cancer Institute

Dr Amal Chandra Katak, Director, Dr Srabana Mishra Bhagabaty and Dr Manigreeva Krishnatreya

In 2016 there were estimated 1.4 million new cancer cases in India in both men and women and 4 million people were living with cancer (within 5 years of diagnosis). Top three cancers that affect Indian population are breast and uterine cervix in women and oral cancer in men. These cancers are referred to as common cancers in the country. The universal screening programme of the government of India is focused on screening of common cancers and in reduction of morbidity and mortality due to these three cancers in the Indian population. However, most of the centers with specialist services for screening are located in the urban areas or in major towns/cities of the country. Thus even after being aware of the need for cancer screening, many people from rural areas are deprived of screening facilities. In January 2015, Dr B Borooah Cancer Institute teamed up with Directorate of Health Services, Government of Assam to start a rural Cancer Detection Center on once a month basis at Rani Community Health Center (CHC), which is a Sub-division in Kamrup District of India. Rani Sub-division has a population of 19,000, as per the last census of 2011. According to Dr P Pathak, Sub-divisional Medical Officer or In-Charge of the rural Rani CHC, not many common cancer patients are diagnosed from the Rani Sub-division, but earlier to the start of the CDC patients were diagnosed in very advanced stages of common cancers, and there was complete lack of awareness among the rural population about cancer. The prevalence of tobacco consumption in the population of Rani Sub-division is very high, and this is coupled with poor oro-dental and genital hygiene due to lack of awareness, further said Dr Pathak. Thus, the vulnerable population was at a higher risk of developing oral and uterine cervical cancers. It was not entered earlier due to lack of specialists serving at the government run CHC and there are no private clinics in the Rani Sub-division.

Rani CDC has received excellent feedback from patients and their attendants. Medical Social Workers of the institute closely follow the patients diagnosed with cancer at Rani CHC, from patient registration to start of the treatment and thereafter for check-up, like a “patient navigator”. This has helped to send a positive message among the rural population of Rani. The biggest challenge in the initial days was that, individuals refused to attend for common cancers screening, especially for uterine cervical cancer. This was mainly due to fear, stigma, and myths associated with cancer. Now, with awareness campaign by involving female Health

Workers (ASHAs), few women are turning up for screening of uterine cervical cancer. But, still we need to go few extra steps to improve the participation of women for uterine cervical screening. One of the steps we have recently undertaken is to link the uterine cervical cancer screening with general gynecological conditions in symptomatic women, where Pap smears can be taken. Now, gradually the participation of women is rising. Our approach is sustainable in the long term for two reasons. First is utilization of government run CHC by a government run organization (BBCI). Secondly, we also aim to train health workers, nurses, and general physicians posted at the Rani CHC for screening of common cancers. The Non-Communicable Disease section at the under the National Health Mission has the mandate to collect information of cancer patients. Thus setting up once a month basis rural CDCs representing the entire country is the need of the hour for cancer policy framework, and better cancer control by early diagnosis, provide access to treatment, and follow-up after treatment. The findings and observations from the Rani CDC are generalizable.

Our Rani CDC is a value for money project. We are utilizing services of doctors/experts from a tertiary care center for screening, and nurses and health workers of government run CHC for providing technical support. The tools or basic equipment are carried from the institute and one room with screen facility and stool for breast and oral cancer screening, respectively are required. The labor room or minor OT facility, when not in use is used for screening of uterine cervical cancers in women. Essentially, there are no costs involved for running the Rani CDC. The only cost is the transportation charge in one six-seated diesel vehicle, which is less than INR 1000 (around 12 €/11£). The vehicle is also used for other community-based cancer control activities carried out by the BBCI from time to time.

The impact of our initiative can be seen by the small number of patients who were diagnosed early/incidentally of common cancers, which in all probabilities would have been diagnosed at later stages in the absence of the CDC. The focus of the CDC is on detection of potentially malignant lesions and presence of high risk HPV in the vulnerable population for cancer prevention. Focus is also to spread awareness on cancer, its risk factors, and preventive strategies in the population at risk.

Bio-Medical Waste Management at Dr B Borooah Cancer Institute, Guwhati

“Bio-Medical waste in hospital came from Operation theatre, wards, dressing room, injection room/chemo room, intensive care unit, and laboratory etc. @ 0.3 kg to 3.5 kg/bed/day in form of solid waste.

Dr B Borooah Cancer Institute is a 210 bedded Hospital which generated on an average @ 1.0 kg/bed/day total 200.0kg of solid bio medical waste per day. Out of which @ 80% is noninfectious waste i.e. 160.0 kg which is directly dispose to Municipal garbage and @ 20% is infectious waste i.e. 40.0 kg which are generated in different categories. For management of the above the institute has installed one Hydroclave unit on 13.09.2008 and one incinerator on 10.01.2012. Since its installation the Institute has been treated the following kgs of Bio-medical waste (infectious), Annual Report enclosed.

A] Hydroclave

Years	Months												Total in kg
	Jan in kg	Feb in kg	Mar in kg	Apr in kg	May in kg	Jun in kg	Jul in kg	Aug in kg	Sep in kg	Oct in kg	Nov in kg	Dec in kg	
2008	000	000	000	000	000	000	000	000	000	255	278	369	902
2009	312	397	506	397	483	527	431	390	211	343	201	254	4452
2010	138	267	238	115	182	325	412	469	552	345	627	461	4131
2011	451	326	443	484	321	422	500	437	526	355	495	495	5255
2012	480	610	550	550	535	540	530	390	265	490	500	595	6035
2013	475	500	545	545	393	465	608	536	586	548	551	628	6380
2014	601	553	601	595	670	625	618	644	672	693	641	667	7580
2015	600	619	753	821	735	742	743	715	692	713	693	730	8556
2016	717	682	722	713	747	755	706	726	696	703	654	672	7821
2017	679	674	720	740	742	750	702	724	691	705	661	700	8488.0

**Total : 60,272 kg
Say : 60.272 Ton**

B] Incinerated

Years	Months												Total in kg
	Jan in kg	Feb in kg	Mar in kg	Apr in kg	May in kg	Jun in kg	Jul in kg	Aug in kg	Sep in kg	Oct in kg	Nov in kg	Dec in kg	
2012	37	18	0.0	26	22	26	44	59	47	58	40	39	416
2013	48	60	73	47	50	37	58	60	22	52	26	53	586
2014	54	55	70	56	45	79	76	69	67	77	69	78	719
2015	78	98	79	79	79	89	80	100	77	76	84	86	1005
2016	84	85	85	88	78	00	39	67	85	75	93	85	779
2017	87	78	78	85	80	88	84	74	91	79	95	84	1003

**Total : 4,593 kg
Say : 4.593 Ton**

Occupancy Report of the patient for the Last 7 years (i.e. From 2010 to 2017) of the Jironi Ghar (Dharmasala) building at Dr. B. Borooah Cancer Institute, Guwahati-16, Assam

Sl. No.	For the year	CABIN (Patient in Nos)	DORMITERY (Patient in Nos)	TOTAL (Patient in Nos)
1	2010-2011	301	1376	1677
2	2011-2012	246	1240	1486
3	2012-2013	276	995	1271
4	2013-2014	241	1250	1491
5	2014-2015	214	1095	1309
6	2015-2016	234	766	1000
7	2016-2017	254	1119	1373
8	2017-2018	227	963	1190
	Total	1993	8804	10797



27th November 2017 on day of take over of BBCI by DAE/TMC

Monthly Report Blood Bank

(April 2017-March 2018)

Department of Pathology, Dr B Borooah Cancer Institute, Guwahati

Month	Blood Collection	Issue of Whole Blood	Issue of PCV	Issue of Platelet	Issue of FFP	Serology	Grouping (patient & Donor)	Reactive of Donor Collection
April 2017	178	167	0	0	0	178	342	HIV- 0, Hepatitis B- 5 Hepatitis C - 3, MP- 0 VDRL- 1
May 2017	238	220	0	0	0	238	459	HIV- 0, Hepatitis B- 0 Hepatitis C - 2, MP- 0 VDRL- 2
June 2017	117	197	0	0	0	117	295	HIV- 0, Hepatitis B- 2 Hepatitis C - 2, MP- 0 VDRL- 2
July 2017	44	49	25	0	0	44	116	HIV- 0, Hepatitis B- 0 Hepatitis C - 0, MP- 0 VDRL- 0
August 2017	319	164	38	2	6	319	522	HIV- 0, Hepatitis B- 1 Hepatitis C - 3, MP- 0 VDRL- 0
September 2017	275	164	48	0	0	275	446	HIV- 0, Hepatitis B- 3 Hepatitis C - 3, MP- 0 VDRL- 0
October 2017	315	150	118	9	4	315	442	HIV- 1, Hepatitis B- 0 Hepatitis C - 1, MP- 0 VDRL- 3
November 2017	264	126	138	40	138	264	387	HIV- 1, Hepatitis B- 0 Hepatitis C - 1, MP- 0 VDRL- 1
December 2017	268	204	64	20	64	268	411	HIV- 2, Hepatitis B- 0 Hepatitis C - 3, MP- 0 VDRL- 2
January 2018	230	162	68	0	68	230	432	HIV- 2, Hepatitis B- 2 Hepatitis C - 1, MP- 0 VDRL- 1
February 2018	255	239	0	0	0	255	451	HIV- 0, Hepatitis B- 4 Hepatitis C - 2, MP- 0 VDRL- 1
March 2018	311	214	45	0	8	311	556	HIV- 2, Hepatitis B- 5 Hepatitis C - 3, MP- 0 VDRL- 1
Grand Total	2814	2056	544	71	288	2814	4859	HIV- 8, Hepatitis B- 22 Hepatitis C - 23, MP- 0 VDRL- 14

Donor Organization List who conducted VBD Camps in Last Financial Year April 2017 to March 2018
Name of the Blood Bank : Dr. B. Borooah Cancer Institute, Gopinath Nagar, Guwahati-781016

Sl. No.	Date	Name of Door Organization	Address with Pin No.	Contact Person Name & Phone No.	Email Address	Unit Donation of Blood
1.	04/08/2017	Udayan Foundation	Guwahati	Nasima Ahmed # 9706483347 (M)	--	12 nos.
2.	15/08/2017	Old Boys Association	Old boys Association Sainik School, Goalpara, Diganta Gogoi General Secretary H.No.4, Karbi Path Adjacent to percept Networks, Behaind Gita Nagar, Police Station, Mother Teresa Road, Ghy-24	Nasima Ahmed # 9706483347 (M)	info@obassg.com www.obassg.com	52 nos.
3.	15/09/2017	Udayan Foundation	Guwahati	Nasima Ahmed # 9706483347 (M)	--	33 nos.
4.	08/12/2017	HDFC Bank	Christianbasti Guwahati	Rajiv Das # 8486030556 (M)	--	59 nos.
5.	13/04/2018	Maa-Deota NGO	Guwahati	Santunu Das # 9864061688 (M)	--	15 nos.



27th November 2017 on day of take over of BBCI by DAE/TMC

Report on Media Coverage of BBCI 2017-18

Dr. B. Borooah Cancer Institute, Guwahati

Dr. Bhubaneswar Borooah Cancer Institute, Guwahati has immensely contributed towards cancer treatment and research for patient population from the entire North East India. Cancer awareness among the lay public through print and electronic media is necessary to improve outcomes, and more importantly for its prevention and early detection.

The mainstream print and electronic media have provided support and engagement with the BBCI for cause of cancer prevention and control. Despite the associated myths of cancer, media has highlighted important milestones, research activities, and recreational programs hosted by the institute. In the financial year 2017-18, the following events of the institute took to the centre stage and were duly highlighted in the main stream media of the State and North east India.

BBCI Collaborates with International Study.

Dr Bhubaneswar Borooah Cancer Institute, Guwahati has collaborated with the international study HPV-AHEAD group to see the association between high risk Human Papilloma Virus and head and neck cancers, namely, oral cavity and throat cancers. Dr Amal Chandra Kataki, director, BBCI and Dr Ashok Kumar das, Associate Professor of Head and Neck Oncology Department at BBCI participated in the international study.

BBCI takeover.

5th April, 2017: The center has proposed to take over the institute, said DoNER Minister Dr Jitendra Singh in a reply to a question by R P Sharma raised in the Lok Sabha. A note was submitted to the Cabinet Secretariat on March 30.

Rise in alcohol, tobacco abuse, 'Alcohol and tobacco major public health threats'

'Urbanization, changing lifestyle boosting non-communicable diseases'

7th & 9th April 2017: On the eve of the World health Day, BBCI informed the public through media report that,

urbanization, globalization, and changing life style and habits have raised the number of non-communicable diseases. Dr Amla Kataki, Director, BBCI said in the press report, reduction of alcohol and tobacco consumption is important from public health perspective. In the same media coverage, Dr Manigreeva Krishnatreya of BBCI highlighted the role of alcohol and tobacco as risk factors for cancer.

Pre-Rongali Bihu Celebrations at BBCI.

13th April 2017: Pre-Rongali Bihu celebration was organized at BBCI in association with GLP social circle. The function was attended by patients and their attendants, staff, and doctors of the institute among other members from the public.

BBCI to offer highest degrees, DM in Medical Oncology at BBCI, Super specialty DM in Medical Oncology

23rd and 24th April 2017: In a significant development Medical Council of India approved the start of super specialty course in Medical Oncology at BBCI, making it the first institute in the entire eastern India to offer this course. Dr A C Kataki, Director said there is acute shortage of manpower in oncology. He further said, BBCI is committed to train human resources needed oncology care in the North East India and develop BBCI as a center of excellence. BBCI is also running post-graduate fellowship programs in association with Tata Memorial Center, Mumbai in different specialties of oncology care.

Cancer hospital conducts rare limb treatment procedure, BBCI successfully carries out isolated limb infusion.

4th May 2017: A team of experts at BBCI comprising of surgical oncology, radiation and radiology departments, and anesthesiology performed an Isolated Limb Infusion (ILI) for the first time. In this procedure chemotherapy is directly infused to the tumor in the limb, bypassing the need to give intra-venously and hence, there are no side effects of chemotherapy. The procedure is vital in a country like India, where there are no quality prosthetic limbs.

Free lunch for cancer patients, Free lunch to cancer patients at BBCI

10th & 15th May 2017: GLP social circle in association with Shri Hanuman Sewa Nidhi Trust has announced a scheme, Annakut, to provide free lunch to cancer patients and their families attending outpatient department of BBCI. The programme was inaugurated in memory of Late B P Saraf on his 5th death anniversary. Shri Samir Sinha, Commissioner and Secretary Health & family Welfare attended the program as the Chief Guest. The program was also attended by Shri Mukul Chandra Gogoi, Secretary, Health & family Welfare as the Guest of Honor, and Dr R Bhuyan, Director, Health and Family Welfare Services, Govt of Assam and Shri Shantikam Hazarika, member, Management Council of BBCI as distinguished guests. Dr Amal Chandra Kataki said, nutritional support is crucial in cancer treatment and “Annakut” scheme is an endeavor in this regard.

BBCI to conduct research on pre-radiotherapy counseling.

14th May 2017: BBCI will conduct a research on pre-radiotherapy counseling of patients with head and neck cancer, and its impact on the quality of life and radiation related toxicity. The study will use Europe Organization for Research and Treatment on cancer quality of life questionnaire. Dr Amal Chandra Kataki said, treatment with external beam radiotherapy results in some side effects which at times force a patient to drop out during the course of treatment. Thus, pre-radiotherapy counseling is helpful.

Crafts training for patients

16th May 2017: The department of Palliative Medicine at BBCI in association with an NGO Inner Vision, launched two week water hyacinth craft training programme for cancer patients at the hospital campus. The training programme taught patients with craft skills. Inner Vision collected the items produced and sold them through outlets.

DAE to take over B Borooah Cancer Institute, BBCI to benefit from DAE handover, DAE set to take over B Borooah Institute, BBCI takeover by DAE to augment manpower, infrastructure

7th, 9th and 12th June 2017: The Union Cabinet under the Chairmanship of the Hon'ble Prime Minister of India Shri Narendra Modi approved the takeover of BBCI by the Department of Atomic Energy and bringing the administration under the Tata Memorial Centre, Mumbai. The welcome decision came at a time when the number of cancer cases was rising in the North East India and there are limited cancer treatment facilities in the region. Dr Amal Chandra Kataki, Director, BBCI hailed this move. Dr Kataki said the takeover is a historic moment for cancer patients of the region and from now onwards it will allow BBCI to function in a better way, as earlier project-mode funding was a big constraint for smooth functioning of the institute. There

was always a sense of uncertainty, Dr Kataki further added.

Cancer Research Foundation anniversary.

11th June 2017: cancer Research Foundation, India observed its 2nd Foundation day at the auditorium of BBCI. Dr Prashant Mathur, Director of National Center for Disease Informatics and Research, Bengaluru delivered the Foundation Day Oration. Dr Mathur spoke on policy responses required for strengthening cancer control.

'Lokabandhu' Selected to Film Fest in Canada

1st July 2017: 'Lokabandhu'- a biopic on the life of Dr Bhubaneswar Borooah has been selected to Canada's Rezina International Film Festival. The biopic is produced by Dhiraj Kashyap.

Improving people's educational levels can lower cancer incidence: study.

2nd July 2017: A study by team of researchers from BBCI showed that improving education levels of the population will lower the burden of head and neck cancer in the state. The Hospital Based study included 1428 head and neck cancer patients. Dr Amal Chandra Kataki, Director of BBCI emphasized on imparting health education on ill effects of tobacco as part of school curriculum. Dr Kataki said, this is a way forward to curb the menace of tobacco. The study was published in the Clinical Cancer Investigation Journal.

CME programme on oncology organized, Medical education programme held.

10th and 12th July 2017: A two-day national continuing medical education program on oncology was held at BBCI in association with Indian Society of Oncology (ISO). Dr. J K Singh, President of ISO delivered the welcome address. Dr Amal Chandra Kataki, spoke on the overview of cancer treatment facilities in the north east India. Around 80 doctors and health care professionals from the entire North East India attended the CME program.

Training on cancer epidemiology and biostatistics at BBCI, BBCI training ends.

14th July 2017: Two-week summer training on cancer epidemiology and biostatistics organized by the Department of Cancer Registry, Epidemiology and Biostatistics concluded at BBCI. The summer training was attended by masters' and doctoral students from Gauhati University, Dibrugarh University, and Assam down town University. Dr Amal Chandra Kataki, Director of BBCI stressed upon the need of manpower trained in the field of cancer prevention and control. “Cancer Registry and Epidemiology is the first step in implementing cancer prevention and control program” further said Dr Kataki.

Global tobacco survey findings hailed, BBCI hails GATS findings on tobacco use.

15th and 17th July 2017: The management of BBCI had appreciated the findings of Global Adult Tobacco Survey (GATS) 2016-2017. The GATS report showed a reduction in the tobacco consumption in the country by 6%. The GATS report was released by the Ministry of Health & Family Welfare, Govt of India.

Survivors to spread cancer awareness.

27th July 2017: BBCI initiated a practice of issuing certificates of appreciation to long-term cancer survivors. This is in a bid to raise cancer awareness and build a group of which can boost the morale of those affected by the disease. Dr Amal Chandra Kataki said, people should know of cancer survivors so they are encouraged to fight this disease.

World Head and Neck Cancer Day today, Head and Neck Cancer Day

27th and 28th July 2017: The Department of Head and Neck Oncology observed World Head and Neck Cancer Day (WHNCD) at BBCI. In India, around 30% of all cancers occur in the head and neck region. Dr Amal Chandra Kataki, Director of BBCI stated, celebration of WHNCD would create the necessary awareness about its prevention and early diagnosis.

Year of Community Oncology launched at BBCI, Cancer control programme launched.

1st August 2017: BBCI launched the Year of Community Oncology from 1st August 2017 to 31st July 2018. With the launch of Community Oncology program, the cancer prevention and control activities of the institute will be intensified. The launching ceremony was attended by Anuradha Sarma Pujari, Editor, Sadin, Pranoy Bordoloi, Managing Editor, DY365, and Ramanuj Dutta Choudhary, Deputy Editor, Assam Tribune.

Nursing programme gets underway at B Borooah Cancer Institute, Oncology Nursing Programme at BBCI

17th August 2017: BBCI in association with the National Cancer Grid organized three-day Oncology Nursing Program at the institute. The Oncology Nursing program was attended by trainees from the entire Northeast India. The programme covered various topics like nursing management of cancer patients, patients taking chemotherapy and under palliative care, surgical stoma care, communication strategy of nurses with patients, and rehabilitation. Guest faculties were from all over India.

Drawing competition among childhood cancer patients.

2nd October 2017: On the occasion of Gandhi Jayanti, a drawing competition was held among childhood cancer

patients. Prizes were distributed to all the children who participated.

Breast Cancer Update from Oct 15, BBCI observes Palliative Care Day

13th October 2017: BBCI in association with Adley Oncology nursing organized a Breast Cancer Update. The key note speaker was Dr M Hartmann from National University Hospital of Singapore. BBCI also celebrated World Hospice and Palliative Care Day. Dr Amal Chandra Kataki, Director of BBCI highlighted the importance of palliative care service.

Smoked meat causes cancer in NE, Obesity key contributor to high cancer rate in Kamrup, 'Tobacco products, obesity and contagion root causes of cancer', Tobacco products, obesity and contagion are root causes of cancer: Dr Badwe

25th October 2017: Dr R A Badwe, Director of Tata Memorial Center, Mumbai delivered the 8th Dr K C Borooah Foundation Day Oration on 'Cancer Control in India'. Speaking on the occasion, Dr Badwe expressed serious apprehensions about obesity-related issues with children across the country. "Tobacco is undoubtedly the main risk factor for cancer, but along with that obesity and infection due to poor personal hygiene is contributing immensely" Dr Badwe said. The idea of National Cancer Grid is to bring affordable cancer care facilities at the door step of every household in India, further added Dr Badwe.

MoU on treatment of childhood cancer patients, Assam Gas Company signs MoU with BBCI, Children cancer care pact inked.

7th November 2017: Cancer care in children has received a big boost with the signing of an MoU between Assam Gas Company and BBCI. The initiative is aimed at supporting treatment of underprivileged childhood cancer patients from Assam at BBCI. A budget of 1.5 crore has been fixed for the year 2017-18. Dr Amal Chandra Kataki said that, the new scheme will provide huge relief toward many families of childhood cancer patients. The event was attended by Surjya Tamuli, Kunal Mazumdar, Moyurima Goswami Baruah, Dolonchapa Devgupta, and CJ Saund all from Assam Gas Company.

Mobile unit to detect cancer in Kamrup.

14th November 2018: Dr B Borooah Cancer Institute in collaboration with Piramal Swasthya launched a community-based cancer screening program, DESH (Detect Early Save Her/Him). The program aims to screen the population of Kamrup for early detection of oral, breast and uterine cervical cancers through mobile cancer screening van and awareness programs.

Dr B Borooah Cancer Institute: A reflection

An editorial column by Dr. Amal Chandra Kataki on 28th November 2017: Published in The Assam Tribune, Purbanchal Prahari, and Amar Axom on the occasion of taking over of Dr. B Borooah Cancer Institute by the Department of Atomic Energy, Government of India

BBCI now a central institute under Dept of Atomic Energy, Better care promise at BBCI, BBCI a central institute now on.

28th November 2017: In a historic development, on this day, BBCI was christened as a central institute under the Department of Atomic Energy, Government of India under administrative control of Tata Memorial Center, Mumbai. The landmark decision will pave the way for affordable cancer care in this part of the country, and also ensure up-gradation of the institute in the near future. Dr R A Badwe, Director, TMH, Mumbai and Mervin S Alexander, Joint Secretary, Department of Atomic Energy, Govt of India were present at BBCI on this occasion.

Lack of awareness proving fatal.

21st December 2017: An alarming number of cancer cases in kids go undetected in the State. Dr. A C Kataki, Director, BBCI told *The Sentinel* in an exclusive report that, even though recent advances in the treatment of childhood cancer have improved remarkably, many childhood cancer patients remain undetected due to lack of awareness about its symptoms and signs among the masses. Every year, around 300 childhood cancer patients are treated at BBCI, further added Dr Kataki.

BBCI bates for cricket

31st December 2017: BBCI has announced its first ONCO Premier league from the first week of January. The theme of the league was "Abki Bar Cancer Ki Haar". The league comprised of eight teams.

Anti-tobacco crusader hail SC decision on pictorial warning.

10th January 2018: The Supreme Court of India stayed an order which struck down a regulation that tobacco products must have pictorial warning covering 85% of space. The decision reiterates Indian Government's commitment to public health and remains a leader in tobacco control globally, said Dr Ashok Kumar das, Associate Professor of Head and Neck Oncology, BBCI and Tobacco Control Activist.

Cancer awareness drive at Sualkuchi.

19th January 2018: A cancer awareness drive at Sulakuchi in Kamrup was held jointly organized by BBCI and Sualkuchi Yuva Shakti Association. The drive was inaugurated by Dr Amal Chandra Kataki, Director, BBCI.

Advanced diploma course on Patient navigation launched

20th January 2018: Tata Memorial Center, Mumbai in association with Tata Institute of Social Sciences launched for the first time in India an advanced Patient navigation course "Kevat". The course intend to create a specialized workforce of trained professionals to help patients manage their medical experience, coordinate care and assist them with navigation of complicated and multi-step medical systems.

Rise in prevalence of tobacco use in state, BBCI's anti-tobacco event ends, Conference sheds light on rise in cancer cases in State, Oral cancer to be major public health problem in State.

10th, 11th, & 14th February 2018: The 13th Annual Conference of the Association of Oncologists of North East India (AONEI) was held at BBCI. The theme for this year's conference was tobacco related cancers. The Chief Guest of the conference inauguration was Dr Prashant Mathur, Director of National Center for Disease Informatics and Research, Bengaluru. The AONEI Oration was delivered by Dr Pankaj Chaturvedi, professor of Surgical Oncology, TMH, Mumbai. He spoke about tobacco related cancers in India and the problem. Dr Chaturvedi highlighted the growing burden of oral cancer in India.

Centre lauds capacity development in oncology at BBCI, Union minister assures of better cancer treatment facilities in NE.

17th February 2018: Union Minister for Health & Family Welfare Ashwini Kumar Choubey paid a visit to BBCI and interacted with doctors, officials and employees of the institute. Minister Choubey appreciated the establishment of Power Grid Capacity Development Centre in Oncology and further assured all possible help to up-grade the infrastructure facilities for cancer treatment in the North East India.

Workshop on palliative care held.

26th February 2018: A two-day workshop on Palliative Care was held at BBCI in association with Guwahati Pain and Palliative Care Society. Dr Robert Twycross, palliative care Physician from the UK was Guest faculty for the Workshop. Dr A C Kataki, Director, BBCI appreciated the Department of Palliative Care at BBCI on the progressive work by the team.

Centre's takeover to boost B Borooah Cancer Institute.

11th March 2018: In an exclusively report in The Assam Tribune, the advantages of takeover of BBCI by the Government of India was highlighted. The advantages of the takeover are; improved patient care, Up-gradation of infrastructure facilities, and furthermore all the employees of BBCI will come under the payroll and other benefits of

Central Government. Also, staff shortages will be addressed by this takeover.

Meet discuss prevention, treatment of breast cancer.

28th March 2018: A 'CME on Breast Cancer' was held at BBCI jointly organized by Piramal Swasthya management and Research Institute. Dr Mehra Golshan from Harvard Medical School and Medical Director, Dana Faber Cancer Center, USA spoke on "community based cancer preventive strategies for breast cancer".



27th November 2017 on day of take over of BBCI by DAE/TMC

Distinguished Guests at Dr. B. Borooah Cancer Institute, Guwahati in the year of March 2017- April 2018

Sl No.	Date	Name of the Guest	Programme / Occasion
1	03.01.17	Shri M P Agarwal, Managing Trustee, Nirmal & M P Agarwal Trust	Donation of Maruti Van for Community Based Cancer Control Programme
2	04.01.17	H.E. Shri Banawarilal Purohit, Hon'ble Governor of Assam	Foundation of POWERGRID capacity development centre in oncology. Award of Excellence presented to Shri G L Agarwal, Chairman, GLP Social Circle, Guwahati
3	05.01.17	Dr Sharmila Banerjee, Head, Radiation Medicine Centre, BARC, Mumbai	Lecture on Overview of therapeutic radiopharmaceutical programme in India with special reference to RMC:Options and Availabilities'.
4	04.02.17	Dr P G Subramaniam	National Seminar on Diagnostic Pathology 2017 (World Cancer Day)
5	04.02.17	Dr Sumeet Gujral	-do-
6	04.02.17	Dr N A Jambekar	-do-
7	14.02.17	Dr M Dinesh, Former Prof. & HoD, Radiation Oncology, AIMS	Neoadjuvant Strategies in Cancer Care – A Changing keleidiscope
8	02.03.17	Prof. G K Rafti, Head, National Cancer Institute, India	Inauguration of Nutritional Support Programme for Paediatric & Paliative Cancer patients
9	02.03.17	Dr Prashant Mathur, Director, National Centre for Disease Informatics & Research, Bangalore	- do -
10	03.03.17	Dr Mahesh K Goenka, Director, Institute of Gastrosciences and Liver, Apollo Gleneagles Cancer Hospitals, Kolkata.	GI Malignancies & Endoscopy – Gastroenterologist Perspective
11	03.03.17	Dr Saikant Gupta, Director, Dept. of Surgery, Apollo Gleneagles Cancer Hospitals, Kolkata.	Cytoreductive Surgery & HIPEC for peritoneal surface Malignancies
12	03.03.17	Dr Amit Dutta Dwary, Medical Oncologist, Apollo Gleneagles Cancer Hospitals, Kolkata.	Gall Bladder Carcinoma
13	15.03.17	Dr G Sahani, Cell-in-Charge of Radiotherapy, RSD, AERB, Mumbai	Lecture on Radiation Safety Aspects in Radiotherapy
14	17.03.17	Dr Debnarayan Dutta, Head, Dept. of Radiation Oncology, AIMS, Kochi	Academic Excellence oration of BCCI Chase your dream Cyber knife Radiosurgery Indication & Evidences Signing of MoU between BCCI & AIMS
15	27.03.17	Dr R A Badwe, Chairman, MC	MC meeting & Release of Annual Report 2015-16
16	31.03.17	Dr Gagan Saini, Consultant Radiation Oncologist, Forties Hospital, Noida	Management of Radiation induced Fibrosis and Mucositis and Stereotactic Body Radiotherapy (SBRT)

Sl. No.	Date	Name of the Guest	Programme / Occasion
17	17.04.17	Dr Siddhartha Laskar, Radiation Oncologist, TMH	Delivered guest lecture : Hodgkin's Lymphoma: Redefining the Role of Radiotherapy
18	01.07.17	Dr Pradip Kumar Choudhury, Former Superintendent (Admin.), BBCI	Summer Training Programme in Cancer Registry, Epidemiology and Palliative Care, BBCI.
19	17.07.17	Dr. Amitabha De, Director, IIM Shillong	For inspect all the NEC funded institutions in the North East.
20	18.07.17	Dr Shailendar Hegde	Community Based Cancer Screening Programme
21	21.07.17	Dr Ujwal Bhattacharyya, Associate Professor cum Principal, College of Physiotherapy & Medical Sciences, Guwahati	An Overview of Work Related Musculoskeletal Disorders
22	21.07.17	Dr. Patit P Bhowmick, Qiagen India	Seminar on Women's Health and Personalized Healthcare
23	27.07.17	Ms Ashima Sarin, New Delhi	Delivered lectures on World Head & Neck Cancer Day
24	27.07.17	Sri Deepak Sharma, Prag News	World Head & Neck Cancer Day
25	27.07.17	Sri Nitumoni Saikia, Pratidin Times	World Head & Neck Cancer Day
26	27.07.17	Sri Gautam Sharma, Deputy Editor, Amar Asom	World Head & Neck Cancer Day
27	07.09.17	Dr. Rajesh Dikshit, Prof. & Head Centre for cancer epidemiology, TMH, Mumbai	Genetic Epidemiology & life style factors for Gall Bladder Cancer
28	11.10.17	Dr Kailash Sharma, Director (Academics), TMH, Mumbai Mr T Anbumani, Former CAO, TMH, Mumbai	Interaction with all the Doctors & Medical Physicists of BBCI
29	25.10.17	Dr R A Badwe, Director, TMC, Mumbai	Delivered "Dr K C Borooah Fondation Day Oration" of BBCI
30	26.10.17	Dr R A Badwe, Director, TMC & Mr M Alexander, Jt. Secy (A & A), DAE, GoI	Inaugurated the PG Hostel, BBCI
31	06.11.17	Project Aparajeya	Mou Between BBCI & Assam Gas Company Ltd., Duliagan
32	16.02.18	Shri Ashwini Kumar Choubey, Hon'ble Minister of State, Ministry of Health & Family Welfare, Govt. of India	Visited to BBCI
33	20.02.18	Padmashree Dr R A Badwe	Delivered guest lecture on 22.02.18
34	27.03.18	Dr Mehra Golshan	New modalities of treatment of Breast Cancer in Low and Middle Income Counties. Community Based Cancer Prevention Strategies in Low and Middle Income Countries.

Photo Gallery



Speaker of Assam Legislative Assembly
Shri Hitendra Kr. Goswami



Shri Ratan Tata & Chief Secretary of Assam



Dr. Devi P. Sethi and Smt. Kiran Mazumdar Shaw



Dr. D. D. Deshpande, TMH, Mumbai



Dr. Soong Yoke Lim, National Cancer Centre, Singapore



RAP-Cancer Meeting NCDIR, Bangalore

Photo Gallery



Hon'ble Governor of Arunachal Pradesh, Dr. B. D. Mishra



Director of TMC, Kolkata



Presentation of DPRC Award
by Hon'ble Minister of Assam, Shri Tapan Kr. Gogoi



Dr. Biswajit Sanyal, Director, Mahavir Cancer Sansthan, Patna



Director Academic, TMC, Dr. Kailash Sharma



Director, NCDIR, Dr. Prasant Mathur

List of Donors for the year of April 2017- March, 2018

Sl. No.	Name of the donated item (s)	Name of the Donor / Party with date	Quantity
1	Rs.50,000/-	Smti. Arunima Pathak, Ganesh para, Chaygaon, Guwahati-25 on 08.03.17 in memory of Late Kalpana Kumari Kalita.	
2	Chairs (Plastic) 50 nos.	Shri Ravi Surekha, Prabhu Shyam Charitable Trust, Unit-2, 8 th Floor, Sethi Trust Building, Bhangagarh, Guwahati-5, Phone:9435057000	50
3	Suction machine	Shri Somnath Chakraborty, Udaynagara Path, Bye lane-1, H No.7, Fatashil Ambari, Guwahati – 781025, Phone:9707038657, Email:somnathchakraborty@gmail.com in memory of her father Late Gurudas Chakraborty on 13.05.17	1
4	Suction machine (1 manual, 1 electric)	Mrs Ranjan Chakraborty, Kanaklata Path, Bharalupur, House No.28, Lachitnagar, Guwahati-7, Ph:9864327912 on 07.06.17	2
5	HP Notebook	Mrs Gitika Kalita, W/o Shri Bhagya Kalita, Bee Kay Towers, Ganeshguri, Guwahati-5, Phone:9811820026 on 08.06.17	1
6	Projector (Brand:SONY)	-do-	1
7	Plastic Chairs	Smt. Manju Devi Jain, Flat No.202, Mangalam Apartments, East India Lane, S J Road, Athgaon – 1, Guwahati on 24.06.17	45
8	Rs.22,000/-	Mr Tafiqlul Hnssain, S/o Mr. Anowar Hnssain, Ulubari, B K Kakati Road, H No.02, Roushan Complex, Guwahati-7, Assam, Ph:9706785014 on 15.07.17	
9	Books	The Manager, Shine Pharma, Regional Office:P-77, Kalindi Housing Estate, Kolkata-700089, Fax:03325221706	18
10	ECG Machine, 3 ch interpretation	Mrs Manju Choudhury, W/o Mr B Choudhury, Sankarpur, Guwahati-16, Ph:9435016698 on 08.06.17	1
11	Books	Shri Nabin Baruah in memory of her mother's death anniversary	13
12	Maruti Omni MPI Ambulance (Regn. No.AS01GC3412)	The President, Pachim Guwahati Durga Mandir Trust, Dinesh Goswami Road, Opp. Bharalumukh Police Station, Bharalumukh, Guwahati – 781009, Ph:95776 88941, 98640 63927 on 04.09.17.	1
13	Books	Saratcahndra Sinha Foundation, MMC Bhawan, Hedayatpur, Guwahati-3, Assam	8
14	Rs.1,00,000/-	M/s Nirmal & M P Aggarwal Trust, C/o Happy Child School, Rehabari, Guwahati-8, Ph:9435149282 on 15.05.17	
15	Bed side locker	The President, Sunrise Athletic Club, Kahilipara, Guwahati-18	10
16	Rs.2,00,000/-	Justice Biplab Kumar Sharma, Former Judge, Gauhati High Court, Santipur, Main Branch Road, House No.9, Guwahati-9 on 09.03.18	
17	Wooden Almirah	Smti. Biva Medhi, Vill.P.O. & P.S.-Azara, Guwahati-17	10
18	Rs.11,000/-	Jayantkumar P Patel, Trustee, P K Patel Public Charitable Trust, Navapura, Sunav (Dist-Kheda), Gujarat on 27.03.18	
19	Engagement of Social Worker	Sri B P Saraf, Managing Trustee, Matri Mandir, Ulubari, Guwahati	2 nos.
20	Rs.21,000/-	Mr Basant Kumar Patni, Trustee, Maluck Chand Madan Lal Patni Charitable Trust, 24 Mahabir Bhawan, A T Road, Guwahati-1, Ph:98640 68434 on 04.05.18	

Academic Courses at Dr B Borooah Cancer Institute (RCC), Guwahati

MEDICAL COURSES			
Sl. No	Courses	Seats	Affiliation
1.	M.Ch in Surgical Oncology (Admission through NEET PG SS)	3	Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam
2.	DM in Medical Oncology (Admission through NEET PG SS)	2	Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam
3	MD in Radiotherapy (Admission through NEET PG)	2	MBBS (Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam)
4	Ph. D Programme		Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam

Sl. No.	Courses	Seats	Eligibility
1	Two years P.G Fellowship programme in Surgical Oncology (Jointly by Director, Dr.B.Borooah Cancer Institute, Guwahati and Director ,Tata Memorial Centre, Mumbai)	2	MS in Surgery Degree holders will be given preference, Diploma Holders can apply
2	Two years P.G Fellowship programme Medical Oncology (Jointly by Director, Dr.B.Borooah Cancer Institute, Guwahati and Director ,Tata Memorial Centre, Mumbai)	2	MD in Medicine, Paediatrics. Degree holders will be given preference, Diploma Holders can apply
3	Two years P.G fellowship programme Head & Neck Oncology (Jointly by Director, Dr.B.Borooah Cancer Institute, Guwahati and Director ,Tata Memorial Centre, Mumbai)	2	MS in ENT/MDS Degree holders will be given preference, Diploma Holders can apply
4	Two years P.G Fellowship programme Gynecologic Oncology (Jointly by Director, Dr.B.Borooah Cancer Institute, Guwahati and Director ,Tata Memorial Centre, Mumbai)	2	MD in O& Gynae Degree holders will be given preference ,Diploma Holders can apply
5	Two years P.G Fellowship programme onco-pathology (Jointly by Director, Dr.B.Borooah Cancer Institute, Guwahati and Director ,Tata Memorial Centre, Mumbai)	2	MD in Pathology Degree holders will be given preference, Diploma Holders can apply
6	3/6 months Certificate Course for Doctors in Surgical Oncology	2	MS/DNB in General Surgery
7	3/6 months Certificate Course for Doctors in Medical Oncology	2	MD/DNB /Diploma in Relevant Specialty
8	3/6 months Certificate Course for Doctors in Pathology	2	MD/DNB/Diploma in Relevant specialty
9	3/6 months Certificate course for Doctors in Head & Neck Oncology	2	MS/MD/DNB/Diploma in Relevant specialty
10	3/6 months Certificate Course for Doctors in Gynaecologic Oncology	2	MS/MD/DNB/Diploma in Relevant specialty

ALLIED COURSES AT DR.B.BOROOAH CANCER INSTITUTE

SLNo	Course	Seats	Eligibility
1.	M.Sc in Radiological Physics (Conducted by the department of physics, Gauhati University in collaboration with Dr.B.Borooah Cancer Institute, Guwahati)	10	B.Sc with Physics major, and 60% marks in major. Selection is through entrance test of eligible candidates
2.	M.Sc in Cancer Biology due to start at 2018	10	MBBS, BVSc, BAMS and B.Sc in Biotechnology/Life Sciences (excluding plant science)

PARA MEDICAL COURSES

Sl.	Course	Seats	Eligibility
1.	Two year P.G Diploma Programme in Radiotherapy Technology (Affiliated to Gauhati University)	10	Graduate in Science from a recognized University with Physics as one subject
2.	Two year Post Graduate Diploma Programme in Radiography (Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam)	6	Graduate in Science from a recognized University
3.	Two year Diploma programme for Anaesthesia Technicians (Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam)	10	10+2 in Science stream from any recognized board/council, Candidate with B.Sc. Degree can also apply.
4.	Two year Diploma programme in Radiotherapy Technology (Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam)	10	10+2 in Science stream from any recognized board/council with minimum 45% aggregate.
5.	Two year Diploma Course in Medical Laboratory Technology (DMLT)+6 months internship	10	10+2 (Science with Biology) from any recognized Board/Council with minimum 50% aggregate.
6.	One year certificate course in Cyto technology (Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam)	6	B. Sc. in Life Sciences or DMLT with two years of experience
7.	One year Diploma Course of OT and CSSD Technology (Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam)	10	10+2 in Science from any recognized Board/Council. Candidate with B. Sc. can also apply.
8.	Three months certificate course in Cancer Epidemiology, Cancer Registry and Biostatistics (Affiliated under Srimanta Sankardeva University Of Health Sciences, Assam)	10	Post Graduate or Graduate preferably in Statistics / Social Science / Social Work or MBBS from any recognized University/Statistician and Social Investigators working in any organization/Computer Programmers engaged in Cancer Registry.
9.	3 months Certificate course for Radiographers	3	Diploma in respective discipline
11	3 months Certificate course in Cytopathology and Histopathology for Laboratory Technicians	3	Post BMLT or DMLT

Book and Journals (for the year 2017-18)

List of books:

Sl.No.	Name of Department	Quantity
1.	Pathology	102
2.	Surgery	48
3.	Medicine	62
4.	Gynaecology	51
5.	Microbiology	4
6.	Anaesthesia	18
7.	Radiotherapy	77
8.	Nuclear Medicine	14
9.	Head & Neck	28
10.	Medical Physics	72
11.	Radiology	113
12.	Cancer & other Tumors	64
13.	Radiation Protection	51
14.	Anatomy	18
15.	Physiology	10
16.	Pharmacology	4
17.	Endocrinology	1
18.	Jurisprudence(Medical)	2
19.	Cancer Statics	1
20.	Immunology	1
21.	Encyclopedia	22
22.	Palliative Care	5

Pera Medical Books :	33
Non-Medical Books :	583
Cassettes (Drugs,Tobacco) :	14
DVD(DNB Radiology) :	9

List of Journals:-

Back Volume Journals:-

Sl.No.	Name of Journals
1.	Anesthesiology
2.	British Journal of Anesthesia
3.	Canadian Journal of Anesthesia
4.	Asian Archives of Anesthesiology
5.	Journal of Anesthesiology
6.	Cancer (A Journal of American Cancer Society)
7.	The British Journal of Cancer
8.	Austral-Asian Journal of Cancer
9.	International Journal of Cancer
10.	Cancer Research
11.	European Journal of Cancer
12.	International Journal of Cancer (Pediatric Oncology)
13.	The Laryngoscope
14.	Oral Oncology (Head and Neck Oncology and Pathology)
15.	Obstratics and Gynecology Communication
16.	The Journal of Obstratics and Gynecology of India
17.	Indian Journal of Gynecologic Oncology
18.	Current Opinion in Obstetrics and Gynecology
19.	Cancer Immunology Immunotherapy
20.	British Medical Journal
21.	JAMA (The Journal of American Medical Association)

22.	Medical Physics
23.	Health Physics
24.	Magnetic Resonance Imaging
25.	Pediatrics (Sample)
26.	Journal of Pediatric Hematology/Oncology
27.	Journal of Applied Medicine
28.	American Journal of Clinical Oncology
29.	Journal of Clinical Oncology
30.	Indian Journal of Cancer Chemotherapy
31.	Cancer Chemotherapy and Pharmacology
32.	British Journal of Hospital Medicine
33.	Annals of Oncology
34.	The British Journal of Radiology
35.	AJR (The American Journal of Roentgenology)
36.	Surgical Oncology Clinics of North America
37.	Indian Journal of Plastic Surgery (Sample Copy)
38.	BJU International
39.	Indian Journal of Palliative Care
40.	Journal of Oncology Practice

Current Journals for the year 2017-2018:

1.	The Cancer Journal
2.	CA A Cancer Journal for Clinicians
3.	Head & Neck
4.	Indian Journal of Radiology and Imaging
5.	Indian Journal of Cancer
6.	Indian Journal of Anesthesia
7.	Indian Journal of Medical and Pediatric Oncology
8.	Indian Journal of Surgical Oncology
9.	Radiotherapy & Oncology
10.	Radio graphics
11.	International Journal of Radiation Oncology
12.	Seminars in Oncology
13.	EJSO(European Journal of Surgical Oncology)
14.	American Journal of Surgical Pathology
15.	Journal of Cancer Research & Therapeutics
16.	Surgical Oncology
17.	ACTA Cytologica
18.	Indian Journal of Cytology
19.	Indian Journal of Pathology & Microbiology
20.	British Journal of Hematology
21.	Journal of Clinical Pathology
22.	British journal of Cancer
23.	Lancet Oncology
24.	Blood
25.	Journal of Clinical Oncology

Electronic Databases:

[a]	ClinicalKey Database (Elsevier)
[b]	UpToDate Database (Wolters Kluwer)
[c]	Ovid Database (Wolters Kluwer)
[d]	Cinahl Plus Database (EBSCO)
[e]	Cambridge University Press (E-books database)
[f]	ProQuest Ebook Central (E-books database)

List of Medical Students Undergoing Various Training Programme at BBCI for Year April 2017 - March 2018

Sl. No	Name of the students	Name of Training Programme
1.	Dr.Niju Pegu	M.Ch in Surgical Oncology,2016-19 batch (2 nd Year)
2.	Dr.Singh Pritesh Rajeev	M.Ch in Surgical Oncology,2017-20 batch (1 st Year)
3.	Dr.Srinivas Bannooh	M.Ch in Surgical Oncology,2017-20 batch (1 st Year)
4.	Dr.Jitin Yadav	M.Ch in Surgical Oncology,2017-20 batch (1 st Year)
5.	Dr.Rakesh Kumar Mishra	DM in Medical Oncology,2017-20 batch
6.	Dr.Gaurav Kumar	DM in Medical Oncology,2017-20 batch
7.	Dr.Luri Borah	MD in Radiotherapy,2017-20 batch
8.	Dr.Moumita Paul	MD in Radiotherapy,2017-20 batch
9.	Dr.Bipul Prasad Deka	2 yr P.G Fellowship Programme in Gynaecologic Oncology,2017-19 batch
10.	Dr.Megha Nandwani	2 yr P.G Fellowship Programme in Gynaecologic Oncology,2017-19 batch
11.	Dr.Anil Kumar Mathew	2 yr P.G Fellowship Programme in Head & Neck Oncology,2017-19 batch
12.	Dr.Chandmiki Sayoo	2 yr P.G Fellowship Programme in Head & Neck Oncology ,2017-19 batch
13.	Dr.C.Wathsutho Nyuthe	2 yr P.G Fellowship Programme in Medical Oncology,2017-19 batch
14.	Dr.Hemish Hemant Kania	2 yr P.G Fellowship Programme in Surgical Oncology,2017-19 batch

LIST OF ALLIED AND PARA- MEDICAL STUDENTS UNDERGOING VARIOUS TRAINING PROGRAMME AT DR.B.BOROOAH CANCER INSTITUTE

SLNo	Name of the students	Name of Training Programme
1.	Abhay Kumar Singh	M.Sc in the Radiological Physics,2017-20 batch
2.	Muktar Kumar Sah	M.Sc in the Radiological Physics,2017-20 batch
3.	Hirak Jyoti Baruah	M.Sc in the Radiological Physics,2017-20 batch
4.	Nibedita Boruah	M.Sc in the Radiological Physics,2017-20batch
5.	Bimngdha Goswami	M.Sc in the Radiological Physics,2017-20 batch
6.	Saranga Pani Hazarika	M.Sc in the Radiological Physics,2017
7.	Rini Deka	M.Sc in the Radiological Physics,2017
8.	Mayuri Nath	M.Sc in the Radiological Physics,2017
9.	Supratik Sen	M.Sc in the Radiological Physics,2017
10.	Syed Sarif Ullah	2 Yr P.G Diploma in Radiotherapy Technology
11.	Dipankar Saikia	2 Yr P.G Diploma in Radiotherapy Technology
12.	Hirak Jyoti Deka	2 Yr P.G Diploma in Radiotherapy Technology
13.	Biswajit Das	2 Yr P.G Diploma in Radiotherapy Technology
14.	Ripan Deka	2 Yr P.G Diploma in Radiotherapy Technology
15.	Gameswar Sonowal	2 Yr P.G Diploma in Radiography
16.	Parameswar Sarma	2 Yr P.G Diploma in Radiography
17.	Rajib Nath	2 Yr P.G Diploma in Radiography
18.	Dhanjit Das	2 Yr P.G Diploma in Radiography
19.	Krishnamoni Kalita	2 Yr P.G Diploma in Radiography
20.	Dibyajyoti Thakuria	2 Yr P.G Diploma in Radiography
21.	Thiyam Dash Singh	2 Yr Diploma Programme in Medical Laboratory Technology
22.	Kangkana Medhi	2 Yr Diploma Programme in Medical Laboratory Technology
23.	Khoiram Roshni Chanu	2 Yr Diploma Programme in Medical Laboratory Technology
24.	Jyotisman Sarma	2 Yr Diploma Programme in Medical Laboratory Technology
25.	Yubaraj Kalita	2 Yr Diploma Programme in Medical Laboratory Technology
26.	Prasanta Barman	2 Yr Diploma Programme in Medical Laboratory Technology
27.	Rinku Kalita	2 Yr Diploma Programme in Medical Laboratory Technology
28.	Dhritiman Roy	2 Yr Diploma Programme in Medical Laboratory Technology

Sl.No	Name of the students	Name of Training Programme
29.	Rahul Dev Roy	2 Yr Diploma Programme in Medical Laboratory Technology
30.	Narju Moni Ahmed	2 Yr Diploma Programme for Anaesthesia Technician
31.	Mustakur Ahmed	2 Yr Diploma Programme for Anaesthesia Technician
32.	Jerifa Rahman	2 Yr Diploma Programme for Anaesthesia Technician
33.	Eli Ahmed	2 Yr Diploma Programme for Anaesthesia Technician
34.	Karan Deka	2 Yr Diploma Programme for Anaesthesia Technician
35.	Parash Moni Mazumdar	2 Yr Diploma Programme for Anaesthesia Technician
36.	Rejaul Islam	2 Yr Diploma Programme for Anaesthesia Technician
37.	Simanta Kalita	2 Yr Diploma Programme for Anaesthesia Technician
38.	Bipul Pathak	2 Yr Diploma Programme for Anaesthesia Technician
39.	Antone Hatibaruah	2 Yr Diploma in Radiotherapy Technology
40.	Mozibul Hoque	2 Yr Diploma in Radiotherapy Technology
41.	Sushmita Mongbijam	2 Yr Diploma in Radiotherapy Technology
42.	Bhagayshree Kalita	2 Yr Diploma in Radiotherapy Technology
43.	Pratim Baruah	2 Yr Diploma in Radiotherapy Technology
44.	Debojit Boro	2 Yr Diploma in Radiotherapy Technology
45.	Safiqur Rahman	2 Yr Diploma in Radiotherapy Technology
46.	Mrinal Kumar Saikia	2 Yr Diploma in Radiotherapy Technology
47.	Hirak Jyoti Deka	2 Yr Diploma in Radiotherapy Technology
48.	Nasiur Rahman	2 Yr Diploma in Radiotherapy Technology
49.	Ajay Kalita	1 yr Diploma in OT & CSSD Technology
50.	Jimi Kalita	1 yr Diploma in OT & CSSD Technology
51.	Sahnur Ilahi	1 yr Diploma in OT & CSSD Technology
52.	Mayajah Begum	1 yr Diploma in OT & CSSD Technology
53.	Chandana Devi	1 yr Diploma in OT & CSSD Technology
54.	Ruma Sarma	1 yr Diploma in OT & CSSD Technology
55.	Dhruba Kalita	1 yr Diploma in OT & CSSD Technology
56.	Bimal Jyoti Sarma	1 yr Diploma in OT & CSSD Technology
57.	Manas Pratim Kalita	1 yr Diploma in OT & CSSD Technology
58.	Imazungla Ozukum	1 Year Certificate Course in Cyto technology

LIST OF STUDENTS WHO SUCCESSFULLY COMPLETED COURSES AT BBCI

2 Yr P.G Diploma in Radiography,2015-17

1. Aminda Teron
2. Lavita Das
3. Nadeswar Barman
4. Niva Das
5. Pranab Kalita
6. Raj Krishna Thakur

2 Yr Diploma in Medical Laboratory Technology,2015-17

1. Abinash Barman
2. Atikur Ahmed
3. Bipasha Bose
4. Dimpri Barman
5. Hailangteung Nriame
6. Nipumoni Sarma
7. Pabitra Das
8. Sasank Kumar Singh

2 yr P.G Diploma in Radiotherapy Technology,2015-17

1. Mili Mazumdar
2. Jyotirmoy Kumar
3. Himanku Kalita
4. Ritushmita Shivam

2 Yr Diploma Programme for Anaesthesia Technician, 2015-17

1. Amalanjyoti Rahman
2. Daijee Baruah
3. Dipika Das
4. Jagot Sahu
5. Juri Barman
6. Jyotishman Deka
7. Mompi Srongfang
8. Nadim Ahmed
9. Rubi Ali Ahmed

2 yr Diploma in Radiotherapy Technology,2015-17

1. Bitopan Sarma
2. Kuldeep Sharma
3. Mrinal Roy
4. Pulakesh Barman
5. Rupam Kalita
6. Parbeen Sultana
7. Abdul Karim Ali
8. Arindom Saikia

1 Yr Diploma in OT & CSSD Technology, 2015-17

1. Azaharuddin Ahmed
2. Hiramoni Das
3. Khiraj Das
4. Lakshahira Das
5. Rahul Nath
6. Rejaul Islam
7. Shahajana Bhattacharjee
8. Vimal Kumar

List of outside students doing various Training/Project/Field work at BBCI

Sl.No.	Name of the students	Training/Project/Field work	Duration of the courses
1.	Mrs.Nabam Ani Tomo Riba State Hospital, Arunachal Pradesh	Lab Training	03.04.2017 to 13.04.2017
2.	Mr.Partha Sarathi Sarma Tomo Riba State Hospital, Arunachal Pradesh	Lab Training	03.04.2017 to 13.04.2017
3.	Ms.Manpreeta Baumatary Jorhat Engineering College, Jorhat	Project work	
4.	Dr.Kankan Jyoti Deka Assam Medical College & Hospital, Dibrugarh	Observer	20.03.2017 to 30.04.2017
5.	Tomi Basar Arunachal Pradesh	OT & CSSD training	3 months
6.	Gojum Basar Arunachal Pradesh	OT & CSSD Training	3 months
7.	Ms.Sonalika Ghosh Amity University, Uttar Pradesh	Internship	01.06.2017 to 30.06.2017
8.	Mr.Arupjyoti Bhagawati AIMT	Project Work	15.03.2017 to 31.03.2017
9.	Mr.Pranab , AIMT	Project Work	15.03.2017 to 31.03.2017
10.	Mr.Shamik Das, AIMT	Project work	15.03.2017 to 31.03.2017
11.	Ms.Nishamani Sarma	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
12.	Mr.Hema Prabha Rabha	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
13.	Dr.Avra Pratim Chowdhury	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
14.	Mr.Jayanata Kalita	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
15.	Mr.Banti Kalita	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
16.	Mr.Pranjyoti Kalita	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
17.	Mr.Deepak Herenz	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
18.	Ms.Hinna Barman	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
19.	Mr.Mumindra Sutradhar	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
20.	Mr.Vijay B Chakaraborty	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
21.	Ms.Farhana Naznin	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
22.	Ms.Chayamoni Talukdar	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
23.	Mr.Manas Pratim Kashyap	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
24.	Mr.Ractim Kalita	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
25.	Mr.Anup Jyoti Mahanata	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
26.	Ms.Suranjita Dutta	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
27.	Ms.Bandita Gogoi	Summer Training in Palliative Care	01.07.2017 to 14.07.2017
28.	Mr.Raj Bordoloi	Summer Training in Cancer Registry	01.07.2017 to 14.07.2017
29.	Dr.Mrinmoy Mayur Choudhary GMCH	Endoscopy Training	05.07.2017 to 15.07.2017

Sl.No.	Name of the students	Training/Project/Field work	Duration of the courses
30.	Mr.Parag Jyoti Sarma NERIM	Internship	02.03.2017 to 01.05.2017
31.	Ms.Pompi Kalita NERIM	Internship	02.03.2017 to 01.05.2017
32.	Mr.Abli Asumi NERIM	Internship	02.03.2017 to 01.05.2017
33.	Ms.Chandana Singha	Internship	02.03.2017 to 01.05.2017
34.	Ms.Arпита Barman Central University,Haryana	Summer Internship	01.07.2017 to 15.07.2017
35.	Ms.Tania Roy Central University,Haryana	Summer Internship	01.07.2017 to 15.07.2017
36.	Mr.Hamidur Rahman USTM	Block Placement	17.04.2017 to 20.05.2017
37.	Dr.Ravindar Daggupati Down town Hospital	Training in Head & Neck	01.07.2017 to 31.07.2017
38.	Mr.Aman Amleen NEF College of Management Technology	Block Placement	01.07.2017 to 30.07.2017
39.	Mr.Bhabin Hazarika NEF College of Management Technology	Block Placement	01.07.2017 to 30.07.2017
40.	Dr.Bonde Roshan Down town Hospital	Training in Head & Neck	01.08.2017 to 31.08.2017
41.	Ms.Yasmina Begum Assam Down town University,Guwahati	Training in Radiology	3 months
42.	Dr.Anindita Bhagawati Regional Dental College,Guwahati	Training in Head & Neck	01.06.2017 to 30.09.2017
43.	Dr.Vishnu Raj R	Training in Head & Neck	01.06.2017 to 30.09.2017
44.	Dr.Sridutt Shekhar Sikkim Manipal Institute of Medical Sciences,Sikkim	Training in Head & Neck Oncology	24.10.2017 to 23.11.2017
45.	Ms.Urmishikha Borah NERIM	Internship	31.08.2017 to 14.11.2017
46.	Ms.Sandhya Naiding NERIM	Internship	31.08.2017 to 14.11.2017
47.	Dr.Kaushik Jagannath Katakai Amrita Institute of Medical Sciences, Kochi	Observer ship in Radiation Oncology	22.11.2017 to 05.12.2017
48.	Dr.Subash Tamang Sikkim Manipal Institute of Medical Sciences,Sikkim	Training in Head & Neck Oncology	24.10.2017 to 07.11.2017
49.	Mrs.Julie Bage Tomo Riba Institute of Health & Medical Sciences,Arunachal Pradesh	Training in Nursing	16.10.2017 to 17.01.2018
50.	Dr.Saurav Goswami Mahatma Gandhi Institute of Medical Sciences,Maharashtra	Training in Preventive Oncology	15.01.208 to 27.01.2018
51.	Ms.Dipika Boro Boko	Observership in Palliative Medicine	25.09.2017 to 23.12.2017
52.	Dr.Rajlaxmi Mundra AIIMS,Rishikesh	Training in Gynae Oncology	11.08.2017 to 10.02.2018
53.	Dr.S.Bhattavhayyya Kothiwal Dental College & Hospital,Uttar Pradesh	Data Collection	27.12.2017 to 23.01.2018
54.	HAMM Nursing School Hojai,Assam	Training in Oncology Nursing	01.05.2017 to 13.05.2017
55.	Down town School of Nursing Guwahati	Training in Oncology Nursing	01.06.2017 to 30.06.2017
56.	Dispur Hospitals School of Nursing,Guwahati	Training in Oncology Nursing	03.07.2017 to 08.07.2017
57.	B.Sc Nursing College,Dibrugarh	Training in Oncology Nursing	07.08.2017 to 12.08.2017
58.	International Hospital School of Nursing,Guwahati	Training in Oncology Nursing	10.07.2017 to 05.08.2017
59.	NEPNI School of Nursing Guwahati	Training in Oncology Nursing	16.10.2017 to 28.10.2017

Sl.No.	Name of the students	Training/Project/Field work	Duration of the courses
60.	North East Nursing College of Health Sciences, Arunachal Pradesh	Training in Oncology Nursing	01.11.2017 to 30.11.2017
61.	Asian Institute of Nursing Education,Guwahati	Training in Oncology Nursing	08.01.2018 to 28.02.2018
62.	HAMM Nursing School,Hojai	Training in Oncology Nursing	05.03.2018 to 17.03.2018

PLACEMENT RECORD OF PASSED OUT STUDENT IN 2017-18

Sl. No.	Name & Course passed	Placement
1.	Aminda Teron (2Yr P.G Diploma in Radiography,2015-17)	Apollo Hospital, Guwahati
2.	Lavita Das (2 Yr P.G Diploma in Radiography,2015-17)	United Hospital, Nalbari
3.	Niva Das (2 Yr P.G Diploma in Radiography,2015-17)	Alcare Diagnostic Centre, Beltola
4.	Pranab Kalita (2 Yr P.G Diploma in Radiography,2015-17)	GNRC, North Guwahati
5.	Jyotirmoy Kumar (2 yr P.G Diploma in Radiotherapy Technology,2015-17)	North East Health City Hospital, Guwahati
6.	Kuldeep Sharma (2 yr Diploma in Radiotherapy Technology,2015-17)	State Cancer Hospital,Guwahati
7.	Pulakesh Barman (2 yr Diploma in Radiotherapy Technology,2015-17)	State Cancer Hospital,Guwahati
8.	Mrinal Roy (2 yr Diploma in Radiotherapy Technology,2015-17)	Assam Medical College, Silchar
9.	Atikur Ahmed (2 Yr Diploma in Medical Laboratory Technology,2015-17)	Hayat Hospital,Guwahati
10.	Dimpi Barman (2 Yr Diploma in Medical Laboratory Technology,2015-17)	Apollo Clinic ,Guwahati
11.	Nipumoni Sarma (2 Yr Diploma in Medical Laboratory Technology,2015-17)	Adlab Diagnostic & Research Centre,Guwahati
12.	Pabitra Das (2Yr Diploma in Medical Laboratory Technology,2015-17)	Rapid Diagnostic, Guwahati
13.	Sasank Kumar Singh (2 Yr Diploma in Medical Laboratory Technology,2015-17)	Geetanjali Lab,Panbazar
14.	Nadim Ahmed (2 Yr Diploma in Medical Laboratory Technology,2015-17)	Nemcare Hospital, Guwahati
15.	Azharuddin Ahmed (1 Yr Diploma in OT & CSSD Technology, 2015-17)	North East Health City Hospital, Guwahati
16.	Khiraj Das (1 Yr Diploma in OT & CSSD Technology, 2015-17)	NH Narayana Hospital,Guwahati
17.	Rahul Nath (1 Yr Diploma in OT & CSSD Technology, 2015-17)	Dr.B.Borooah Cancer Institute
18.	Dipika Das (2 Yr Diploma Programme for Anaesthesia Technician, 2015-17)	Kalicharan Nursing Home,Guwahati
19.	Hailangteung Nriame (2 Yr Diploma Programme for Anaesthesia Technician, 2015-17)	Holy Spirit Hospital, Haflong

CLINICAL SOCIETY & CME MEETING HELD AT DR.B.BOROOAH CANCER INSTITUTE

DATE	TOPIC	SPEAKER NAME
07.04.2017	Management of HER ₂ Positive Breast Cancer	Dr.Joydeep Ghosh Medical Oncologist, TMC, Kolkata
06.05.2017	Management of paediatric soft tissue leukoma	Dr.Sajid Qureshi Chef of dept.of paedetric Oncology,TMH,Mumbai
19.05.2017	Role of Nutrition for cancer patients	Mrs.Gitima Saikia Nutritionist,Goenka Hopital,Guwahati

DATE	TOPIC	SPEAKER NAME
26.05.2017	Tips & Tricks of Limb salvage surgery in Bone & Soft Tissue sarcoma	Dr. Koushik Nondi, Consultant Ortho Oncologist, NSH Howrah
10.06.2017	Hands on Workshop on Endoscop	Dr Rohit Gupta DM Gut Clinic, Allahabad
30.06.2017	Symposium on Soft Tissue Sarcoma	Dr Lopamudra Kakati, Dr. BBCI Dr. B B Borthakur, Dr. BBCI Dr. Rubu Sunku, Dr. BBCI Dr. P S Roy, Dr. BBCI
8.07.2017 & 9.07.2017	National CME in Oncology	Organized by the Indian Society of Oncology & Dr.BBCI
04.08.2017	ASCO 2017	Dr. Debsabrata Barman, Dr. BBCI
18.8.2017	Our Experiences in Advanced Brachytherapy at TMH Mumbai	Dr P P Medhi, Dr BBCI Sashi Bhushan Sharma, Dr BBCI
07.09.2017	Genetic Epidemiology and Life Style Factors For Gall Bladder Cancer	Dr.Rajesh Dikshit, Prof & Head Centre for Cancer Epidemiology Tata Memorial Hospital, Mumbai
22.09.2017	IACA Fellowship at Memorial Sloan-Kettering Cancer Center	Dr. Ashok Kr. Das, Dr. BBCI
06.10.2017	American Head & Neck Fellowship – A Canada Experience	Dr. Anupam Das, Dr. BBCI
13.10.2017	Microbiological Diagnosis of Sepsis and Pit Falls	Dr. Rashmi Santa Barman, Dr. BBCI
09.02.2018 & 10.02.2018	13 th Annual Conference of Association of Oncologist of North East India (AONEI)	Organized By AONEI in association with Dr.BBCI
22.02.2018	Breast Cancer in India	Dr.R.Badwe, Director, TMC, Mumbai
23.03.2018	Management of Thymic Neoplasms	Dr. Ghrishree Bora Dr. BBCI
27.03.2018	Nerve Modalities of Treatment of Breast Cancer in Low and Middle Income countries	Mehra Golshan MD FACS



Jironi Ghar II

New Guest House for Patients

Photo Gallery



With Hon'ble Minister of State H&FW, GoI



Shri Shankarlall Goenka and Shri R C Jain, Chairman, SEBA



CME at Eden Hospital, Dimapur, Nagaland



Inauguration of Guest House for Patients by Mr. Mervin S. Alexander, Jt. Secretary, DAE



Update in Oncology at Nazareth Hospital, Shillong



Dr. Bhupen Hazarika Perona Award 2018 to Dr. A. C. Kataki, Director, BBCI



Workshop of NPC at BBCI



During CRFI Oration at BBCI



Team from Harvard Medical School, USA



Dr. Benjamin Turner, H&N Oncology trainee from University of Manitoba, Winnipeg, Canada



Chancellor, USTM, Mr. M. Hoque



Dr. T. Kataria, Medanta Medi City, New Delhi

Photo Gallery



Signing of MoU with Assam Gas Company Ltd.



Inauguration of PG Hostel by Dr. R. A. Badwe



Inauguration of PG Hostel by Dr. R. A. Badwe, TMC (Mumbai) in presents of Mr. Mervin S. Alexander, Jt. Secretary, DAE



Lucky Draw Diwali Celebration



Dr. Atindra K. Adhikari, Principal, GMCH During Onco Premier League Cricket at BBCI



Dr. Michael Hartmann, Singapore



Principal AMC, Dr. H. K. Goswami presenting Citation to Director, BBCI



Presentation of Certificate of Appreciation to Dr. Kabindra Bhagabati



Surgical Workshop at BBCI



Shri GL Agarwala during inauguration of Advance Laboratory Facility



Training of Palliative Care Staff from NE Region



With Dr. Soong Yoke Lim, NCC, Singapore

Equipment and Infrastructure Facilities

Radiotherapy & Physics Equipments :

Sl. No.	Name of Instruments	Nos.
01.	Precise Digital Dual Energy Linear Accelerator with 3D CRT, IMRT (High Energy)	: 1
02.	Siemens PRIMUS Low Energy Linear Accelerator with 3D CRT	: 1
03.	Dual Energy Linear Accelerator with IMRT, IGRT, SRS/SRT	: 1
04.	Cobalt 60 (Phoenix) Tele-therapy	: 1
05.	Cobalt 60 (Th-780)	: 1
06.	Micro Selectron HDR	: 1
07.	Plato Treatment Planning System	: 1
08.	Precise Treatment Planning System	: 1
09.	ZiO TPS	: 1
10.	Flat Panel Simulator with Cone Beam CT option	: 1
11.	TLD (Dosimeter)	: 1
12.	Secondary Standard Dosimeter	: 2
13.	Phantom, One male, one female	: 1
14.	PTW Radiation Field Analyser (RFA)	: 1
15.	Monitor 19" LCD	: 1
16.	Survey Meter	: 4
17.	Gamma Zone Monitor	: 4
18.	Water Phantom	: 1
19.	Bhabhatron - II TAW	: 1
20.	Simulix Evaluation Simulator	: 1

Radiology and Imaging Equipments :

Sl. No.	Name of Instruments	Nos.
01.	500 mA X-ray unit	: 1
02.	9" Triple Field IITV with Image memory	: 1
03.	Tomography 200mA	: 1
04.	Portable X-ray 60 mA	: 1
05.	Multi Slice CT Scan	: 1
06.	Mammography	: 1
07.	Automatic Film Processor	: 1
08.	Digital Whole body Colour Doppler Ultrasound Imaging System	: 1
09.	Orthopantogram	: 1
10.	1.5 Tesla MRI machine	: 1
11.	CT Simulation (Coherence Dosimetrist)	: 1
12.	Digital X-ray Machine	: 1
13.	Computerized Radiography System (CRS) Machine	: 1
14.	High End Ultrasound Machine	: 1
15.	CT Simulator Machine (big bore)	: 1
16.	PACS (Medsynaptic)	: 1

Nuclear Medicine Equipments :

Sl. No.	Name of Instruments	Nos.
01.	Dual Gamma Camera Machine	: 1Unit
02.	Isotope Generator	: 1No.
03.	Dose Calibrator	: 1No.
04.	Thyroid Uptake Probe	: 1Unit
05.	Tread Meal Test Machine	: 1No.
06.	UPS 7.5 KVA	: 1No.

Surgery, Anaesthesia, Lab & other Equipments :

Sl. No.	Name of Instruments	Nos.	Sl. No.	Name of Instruments	Nos.
01.	Operation Table	: 6	59.	Blood Bank Refrigerator	: 1
02.	Hanging Light	: 10	60.	Glucometer	: 1
03.	Stand Light	: 4	61.	Multipara Monitor	:12
04.	Electron Cautery	: 5	62.	Defibrillator	: 2
05.	Drip Stand	: 6	63.	Microscope (Trinocular)	: 1
06.	Suction Machine	: 1	64.	Blood Gas Analyser	: 1
07.	Instrument Trolley	: 13	65.	Cautery Unit	: 5
08.	Operating Surgical Microscope	: 2	66.	Cold Light Fountain Halozen - 250 twin	: 1
09.	Sigmoid Scope	: 1	67.	Colour Imaging Unit for Phaser - 750	: 1
10.	Headlight	: 1	68.	EPBX	: 1
11.	S S Surgical Instrument Amputation Set	:	69.	Blood Collection Monitor	: 1
12.	S S Instrument for Plastic Surgery	:	70.	Blood Cell Counter	: 1
13.	S S Instrument for Brachytherapy	:	71.	BUD Incubator	: 1
14.	S S Instrument for Abdominal Surgery	:	72.	CC Camera	: 1
15.	S S Instrument for Thoracotomy	:	73.	Infusion Pump & Infusion Syringe	:13
16.	S S Instrument for Gynaecological Surgery:	:	74.	Photostat Machine	: 2
17.	S S Instrument for Head & Neck Surgery:	:	75.	Hydraulic Operator Table (remote control):	5
18.	S S Instrument for Heminandibulectomy :	:	76.	Suction Machine	: 1
19.	Endoscopy Set-Rigid	:	77.	320 DG set	: 1
20.	Endoscopy Set-Fibreoptic	: 1	78.	500 mA X-ray machine with IITV	: 1
21.	Diomed - 30 Surgical Laser Unit	: 1	79.	Orthopantogram	: 1
22.	Video Upper G.I. Endoscopy	: 1	80.	1.5 Tesla MRI Machine	: 1
23.	Broncho Fiberscope	: 1	81.	Binocular Microscope	: 1
24.	Flexible Nasopharyngo Laryngoscope	: 1	82.	Automatic Film Processor	: 1
25.	Fibre Optic Colonoscope	: 1	83.	Hot Air Oven	: 1
26.	PENTEX Video Endoscopy	: 2	84.	Slide Cabinet	: 1
27.	Colposcope & Hysteroscope System	: 1	85.	Laboratory Centrifuge	: 1
28.	Multipara Monitor	: 7	86.	Serological Water bath	: 1
29.	Defibrillator	: 2	87.	Immuno Diagnostic System	: 1
30.	Blood Gas Analyser	: 1	88.	Immunohistochemistry Lab. Equipment	: 1
31.	Cautery Unit	: 1	89.	Online Cell Separator	: 1
32.	Cold Light Fomtain Halozen - 250 twin	: 1	90.	Hepa Filter, Cryocyte Freezing Containers, Water Bath, Platelet agitator	: 1
33.	Infusion Pump and Syringe	: 13		With incubator, Plasma Expressor, Tube Sealer, Blood weighing scale, Deep Freezer, Elisa Reader etc. (One each)	
34.	Hydraulic Operating table	: 1	91.	Laminar Flow	: 2
35.	Laryngoscope Set	: 1	92.	Motorised Donor Couch	: 1
36.	Laparoscopic Operating System	: 1	93.	Laryngoscope set	: 1
37.	Video Endoscopy System	: 1	94.	Laparoscopic Operating System	: 1
38.	Base Plate - 2	: 2	95.	Operating Surgical Microscope	: 1
39.	Velleylabs Diathermy Machine	: 4	96.	Cusa Machine	: 1
40.	Secondary Standard Dosimeter (Farmer)	: 1	97.	Strykam Machine	: 1
41.	Plasma Cassette	:	98.	Micro Meotom	: 1
42.	ICU Ventilators	: 4	99.	Central Suction	: 1
43.	Anaesthesia Machine with ventilator	: 4			
44.	Sidex system	: 4			
45.	Instrument Sterilizer	: 2			
46.	Video Cystoscope	: 1			
47.	C-Arm imaging machine	: 1			
48.	Boyle's Apparatus MK 111	: 2			
49.	Boyle's Apparatus old model	: 1			
50.	ECG Monitor	: 1			
51.	Cardiac Monitor	: 1			
52.	Pulse Oxymeter	: 1			
53.	Carbon Di Oxide Monitor	: 1			
54.	Ventilator for recovery room	: 1			
55.	Ventilator Alarm	: 1			
56.	Ambu Bag	: 1			
57.	B. P. Instruments	: 2			
58.	Suction Machine	: 3			

CSSD (Central Sterile Supply Department) :

Sl.No.	Name of Instruments	Nos.
01.	Dry Heat Sterilizer	: 1
02.	Drying Cabinet	: 1
03.	Rotary scalar with printer pouches & reels	: 1
04.	Horizontal Autoclave (Steam Sterilizer)	: 2
05.	Washer dis-infecter table top	: 1
06.	Ultrasonic Cleaner	: 1
07.	Flash Sterilizer	: 1
08.	Loading /unloading carriage trolley (Comes with the steam sterilizer)	: 2
09.	Transfer carriage (comes with the sterilizer)	: 1
10.	Control and packing table	: 2
11.	Single water still	: 1
12.	Water storage tank (included with Reverse: Osmosis Plant System)	: 1
13.	Dry work table	: 1
14.	Work table with 2 sink	: 1
15.	Basket rack single side	: 4
16.	Basket rack double side	: 4
17.	CSSD rack	: 4
18.	Sterilizing baskets	: 100
19.	Table trolley	: 4
20.	Distribution trolley	: 4
21.	Trolley washing machine	: 1
22.	Gauge gutting machine	: 1
23.	Magnifying lamp SS	: 1
24.	Reverse Osmosis Plant	: 1
25.	Hydrogen Peroxide Plasma Sterilizer	: 1

DBT Centre for Molecular Biology & Cancer Research :

Sl.No.	Name of Instruments	Nos.
01.	Laminar Flow Equipments	: 1
02.	Incubator	: 1
03.	Rotary Microtome	: 1
04.	Binocular Microscope	: 1
05.	Computer (PC)	: 1
06.	Sebia Hydrasis Electrophoresis System	: 1
07.	Thermal Cycler PCR	: 1
08.	Real Time PCR	: 1
09.	Advanced Research Microscope with FISH & Karyotyping	: 1
10.	Hybrid Capture system	: 1
11.	Trinocular Research Microscope	: 1
12.	Research Microscope with 5 Heads	: 1
13.	Cel Documentation with 5 Heads	: 1
14.	-80° Deep Freezer	: 1
15.	-20° Deep Freezer	: 1
16.	Gel Electrophoresis	: 1
17.	Water Bath	: 1
18.	UV Spectrophotometer	: 1
19.	Water Purification System	: 1
20.	Refrigerated centrifuge	: 2
21.	Micro Centrifuge	: 1
22.	Microwave	: 1
23.	pH meter	: 1
24.	4°C Freezer	: 1

Pathology and Blood Bank Department :

Sl.No.	Name of Instruments	Nos.	Sl.No.	Name of Instruments	Nos.
01.	Microscope Binocular	: 5	27.	Laminar Flow	: 2
02.	Fluorescence Microscope	: 1	28.	Air Curtain	: 2
03.	Hot Air Oven	: 4	29.	Platelet a gitaror with Incubator	: 1
04.	Microtome	: 2	30.	Plasma Expressor	: 1
05.	Serological Water Bath	: 3	31.	Tube Sealer	: 2
06.	Centrifuge	: 2	32.	Blood Weighing Scale	: 1
07.	Automatic knife sharpener	: 1	33.	Deep Freezer (-40°)	: 1
08.	Refrigerator	: 3	34.	Motorized Donor Couch	: 1
09.	Chemical Balance	: 1	35.	Elisa Reader	: 1
10.	Autoclave	: 1	36.	Side Cabinet	: 1
11.	Cytospin	: 1	37.	Slide Washer	: 1
12.	Densitometer	: 1			
13.	Electrophoresis apparatus	: 1			
14.	Auto Analyzer	: 1			
15.	Microflow Spectrophotometer	: 1			
16.	Sabia Haemalazer	: 1			
17.	Blood Bank refrigerator	: 1			
18.	Glucometer	: 1			
19.	Microscope (Trimocular)	: 1			
20.	Blood collection Monitor	: 1			
21.	Blood cell counter	: 1			
22.	Bud Incubator	: 1			
23.	Slide cabinet	: 1			
24.	Immuno Diagnostic System for tumor markets etc.	: 1			
25.	Immunohistochemistry Lab equipments	: 1			
26.	Online Cell Separator	: 1			

General Equipments :

Sl. No.	Name of Instruments	Nos.
01.	100 MHZ Pentium Computer	: 1
02.	Photostat Machine (Pharmacy-1, Office- 2, OPD - 1)	: 4
03.	LCD Projector	: 2
04.	Laptop Computer for conducting Scientific Programme	: 2
05.	Laptop computer for research & training programme	: 2
06.	EPBAX System with 200 connection capacity	: 1
07.	Wheel Chair	: 15
08.	Stretcher Trolley	: 5
09.	LAN connection with various departments	:
10.	Generator	: 4
11.	Fire Extinguishers	: 50

Hospital Laundry :

Sl. No.	Name of Instruments	Nos.
01.	Industrial Washer Extractor	: 1
02.	Drying Tumbler	: 1
03.	Flat Bed Press	: 1
04.	3 HP Air Compressor	: 2
05.	Wash room Trolley	: 6
06.	Ironing Table	: 6
07.	Linen storage MS angle slotted adjustable	: 4
08.	Sluicing machine	: 1
09.	Washing Machine	: 1
10.	Hand Iron	: 6
11.	IPM 64 Dosing Pump	: 1

Bio - Medical Waste Disposal :

Sl. No.	Name of Instruments	Nos.
01.	Hydroclave (Steam Sterilization Technology)	: 1
02.	Incinerator	: 1
03.	Effluent Treatment Plant	: 1

Buildings

All the buildings are wholly owned by BBCI and presently the hospital has the following infrastructures, which are as follows:

- i. Total Land : 43.0 Bighas = 14.214 acre
- ii. Hospital Bed : 209
Strength (Emergency bed-6, ICU-8)
- iii. Guest House for : 100
Ambulatory patients
- iv. Auditorium : 1
(200 seats capacity)
- v. Lecture Halls : 4

Structural details of buildings:

1) Old hospital building comprising two floors :-

a) Ground floor: Plinth area = 2112.0 sqm. with the following provisions.

(Day care Camo therapy ward, part of Radiation and radiology Dept. (Cobalt 60, X-ray block, general kitchen, toy bank and patient Cabin)

b) First floor: Plinth area = 1379.70 sqm with the following provisions.

(Dharamsala, Guest house, Male and Female ward.)

2) Radiotherapy building comprising two floors:-

a) Ground floor : Plinth area = 876.125 sqm. with the following provisions.

(Linear room, Theratron 780 room, selectron room, simulator room, CAMRT room)

b) First floor: Plinth area = 477.815 sqm with the following provisions.

C.T Scan, Gamma camera, Isotope Lab, Mammography and ultrasound room etc.

3) OPD building comprising two floors:-

a) Ground floor: plinth area = 1839.00 sqm. with the following provisions.

(Doctors clinical chamber of all Dept. providing Resident doctor, Consultant, Senior Consultant and Chief consultant, ECG technician room, Endoscopic MRI 1.5 Tesla room, Pain and Palliative Dept, Medical Record room, Cash Counter, Reception Counter, Computer room, Gymnasium Hall etc.)

b) First floor: plinth area = 1839.00 sqm. with the following provisions

(BBCI canteen, Pathology Dept. and Laboratories, Blood bank, Seminar Hall, Tele Conference room etc.)

4) Hospital building comprising three floors:-

a) Ground floor: plinth area = 1135.00 sqm. with

the following provisions.

(Day care Camo therapy Male and Female wards, R.T Male and Female ward, and Cabins including Nurses stations & Doctors Chamber.)

b) First floor: Plinth area = 1145.00 sqm. with the following provisions

(OT complex)

c) Second floor: plinth area = 1083.00 sqm. with following provisions.

(Surgical Male and Female wards, Multi prayer hall and Cabins etc.)

5) Administrative Building Comprising three floors:

a) Ground floor: Plinth area = 302.50 sqm with the following provisions

(Directors chamber, A.M.O Chamber, O.S Chamber, FAO Room)

B) First floor: area = 255.50 sqm with the following provisions.

(Accounts section, General Administration branch, Conference Hall)

c) Second floor: area = 255.50 sqm with the following provisions.

(Library, AEE Chamber, Sr.A.O Chamber, A.O. Chamber etc)

6) Central Sterilization Building, Ground floor only = 253.00sqm.

7) Utility building ground floor only plinth area = 189.00 sqm.

8) 51 Bedded Nurses/Lady Doctors hostels comprising three floors.

a) Ground floor area = 305.00 sqm.

b) First floor area = 302.00 sqm.

c) Second floor = 302.00 sqm.

9) Doctors' quarter building two nos. Each building comprising three floors and each floor having two flats.

a) Ground floor area = 210.30 sqm.

b) First floor area = 210.30 sqm.

c) Second floor area = 210.30 sqm.

10) Grade III quarter building three nos. Each building comprising three floors and each floors having two parts.

a) Ground floor area = 126.75 sqm.

b) First floor area = 126.75 sqm.

c) Second floor area = 126.75 sqm.

- 11) Grade IV quarter building four nos. Each building comprising three floors and each floor having two part.
 - a) Ground floor area = 75.00 sqm.
 - b) First floor area = 75.00sqm.
 - b) Second floor area = 75.00 sqm
- 12) Dharamsala (Jironighar) building comprising three floor:-
 - a) Ground floor: plinth area =589.81sqm with the following provisions.
(8 nos cabins including kitchen and attached toilet, Male & Female Dormitory with toilet block, Veg & Non Veg Kitchen, common Dinning Hall)
 - b) First floor: Plinth area = 578.38 sqm. with the following provisions.
(8 nos cabins including kitchen and attached toilet, Male & Female Dormitory with toilet block, Veg & Non Veg Kitchen, common Dinning Hall)
 - c) Second floor: plinth area = 578.38 sqm. with following provisions.
(8 nos cabins including kitchen and attached toilet, Male & Female Dormitory with toilet block, Veg & Non Veg Kitchen, common Dinning Hall)
- 13) Ministerial quarter building comprising three floor and each floor having two flat.
 - a) Ground floor area = 150.00 sqm.
 - b) First floor area = 150.00 sqm.
 - c) Second floor = 150.00 sqm.
- 14) Married quarter building comprising three floor and each floor having four flat.
 - a) Ground floor area = 217.10 sqm.
 - b) First floor area = 217.10 sqm.
 - c) Second floor = 217.10 sqm.
- 15) Guest house in ground floor boys and girls hostel in Ist floor and 2nd floor respectively comprising three floor. (Ground floor has two nos VIP suits & four nos deluxe cabins, Ist & 2nd floor 16 nos capacity students hostel in each floor)
 - a) Ground floor area = 301.7 sqm.
 - b) First floor area = 301.7 sqm.
 - c) Second floor = 301.7 sqm.
- 16) Semi RCC Security barrack including toilet block
Area = 391.28 sq.m
- 17) Linear Accelerator building (15 Mev room) Unit-II
- 18) Car parking porch for 23 nos car provisions.
- 19) Car parking porch for additional 75 nos. of cars is under construction



Training on Palliative Care for Nurses at BBCI

Medical & Non-medical Staff of Dr B Borooah Cancer Institute (RCC), Guwahati

Administrative Staff :

1. **Dr A C Katak, MD (Hons.)**
Director, BBCI
2. **Dr B B Borthakur, MS**
Medical Superintendent
3. **Shri T K Goswami**
Sr Administrative Officer
4. **Er Jyotish Deka**
Asst. Executive Engineer
5. **Shri Kamaleswar Kalita**
Finance & Accounts Officer
6. **Dr Sabitri Sarma, MBBS**
Medical Officer

Office Staff :

1. **Mrs Krishna Baruah**
Sr. Librarian
2. **Shri Subhash Sarma**
Sr. Accountant
3. **Ph Nilchandra Singha**
Head Assistant
4. **Md. Achad Ali Ahmed**
UDA
5. **Shri Dhireswar Kalita**
Accountant
6. **Shri Debajyoti Pathak**
LDA
7. **Tridib Sharma**
Account Assistant
8. **Ph Surachandra Singha**
LDA
9. **Shri Anadar Bezbaruah**
Office Peon
10. **Shri Khanindra Patawary**
Office Peon
11. **Shri Indra Kanta Boro**
Office Peon
12. **Shri Nirod Das**
Attendant
13. **Shri Kailash Kalita**
Attendant

Store Section :

1. **Shri Nayanananda Sharma**
Asst. Material Officer
2. **Shri Dinesh Baruah**
Sr. Store Keeper

Medical Staff

Department of Head & Neck Oncology :

1. **Dr (Mrs). T. Rahman, MS**
2. **Dr Ashok Kr Das, MS**
3. **Dr R J Das, MS**
4. **Dr S K Medhi, MS**
5. **Dr Kishore Das, MS**
6. **Dr Anupam Das, MS**
7. **Dr Kaberi Kakoti, MS**
8. **Dr Chamiki Sayoo, MS**
9. **Dr Anil Mathew (Fellow)**
10. **Dr Kunal Ranjan (Fellow)**
11. **Dr Sudhakar GVS (Fellow)**

Department of General Surgery :

1. **Dr J Purkayastha, MS**
2. **Dr B B Borthakur, MS**
3. **Dr Abhijit Talukdar, MS**
4. **Dr Dwipen Kalita, MS**
5. **Dr Pallabika Mandal, MS**
6. **Dr Ankit Jain, MS**
7. **Dr Niju Pegu (M.Ch. Student)**
8. **Dr Srinivas Bennoth (M.Ch. Student)**
9. **Dr Pritesh Singh (M.Ch. Student)**
10. **Dr Jitin Yadav (M.Ch. Student)**
11. **Dr Hemish H. Kania, (PG Fellow)**

Department of Radiotherapy :

1. **Dr Apurba Kr. Kalita, DMRD, DMRT, MD**
2. **Dr M Bhattacharyya, DMRT, MD**
3. **Dr Vikas Jagtap, MD**
4. **Dr Rubu Sunku, MD**
5. **Dr Partha P Medhi, MD**
6. **Dr. Navin Nayan, MD**
7. **Dr. Diplu Choudhury, MD**

Department of Radiology & Imaging :

1. **Dr B K Choudhury, MD**
2. **Dr Kabita B. Baruah, MD**
3. **Dr Gitanjali Barman, MD**
4. **Dr Santanu Baruah, MD**

Department of Gynecologic Oncology :

1. **Dr A C Katak, MD (Hons.)**
2. **Dr Debabrata Barmon, MD**
3. **Dr Pankaj Deka, MD**
4. **Dr Helen Kamei (Fellow)**
5. **Dr Dimpi Begum (Fellow)**
6. **Dr Bipul Prasad Deka (Fellow)**
7. **Dr Megha Nandwani (Fellow)**

Department of Anaesthesiology :

1. Dr Anupam Das, MD
2. Dr Minoti Baruah, MD
3. Dr Prasanjit Barmon, MD
4. Dr Marie Ninu, MD
5. Dr Dokney Chinte, MD

Department of Medical Oncology :

1. Dr C Bhuyan, MD
2. Dr B J Saikia, MD
3. Dr Munlima Hazarika, MD
4. Dr P S Roy, MD, DM
5. Dr Gaurav Kumar (DM Student)
6. Dr R K Mishra (DM Student)
7. Dr A Inamdar (PG Fellow)
8. Dr Tomar (PG Fellow)
9. Dr Todak (PG Fellow)
10. Dr C. Wathsutho Nyuthe (PG Fellow)

Department of Pathology :

1. Dr J Dev Sharma, MD
2. Dr Anupam Sarma, MD
3. Dr Shiraj Ahmed, MD
4. Dr Lopa Mudra Kakoti, MD

Micro Biologist :

1. Dr Rashmi Snata Barman, MD

Bio-Chemistry :

1. Dr Sawmik Das, MD

Medical Officer Blood Bank :

1. Dr Chandana Kalita

Department of Preventive Oncology :

1. Dr S M Bhagabaty, MD

Medical Officer, Pain & Palliative :

1. Dr Kabindra Bhagawati
2. Dr D Dakua (Project Doctor- Jiv Daya)

Public Relation Officer :

1. Mrs Sangeeta Chakraborty

House Keeping Supervisor :

1. Miss Ripshikha Das
2. Mr Rahul Dev Barman
3. Mrs. J Malakar

Cancer Registry, Epidemiology and Bio-statistics :

1. Dr Monigreeva Krishnatreya
Medical Officer
2. Md Jamil Ahmed Borbhuyan
Social Investigator
3. Md Mir Hussain
Sr Medical Record Technician

Reception :

1. Mr Pradip Kalita
Reception Grade - II
2. Mrs Mridula Chakraborty
Reception Grade - II

Cash Counter :

1. Md T Hoque
Cash Assistant
2. Mr Umesh Deka
Cash Collector
3. Mr Pankaj Das
Cashier

Physiotherapist :

1. Mr. Ashish Shrivastaba

BCCI Pharmacist :

1. Mr. Anup Barman
2. Mr. Santanu Kumar Das
3. Mr. Hemanta Kumar Talukdar
4. Mr. Chandropal Deka
5. Mr. Satanthoy Chanu

Scientific Staff**Radiotherapy Division :**

1. Shri S Goswami, M. Sc., DRP
Medical Physicist-cum-RSO
2. Mrs M Borthakur, M. Sc., DRP
Medical Physicist-cum-RSO
3. Shri Pranjal Goswami, M. Sc., DRP
Medical Physicist-cum-RSO
4. M. Nara Singh, M. Sc., DRP
Medical Physicist-cum-RSO
5. Shri S B Sharma, MSc.
Medical Physicist
6. Shri B Yadav, M. Sc.
Medical Physicist-cum-RSO
7. Shri Shantanu Kr. Mishra, M. Sc.
Medical Physicist

Department of Nuclear Medicine & Molecular Images :

1. Dr S Ejanbemo Eung
Retainer Consultant
2. Shri Nabajit Sarma
Nuclear Med. Technologist
3. Shri Nipon Nath
Nuclear Med. Technician

Visiting Physician:

1. **Dr. Swapan Kumar Purkayastha**

Plastic Surgery:

1. **Dr. Sumanjit S Boro**
Assistant Professor

DBT Centre, BBCI:

1. **Dr Avdhesh Kr. Rai**
Asst. Research Officer
2. **Shri A Deka**
Lab. Technician
3. **Shri U Talukdar**
Lab. Technician
4. **Shri P Das**
Lab. Attendant
5. **Ms. P. Gogoi**
Jr. Research Fellow
6. **Ms. P. Yumnam**
Project Fellow
7. **Ms. S. Singha**
Jr. Research Fellow
8. **Ms. Deepika Dey**
Project Fellow
9. **Ms. Madhushmita Panda**
Ph.D. Scholar
10. **Mrs. Tanushree Yadav**
Jr. Research Fellow
11. **Ms. Pallabi Sharma**
Jr. Research Fellow

Technical Staff

1. **Shri Ramcharan Swargiary**
Sr Laboratory Technician
2. **Shri Bitul Goswami**
Sr Laboratory Technician
3. **Shri Ratul Haloi**
Sr. Laboratory Technician
4. **Shri Jayanta Sarma**
Sr. Laboratory Technician
5. **Shri Basanta Talukdar**
Sr Radiographer Technician
6. **Shri Satish Ch. Deka**
Sr Radiographer Technician
7. **Shri Hirendra Kr. Deka**
Sr Radiotherapy Technologist
8. **Shri Ashok Kr. Das**
Sr Radiotherapy Technologist
9. **Md Abdul Halim**
Sr Radiotherapy Technologist
10. **Shri Santosh Kr. Das**
Sr Radiotherapy Technologist
11. **Laipbam Ashutosh Sharma**
Radiotherapy Technician
12. **Shri Joyguru Saha**
Sr. Radiotherapy Technologist
13. **Shri Rahul Nath Bhowmik**
Radiotherapy Technologist

14. **Shri Bhupen Nath**
Sr. Radiographer
15. **Shri Mukulmoni Talukdar**
Sr. Anaesthesia Technician
16. **Shri Biswajit Dey**
Sr. Endoscopy Technician
17. **Shri Rupam Choudhury**
Sr. ECG Technician
18. **Shri Hemanta Deka**
Laboratory Technician
19. **Shri Pratap Das**
Sr Electrician
20. **Shri Muktananda Sharma**
Sr Electrician
21. **Mrs Deepjyoti Konwar**
Computer Operator
22. **Shri Dilumoni Das**
Computer Operator
23. **Shri Dwipen Sharma**
Plumber
24. **Shri Utpal Thengal**
ICU Technician
25. **Shri Bhumidhar Barman**
Laboratory Technician
26. **Shri Kamala Chetia**
Radiotherapy Technologist
27. **Shri Bapan Das**
Radiotherapy Technologist
28. **Shri Rakesh Singh**
Radiotherapy Technician
29. **Shri Papu Das**
Radiotherapy Technologist
30. **Shri Bhargab Sharma**
Mould Room Technician
31. **Shri Sanjib Talukdar**
Radiotherapy Technician
32. **Shri Palash Borah**
ICU Technician
33. **Shri Devajyoti Sharma**
ICU Technician
34. **Shri Mridul Sarma**
Laboratory Technician
35. **Shri Sonmoni Sharma**
Accounts Clerk
36. **Shri Mrinal Medhi**
Social Investigator
37. **Ms. Geetika Das**
Receptionist
38. **Shri Mridul Sarma**
Laboratory Technician
39. **Ms. Joshila Boro**
Clinical Coordinator
40. **Shri Himangsu Deka**
Laboratory Technician
43. **Hemam Rinky Devi**
Anaesthesia Technician
42. **Shri Hridayananda Nath**
ICU Technician
43. **Shri Satyajit Bhuyan**
Social Investigator

44. **Shri Nisanka Choudhury**
Librarian
45. **Shri Shivashis Deka**
Clinical Coordinator
46. **Shri Dhandeep Nath**
Anaesthesia Technician
47. **Shri Rahul Nath**
CSSD Technician
48. **Shri Bitopan Mazumdar**
OT Technician
49. **Shri Chandan Kalita**
OT Technician
50. **Ms. Dimi Ingtipi**
Dietitian
51. **Shri Diamon Brahma**
Electrical Technician
52. **Shri Mrinal Sharma**
Jr. Engineer Electrical
53. **Shri Deepjyoti Das**
AC Technician
54. **Jewel Ali**
Plumber
55. **Mr. Kankan Dev**
IT Coordinator
56. **Mr. Abhinash Saikia**
Computer Programmer

AD-HOC Nursing Staff :

1. Ms. Konsham Sonia Devi
2. Mr. Kamal Kanti Sen Choudhury
3. Ms. Deiz Hazarika
4. Ms. Beauti Boruah
5. Ms. Anindita Baruah
6. Ms. Sheetal Sharma
7. Ms. Rumi Kalita
8. Ms. Nurnahar Begum
9. Ms. Rimpi Sikia
10. Ms. Uddipana Baruah
11. Ms. Lhainchichin Vaiphei
12. Ms. Keisham Kheroda Devi
13. Ms. Oinam Promila Devi
14. Mr. Abhishek Pancholi
15. Ms. Khwairakpam Vijaya Devi
16. Ms. Chitrabala Yumnam
17. Ms. Nilakshi Changmai
18. Ms. Momee Ahmed
19. Ms. Amanda Balarishisha Tuolor
20. Ms. Pranati Das
21. Ms. Juri Boruah
22. Ms. Pindy Yumbam
23. Ms. Rinti Baishya
24. Ms. T. Jenes Kom

Nursing Staff :

1. Mrs Ranjumoni Borah (I)	: Ward Sister (GNM)
2. Mrs R S Thingreiwon	: Ward Sister (GNM)
3. Deepali Kisku	: Staff Nurse
4. Dichamliu	: Staff Nurse
5. H. Holeswari Devi	: Staff Nurse
6. Hiranmoyee Devi	: Staff Nurse
7. H. Meena Devi	: Staff Nurse
8. Ivamoni Bharali	: Staff Nurse
9. Jayanti Harijan	: Ward Sister (GNM)
10. Kipnu Roel	: Staff Nurse
11. K. Sorojini Devi	: Staff Nurse
12. Lalita Mali	: Staff Nurse
13. Langhu Shangnung	: Staff Nurse
14. Lohri Akha-A	: Staff Nurse
15. Mala Dey	: Staff Nurse
16. Manashi Doley	: Staff Nurse
17. Manju Nath	: Staff Nurse
18. Namita Das	: Ward Sister (GNM)
19. Papor Borah	: Staff Nurse
20. Pratibha Rani Saloi	: Staff Nurse
21. Pratibha Thakuria	: Staff Nurse
22. Ranjita Tirkey Marak	: Staff Nurse
23. Chandra Prova Sonowal	: Ward Sister (GNM)
24. Ranjumoni Borah (II)	: Staff Nurse
25. Rebati Das	: Staff Nurse
26. Chitra Das	: Ward Sister (ANM)
27. Sabita Sarma	: Staff Nurse
28. Sabitri Devi	: Ward Sister (ANM)
29. Sabitri Kalita	: Staff Nurse
30. Sarah Gonmei	: Staff Nurse
31. Shelgangchunglu Kamei	: Staff Nurse
32. Shoibam Roshni Devi	: Staff Nurse
33. Sonpahi Pathak	: Staff Nurse
34. Anna Prova Bora	: Staff Nurse
35. Swapna Roy	: Staff Nurse
36. Usha Devi	: Ward Sister (ANM)
37. Hemam Zenny Devi	: Staff Nurse
38. Junu Das	: Staff Nurse
39. Maibam Baby Devi	: Staff Nurse
40. N. Romila Devi	: Staff Nurse
41. Mariaj Sangma	: Staff Nurse
42. D Charani	: Staff Nurse
43. Chongtham Gajali Devi	: Staff Nurse
44. M Daimary	: Staff Nurse

Driver Staff :

1. Md. Idul Islam
2. Shri Dalim Sarma
3. Shri Dandi Basumatary
4. Shri Kishore Boro
5. Shri Debojoti Nayok (Home Care Service)

Grade - IV Staff :

1. Anil Kalita	: Attendant
2. Kulen Deka	: Attendant
3. Dipak Kalita	: Attendant
4. Asan Ali	: Ward Boy
5. Babul Kalita	: Ward Boy

6. Bhabani Nath	: Ward Boy
7. Bhaben Das	: Ward Boy
8. Bharat Deka	: Ward Boy
9. Binod Kalita	: Ward Boy
10. Biren Borkakoti	: Ward Boy
11. Chandi Charan Seal	: Ward Boy
12. Dinesh Kalita	: Ward Boy
13. Forhad Ali	: Ward Boy
14. Gajen Das	: Ward Boy
15. Haladhar Barman	: Ward Boy
16. Kachimuddin Ahmed	: Ward Boy
17. Kailash Ch. Barman	: Ward Boy
18. Kanak Bhagabati	: Ward Boy
19. Shorhab Ali Ahmed	: Ward Boy
20. Nripen Mahanta	: Ward Boy
21. Prabin Ch. Das	: Ward Boy
22. Prabhat Bezbaruah	: Ward Boy
23. Prafulla Ch. Das (II)	: Ward Boy
24. Priya Charan Kalita	: Ward Boy
25. Ramoshish Roy	: Ward Boy
26. Rustam Ali	: Ward Boy
27. Satin Barman	: Ward Boy
28. Shri Kishor Nath	: Attendant
29. Shri Deben Kumar	: Attendant
30. Shri Sanjoy Boro	: Attendant
31. Mrigen Das	: Ward Boy
32. Subhash Das	: Ward Boy
33. Basnti Dey Chakraborty	: Ward Girl
34. Bulu Borooh	: Ward Girl
35. Kabita Barkakoty	: Ward Girl
36. Kamala Deka	: Ward Girl
37. Lakshi Bala Das	: Ward Girl
38. Momtaj Begum	: Ward Girl
39. Manomati Das	: Ward Girl
40. Minu Bez	: Ward Girl
41. Narmada Rajbangshi	: Ward Girl
42. Purnima Saikia	: Ward Girl
43. Meena Barman	: Ward Girl
44. Gitamoni Goswami	: Ward Girl
45. Atikun Nessa	: Aiya
46. Atikun Nessa	: Aiya
47. Babul Bez	: Cook
48. Lakshan Sarma	: Cook
49. Nagendra Singh	: Cook
50. Ramani Barman	: Cook
51. Deben Kumar	: Mali
52. Promod Das	: Peon
53. Kanak Ch. Sarma	: Electrical Helper
54. Budhan Basfore	: Cleaner
55. Jagadish Basfore	: Cleaner
56. Kalatia Basfore	: Cleaner
57. Kanna Rao	: Cleaner
58. Laxmi Basfore	: Cleaner
59. Rajesh Basfore	: Cleaner
60. Raju Telegu	: Cleaner
61. Ravi Basfore	: Cleaner
62. A. N. Appa Rao	: Cleaner
63. Billa Singh	: Cleaner
64. Kamesh Rao	: Cleaner
65. Malati Basfore	: Cleaner
66. Mira Basfore	: Cleaner
67. Parbati Basfore	: Cleaner
68. Ramu Rao	: Cleaner
69. Kamraj Telegu	: Cleaner

Members of BBCI Academia :

1. **Dr A C Katak**
Chairman
2. **Dr M Bhattacharyya**
Principal Co-ordinator
3. **Dr J Dev Sharma**
Speciality, Co-ordinator, Dept of Pathology
4. **Dr B K Das**
Speciality, Co-ordinator, Dept of Surgical Oncology
5. **Dr B K Choudhuri**
Speciality, Co-ordinator, Dept of Radio-diagnosis
6. **Dr C Bhuyan**
Speciality, Co-ordinator, Dept of Medical Oncology
7. **Dr (Mrs) R Begum**
Speciality, Co-ordinator, Dept of Anaesthesiology
8. **Dr Ashok Kr Das**
Speciality, Co-ordinator, Dept of H & N Oncology
9. **Dr A K Kalita**
Speciality, Co-ordinator, Dept of Radiation Oncology
10. **Dr D Barmon**
Speciality, Co-ordinator, Dept of Gynecology Oncology
11. **Mr K Kalita**
Treasurer
12. **Mrs Krishna Barua**
Academia Officer
13. **Mrs Arundhati Sharma**
LDA-cum-Computer Operator

Project staff

Sl. No.	Name	Designation	Project
1	Dr. Debanjana Barman	Medical Research Officer	ICMR (PBCR)
2	Mrs. Arpita Sarma	Computer Programmer	ICMR (PBCR)
3	Mr. M Kalita	Statistician	ICMR (PBCR)
4	Mr. Ranjan Lahon	Social Investigator	ICMR (PBCR)
5	Mrs. Barsha Roy	Social Investigator	ICMR (PBCR)
6.	Mr. Chinmoy Mishra	Social Investigator	ICMR (PBCR)
7.	Mr. Kamal Deka	Data entry Operator	ICMR (PBCR)
8.	Mr Bhrigu Kr Mishra	Data Entry Operator	ICMR (HBCR)
9.	Md. Najmul Hoque	Social Investigator	ICMR (HBCR)
10.	Ms. Gayatri Gogoi	Social Investigator	ICMR (HBCR)
11.	Mrs. Binita Das	Social Investigator	ICMR (HBCR)
12.	Ms. Tapti Kumari	Social Investigator	ICMR (HBCR)
13.	Dr. Nizara Baishya	Research Scientist	ICMR (HBCR)
14.	Mrs. Deepsikha Barman	Social Investigator	ICMR (POC)
15.	Mrs. Chandamika Das	Social Investigator	ICMR (POC)
16.	Mr Sanjoy Das	Data entry Operator	ICMR (POC)
17.	Mrs Rashmi Das	Social Investigator	Jib Daya Foundation
18.	Miss Pompy Roy	Data Entry Operator	-Do-
19.	Md. S Rahman	Data Manager cum Counselor	-Do-
20.	Mr Torun Sonowal	Social Worker	-Do-
21.	Mr Ankur Sarma	Data Manager	-Do-
22.	Miss Anindita Das	Staff Nurse	-Do-
23.	Mr Sudip Rudra Paul	Staff Nurse	-Do-
24.	Joydip Deb	Staff Nurse	-Do-
25.	Dr D Dakuwa	Project Doctor	-Do-
26.	Mr Utpal Talukdsar	Lab. Technician	DBT Centre
27.	Mr. Ghanashyam Barman	Lab. Technician	Under ASACS

My Early Experience of Microsurgery in BBCI

Dr Sumanjit S. Boro

Assistant Professor, Department of Plastic Surgery
Dr. B. Borooah Cancer Institute, Guwahati

Brief introduction of myself:

I am Dr Sumanjit S Boro, presently working as Assistant Professor in dept. of Plastic Surgery in BBCI. I finished my Mch in Plastic Surgery from BJ Medical College, Ahmedabad in September, 2016 and after that did one year fellowship in Oncoplasty and Reconstructive Microsurgery from Narayana Superspeciality Hospital, Kolkata. I worked in Cachar Cancer Hospital and Research Institute for 6 months with Dr Ravi Kannan Sir after finishing my fellowship. During that time I appeared in the interview for the post of Assistant Professor, Plastic Surgery in this institute and got selected. I joined in this institute on 25/04/18

Beginning two months in BBCI :

I spent my first day in this institute with Gynae Onco Team, where I reconstructed a post vulvectomy defect.

first few weeks, I did lots of regional flaps with the Head and Neck Onco Team. The whole team encouraged me a lot during that period.

Dr Mahamaya Singh, MCh.Head and Neck Oncology (Amrita Institute of Medical Sciences, Kochi) was the visiting micro-reconstructive surgeon during that time. I worked with him for two months initially. We together did 5 cases, two anterolateral thigh free flaps and three free fibular osteocutaneous flaps. One free fibular flap patient needed re-exploration but with timely

intervention the flap was saved. All the flaps survived without any complications. The authority of BBCI made sure that I became comfortable with the whole environment during those two months.

Next three months in BBCI :

During this period I did eleven free flaps, ten with the Head and Neck Team and one with the Surgical Oncology Team.

* My first free flap in this institute was a sixty years old lady with squamous cell carcinoma of right perizygomatic and frontotemporal area where wide local excision was done and reconstruction was done with 12x11cm² free radial forearm flap. Post operative period was uneventful and patient was discharged on eighth post operative day. Forearm graft uptake was 100%.It was a great team effort and all credit goes to the Hospital Authority,Head and Neck team,our experienced Anaesthesists and OT staff.



* Second case we did was a right maxillary osteosarcoma where wide excision was done along with orbital exenteration and reconstruction was done with free anterolateral thigh(alt) flap. Flap survived and patient discharged on 9th post op day.



* Third case we did was right buccal mucosal squamous cell carcinoma where we did wide local excision, neck dissection and free alt flap.



* Fourth case was free alt flap done for a maxillectomy patient.On the first post op day,the artery got

thromboses and had to re-do the arterial anastomosis. Patient was fine till 4th post operative day but again arterial thrombosis occurred and this time we couldn't be able to salvage the flap. He was later managed conservatively and advised obturator. He came to opd few days back and was able to eat and talk well. He is undergoing post operative radiation therapy at present.



* Our fifth case was a free alt flap done for maxillectomy patient which went smoothly.



* Sixth case we did in our institute was a adenoid cystic sino-nasal carcinoma. Our Head and Neck team did extensive research for the surgery and took consultations from Dr Pramathesh Pai Sir, renowned skull base surgeon from Tata Memorial Hospital, Mumbai. We invited our honorary neurosurgeon Dr Rupjyoti Hazarika Sir for the surgery. During the Surgery whole tumour was removed along with bilateral nasal bone, left maxilla, anterior wall of frontal bone, cribriform plate and some part

of dura. Whole defect was reconstructed with 17x7cm² free alt flap and dural rent was closed with tensor fascia lata graft. Post operative period was uneventful. This was first time in North East India that such extensive surgery had been performed by any Head Neck Onco team.



* Seventh case we did was a free radial forearm flap for total lower lip reconstruction which went smoothly.



* Eight case was a free ALT flap for total maxillectomy with orbital exenteration. Patient was discharged on 9th post operative day.



* Ninth and tenth cases were free ALT flap for extensive oral malignancy.



* Eleventh case we did, was a Ewings Sarcoma left humerus of a eleven year old child where we resected the tumour and reconstructed the defect with free fibular osteocutaneous flap. It was for the first time in North East India, such surgery had been done. Patient had an uneventful post operative recovery.



During, my this five months in BBCI, we performed sixteen free flap surgeries (ten ALT flap, four fibular osteocutaneous flap, two radial forearm flap) with one failure.

I had conducted interactive sessions with the OT/ICU/Ward staffs during this period. I tried to tell them about what is microsurgery, about micro instruments how to handle and take care of it, operative steps of free flaps and post operative monitoring. We also organised a basic microsurgery class for the head and neck fellows of BBCI.

Microvascular Surgeries are very difficult surgeries and it needs strict

discipline from all the team members. It's a very delicate surgery and any small error can lead to disaster. It is said that in microsurgery there is not much distance from discomfort to difficulty to disaster. Dedicated team, fine instruments, a good cautery machine and a good working microscope are the basic necessities for free flap surgery.

These 5 months have been a great learning experience for me. I am very

grateful to our Director, Dr A K Katoki Sir, Superintendent Dr B. Borthakur Sir, entire Head and Neck onco team, entire Anaesthesia team and whole Ot/ICU/Ward staff for their support during this period. Hopefully with the continuous effort of all the members of this family, BBCI will be able to provide better cancer care for the needy people of this entire region in coming days.

*Thanking everyone...!
Dr. Sumanjit S. Boro.*



Children Day Celebration at BBCI

Skull Base Clinic

A new era in the Dept. of Head & Neck Surgical Oncology

Dr Kaberi Kakoti
 Assistant Professor, Dept. of Head & Neck Oncology
 Dr. B. Borooah Cancer Institute, Guwahati

The Dept. of Head and Neck Surgical Oncology of Dr. B. Borooah Cancer Institute has started its Skull Base Clinic from October, 2017. It had a modest beginning with the Head and Neck Surgeons of the Department and a Visiting Neurosurgeon where we used to discuss the treatment plans of the Sinonasal and Skull Base cases. Gradually, the Clinic grew and now it has turned into a Multidisciplinary clinic and has representatives from all disciplines like Radiation Oncology, Medical Oncology, Pathology, Radiology, Plastic Surgery apart from the Head and Neck Surgeons and the Neurosurgeon. The Clinic sits every Wednesday where we discuss all Skull Base cases and representatives from various fields give their inputs regarding further management so that such cases can be planned better. Till date, we have had around 50 such cases seen at our Clinic which is quite a modest number considering the rarity of such tumors.

Mean age of our cases are 45 yrs with a male –female ratio of 2.3 : 1. We have had around 45 cases of Sinonasal and Anterior Skull base cases and 5 cases involving Lateral skull base. Majority of our cases present at Stage IV disease (80%). Around 40% cases are of SCC histology, unlike other Head and Neck cancer cases where 95% are SCC. Various other histologies are seen like Adenoid cystic CA, Sarcomas, Neuroendocrinetumors, Olfactory Neuroblastoma, Lymphomas with different clinical and biological behaviour. All these varied histologies offer a host of opportunities for research

regarding IHC markers and molecular/genetic study to know the pathology better. Also, we have seen few cases of Skull base osteomyelitis which pose a diagnostic dilemma.

Around 60% cases have been treated with Curative intent with various treatment modalities like Surgery as well as non surgical means like Chemotherapy, Chemoradiation, Neoadjuvant Chemotherapy followed by Surgery/ CTRT. Various surgical procedures were performed like Total maxillectomy with sphenoethmoidectomy and pterygoid plate excision, Orbital exenteration with Temporalis muscle flap repair, Total parotidectomy with Lateral temporal bone resection, Total maxillectomy with Craniofacial resection. Big surgical defects are usually repaired with Free flap.

Although we are new in this field, nevertheless we are making progress slowly but steadily in this field of Skull Base Surgery and hope to continue offering greater and quality services to our patients.



Photo Gallery



Dr. B. K. Choudhury, Receiving a Award at Milan, Itali



Dr. A. K. Das with Dr. Anil D'Cruz, during World Cancer Congress at Kualampur



Dr. M. Krishnatreya with Dr. E. Gunn, Editor, JCO during World Cancer Congress at Kualampur



Dr. Srinivas Bennoth and Dr. Jitin Yadav during European Society of Surgical Oncology, Budapest, Hungry



Dr. Anil Methew and Dr. Shasank Bansal during Independence Day Celebration



Breast Cancer Run & Ride 2018



Lokabandhu Day Celebration 2018 at BBCI



International Yoga Day Celebration



Training of Domestic Health Care Griver



DESH Programme of Piramal Swasthya



Surgical Workshop at BBCI



World Environment Day Celebration at BBCI

**Number of Patients Benefitted
from Chemotherapy Scheme of Govt of Assam
through Dr B Borooah Cancer Institute (RCC), Guwahati
Since its inception in March 2008 to March 2018**

Year 2008	
Months	Total No. of Patients Benefitted
March	62
April	443
May	520
June	595
July	690
August	655
September	650
October	593
November	585
December	491
Total	5284

Year 2010	
Months	Total No. of Patients Benefitted
January	429
February	480
March	686
April	626
May	628
June	653
July	679
August	792
September	754
October	786
November	718
December	732
Total	7963

Year 2009	
Months	Total No. of Patients Benefitted
January	558
February	618
March	763
April	761
May	787
June	856
July	722
August	666
September	625
October	620
November	557
December	616
Total	8149

Year 2011	
Months	Total No. of Patients Benefitted
January	541
February	810
March	730
April	692
May	665
June	828
July	677
August	670
September	744
October	612
November	724
December	743
Total	8436

Year 2012	
Months	Total No. of Patients Benefitted
January	764
February	696
March	523
April	416
May	467
June	397
July	356
August	449
September	512
October	623
November	551
December	648
Total	6402

Year 2013	
Months	Total No. of Patients Benefitted
January	621
February	451
March	486
April	401
May	156
June	339
July	898
August	864
September	890
October	748
November	442
December	343
Total	6639

Year 2014	
Months	Total No. of Patients Benefitted
January	250
February	136
March	183
April	596
May	164
June	39
July	355
August	654
September	538
October	596
November	778
December	758
Total	5047

Year 2015	
Months	Total No. of Patients Benefitted
January	480
February	605
March	552
April	504
May	407
June	398
July	342
August	230
September	393
October	402
November	246
December	242
Total	4801

Year 2016	
Months	Total No. of Patients Benefitted
January	243
February	231
March	266
April	176
May	169
June	192
July	180
August	221
September	197
October	169
November	213
December	219
Total	2476

Months	Total No. of Patients Benefitted	
	Year 2017	Year 2018
January	201	30
February	172	45
March	139	39
April	156	-
May	89	-
June	80	-
July	32	-
August	41	-
September	34	-
October	27	-
November	29	-
December	25	-
Total	1025	114

*Unfortunately many patients did not get free chemotherapy medicines due to unavailability during this period.

Fund Received Since 1974-75 to 2017-18

Source of funds (in Rupees)

Year	GoA H&FW	GoI H&FW	Director State Lottery	NEC	DAE	Others	Total Amount
1974-75	200000	—	308510	—	—	37500	546010
1975-76	200000	—	—	—	—	250000	450000
1976-77	515000	500000	75000	—	—	251000	1341000
1977-78	200000	—	35000	—	—	—	235000
1978-79	300000	—	30000	—	—	—	330000
1979-80	300000	—	20400	—	—	—	320400
1980-81	200000	295000	—	—	—	—	495000
1981-82	200000	600000	—	—	—	—	800000
1982-83	900000	2800000	—	—	—	—	3700000
1983-84	300000	200000	—	—	—	—	500000
1984-85	300000	1250000	314368	3500000	—	—	5364368
1985-86	300000	1500000	2373948	—	—	—	4173948
1986-87	300000	1500000	—	—	—	—	1800000
1987-88	4300000	1200000	1961463	—	—	500000	7961463
1988-89	—	1200000	—	—	—	—	1200000
1989-90	5000000	1200000	1581000	—	—	—	7781000
1990-91	2200000	—	—	—	14744000	2143000	19087000
1991-92	2200000	—	—	3750000	2817629	—	8767629
1992-93	2000000	—	—	5500000	10000000	—	17500000
1993-94	2800000	—	—	5500000	8833000	—	17133000
1994-95	1500000	—	10000000	6791000	11076000	—	29367000
1995-96	—	—	—	6790000	13500000	—	20290000
1996-97	2181750	—	999500	5000000	2600000	—	10781250
1997-98	5000000	—	—	24093000	22450000	—	51243000
1998-99	—	—	—	14807000	5000000	—	19807000
1999-00	—	—	—	50000000	40000000	—	90000000
2000-01	33650000	—	—	50000000	11040000	—	94690000
2001-02	—	1500000	—	40000000	32864000	—	74364000
2002-03	—	—	—	16395000	24677000	—	41072000
2003-04	16781000	3000000	—	—	37904000	—	57685000
2004-05	13508000	—	—	10000000	22500000	—	46008000
2005-06	25602500	60000000	—	35000000	28100000	9000000	157702500
2006-07	31612000	—	—	94000000	26600000	—	152212000
2007-08	18104000	50000000	—	76100000	26475000	—	170679000
2008-09	22256000	—	—	25000000	785000	—	48051000
2009-10	26448000	—	—	80442000	47284000	—	154174000
2010-11	26712000	—	—	165000000	63971000	1987564	257670564
2011-12	35000000	—	—	110000000	29210000	1995000	176205000
2012-13	40000000	—	—	109820000	40236000	1985000	192041000
2013-14	79217000	—	—	5000000	—	1993000	86210000
2014-15	71205000	—	—	47750000	40000000	2000000	160955000
2015-16	49707500	—	—	47750000	123562020	—	221019520
2016-17	79536000	—	—	81231000	190362000	2000000	353129000
2017-18	100600000	—	—	80000000	100000000	—	280600000

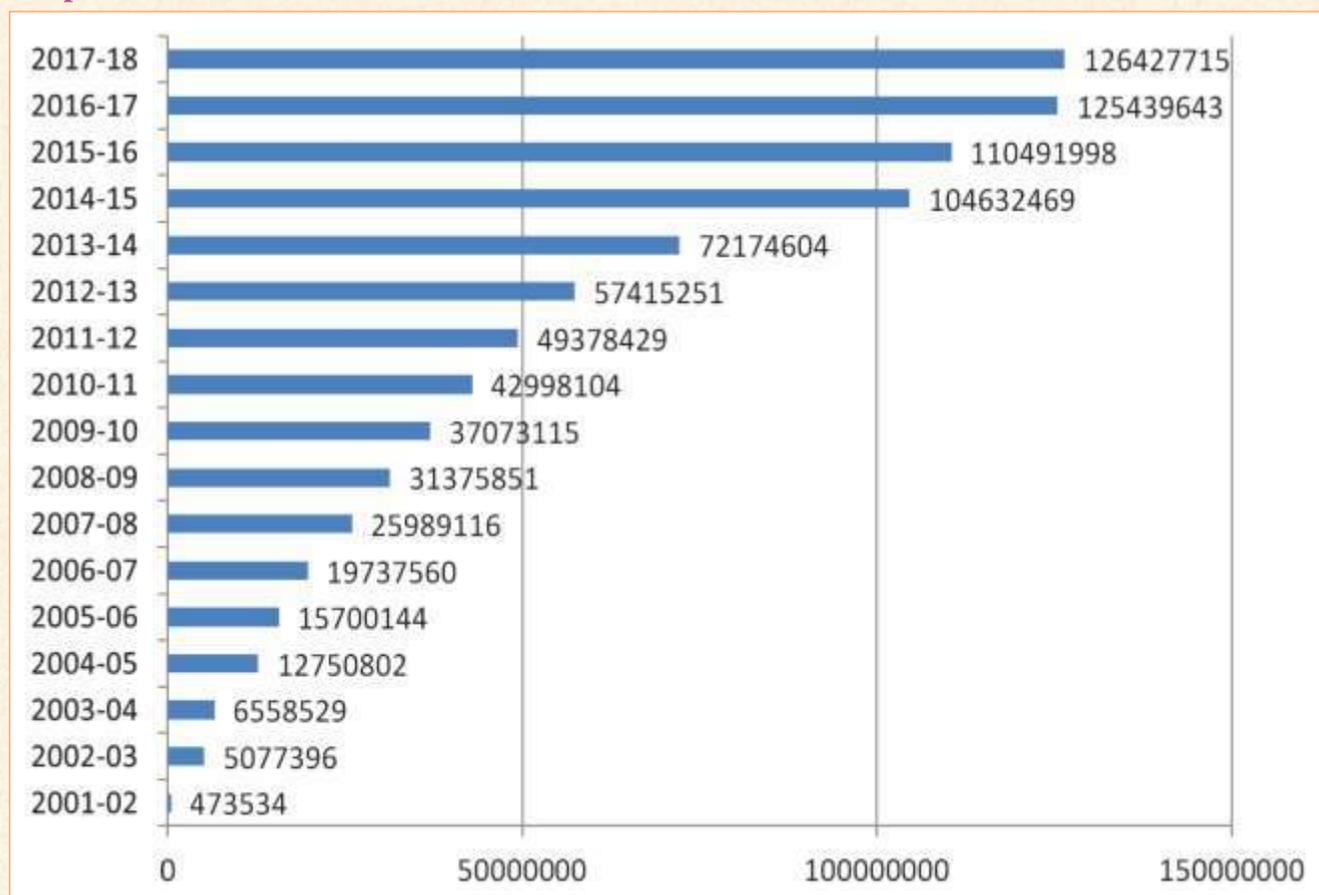
Financial Statement :

Fixed Asset as on 31.03.2017	:: Rs. 50,59,42,652.83
Corpus fund as on 31.03.2017	:: Rs. 1,09,15,11,233.00
Accrued interest on fixed deposit on 31.03.2017	:: Rs. 7,62,04,874.00

Hospital Revenue Generation during the last few years with bar diagram :

Year	Hospital Revenue (in Rupees)
2001-02	473534.00
2002-03	5077396.00
2003-04	6558529.00
2004-05	12750802.00
2005-06	15700144.00
2006-07	19737560.00
2007-08	25989116.00
2008-09	31375851.00
2009-10	37079115.00
2010-11	42998104.00
2011-12	49378429.00
2012-13	57415251.00
2013-14	72174604.00
2014-15	104632469.00
2015-16	110491998.00
2016-17	125439643.00
2017-18	126324786.00

Hospital Revenue



Facilities of BBCI



LA with IMRT, IGRT, SRS/SRT



Bhabatron II Tele Radiotherapy Machine



CT Simulator Machine



Dual Head Spect Gamma Camera



Linear Accelerator (3D CRT, IMRT)



Linear Accelerator (3D CRT)



Phoneix Tele Therapy Machine



HDR Brachytherapy Machine



Simulator



1.5 Tesla MRI Machine



Treatment Planning System



Radiological Physics Laboratory

Facilities of BBCI



Mammography Machine



Digital X-ray Machine



Intensive Care Unit (ICU)



Video Endoscopy



Laser Micro Surgery



Laparoscopic Surgery



Pathology (Bio-chemistry), Laboratory



CSSD



Surgical Museum at BBCI



FISH Technology, DBT Centre BBCI

DR. B. BOROOAH CANCER INSTITUTE
GOPI NATH NAGAR : GUWAHATI-781016 (ASSAM)

BALANCE SHEET AS ON 31 ST MARCH, 2018

SOURCE OF FUNDS		AMOUNT	AMOUNT
<u>CAPITAL FUND :</u>			
As per last Account			43,69,701.26
<u>CAPITAL GRANT -GENERAL</u>			
As per last Account		1,35,28,44,800.90	
Add : Received During the year	SCH-12	<u>10,00,00,000.00</u>	1,45,28,44,800.90
<u>CAPITAL GRANTS-NCCP</u>			
As per last Account			4,58,49,311.00
<u>MPLAD FUND FOR AMBULANCE</u>			
As per last Account			16,07,000.00
<u>POWER GRID ONCOLOGY CENTRE FUND</u>			
As per last Account		1,98,80,231.00	
Add : Fund Received During the year		<u>1,59,30,551.00</u>	3,58,10,782.00
<u>ICU EQUIPMENTS FUND</u>			
As per last Account			1,00,00,000.00
<u>RESERVE & SURPLUS</u>			
As per last Account		37,77,00,637.38	
Add: Excess of Income over Expenditure		<u>10,02,51,083.45</u>	47,79,51,720.83
<u>CURRENT LIABILITIES & PROVISIONS :</u>			
Sundry Liabilities	SCH-14	2,51,10,481.04	
Sundry Creditors	SCH-15	3,13,016.00	
Liabilities for Expenses	SCH-16	86,11,772.59	
Other Liabilities	SCH-17	<u>12,40,756.00</u>	3,52,76,025.63
T O T A L			<u>2,06,37,09,341.62</u>

CONT. 12




Director
Dr. B. Borooah Cancer Institute
Guwahati-16


FINANCE AND ACCOUNTS OFFICER
DR. B. BOROOAH CANCER INSTITUTE
GUWAHATI-16

- 2 -

APPLICATION OF FUNDS		A M O U N T	A M O U N T
<u>FIXED ASSETS</u>	SCH-1		49,90,82,062.95
<u>TELE THERAPY SOURCES</u>			
As per last Account		41,67,000.00	
Less: Consumed during the year		8,33,000.00	33,34,000.00
<u>CURRENT ASSETS & LOAN ADVANCES</u>			
<u>(A) CURRENT ASSETS</u>			
<u>Fixed Deposits</u>	SCH-04		
Corpus Fund		1,18,91,47,962.00	
General Fund		12,80,00,000.00	1,31,71,47,962.00
Stock in hand	SCH-02	64,329.24	
Cash & Bank Balance	SCH-03	10,67,71,789.54	
Rent & Other Recievable	SCH-06	27,29,483.00	10,95,65,601.78
<u>(B) DEPOSIT & ADVANCES</u>			
Advances	SCH-07	40,38,814.89	
Deposits	SCH-11	12,49,56,537.00	12,89,95,351.89
INCOME TAX REFUNDABLE	SCH-13		55,84,363.00
		T O T A L	2,06,37,09,341.62

In terms of our report of even date

For M/s. PRABIR MAZUMDER & ASSOCIATES
Chartered Accountants

PLACE :: GUWAHATI

DATED :: 09-10-2018



 (PRABIR MAZUMDER, FCA)
 Proprietor


 Director
 Dr. B. Borooah Cancer Institute
 Guwahati-16


 FINANCE AND ACCOUNTS OFFICER
 DR. B. BOROOAH CANCER INSTITUTE
 GUWAHATI-16

DR. B. BOROOAH CANCER INSTITUTE
GOPI NATH NAGAR : GUWAHATI-781016 (ASSAM)

INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDING ON 31ST MARCH, 2018

A) I N C O M E	A M O U N T	A M O U N T
Hospital Income	11,68,99,013.91	
Less : Refund To Patients during	7,76,279.00	11,61,22,734.91
Bank Interest	SCH-18	8,91,42,706.00
Grant in Aid	SCH-19	18,06,00,000.00
Other Income:	SCH-20	1,03,04,980.00
T O T A L		39,61,70,420.91

B) E X P E N D I T U R E	A M O U N T	A M O U N T
Administrative Exper	SCH-21	17,15,76,328.46
Other Expenses	SCH-22	62,74,302.23
Repairs & Maintenance	SCH-23	1,55,83,110.00
Hospital Operating Ex	SCH-24	3,02,62,440.89
Service Contracts		1,26,81,146.00
Depreciation	SCH-01	5,95,42,009.88
T O T A L		29,59,19,337.46

EXCESS OF INCOME OVER EXPENDITURE TRANSFERRED TO CORPUS FUND (A-B) 10,02,51,083.45


Director
Dr. B. Borooah Cancer Institute
Guwahati-16

PLACE :: GUWAHATI

DATED :: 09-10-2018



In terms of our report of even date
M/s. PRABIR MAZUMDER & ASSOCIATES
CHARTERED ACCOUNTANTS


FINANCE AND ACCOUNTS OFFICER
DR. B. BOROOAH CANCER INSTITUTE
GUWAHATI-16


(PRABIR MAZUMDER, FCA)
Prabir Mazumder

DR. B. BOROOGAH CANCER INSTITUTE
GOPI NATH NAGAR
GUWAHATI-781016, ASSAM

SCHEDULE-1 : FIXED ASSETS

Particulars	Written Down Value as on 01.04.2017	Addition During the year		Deductions for Sales/ Adjustments	Total (Rs.)	Depreciation		Written Down Value as on 31.03.2018
		upto 30.09.2017	After 30.09.2017			Rate (%)	Amount	
Air condition	2,56,241.01		77,068.00		3,33,309.01	15%	44,216.25	2,89,092.76
Ambulance & CD Van	41,663.40				41,663.40	15%	6,249.51	35,413.89
Boundary Wall	24,50,418.97				24,50,418.97	10%	2,45,041.90	22,05,377.07
Building	9,44,37,360.07		7,93,62,245.00	-	17,37,99,605.07	10%	1,34,11,848.26	16,03,87,756.81
Car Parking Shed	51,71,543.71				51,71,543.71	10%	5,17,154.37	46,54,389.34
Compounding Fencing	1,895.55				1,895.55	15%	284.33	1,611.22
Computer	16,681.52	30,104.00	2,49,900.00		2,96,685.52	40%	68,694.21	2,27,991.31
Dharamsala	78,82,684.89				78,82,684.89	10%	7,88,268.49	70,94,416.40
Drain & Approaches	29,45,078.63		21,810.00		29,66,888.63	10%	2,95,598.36	26,71,290.27
Electrification	22,71,880.69				22,71,880.69	15%	3,40,782.10	19,31,098.59
Entrance gate/ Hospital gate	11,41,560.48		5,52,122.00		16,93,682.48	15%	2,12,643.22	14,81,039.26
Fan & Fittings	17,784.24				17,784.24	15%	2,667.64	15,116.60
Furnitures	69,94,474.68	8,01,270.00	6,18,763.00		84,14,507.68	10%	8,10,512.62	76,03,995.06
Fire Safety Measures	22,24,876.50				22,24,876.50	10%	2,22,487.65	20,02,388.85
Generator	51,64,485.16				51,64,485.16	15%	7,74,672.77	43,89,812.39
Instruments & Land	22,31,63,002.63	9,52,290.00	2,07,88,259.00		24,49,03,551.63	15%	3,51,76,413.32	20,97,27,138.31
Motor Car & Bicycle	2,52,98,211.74				2,52,98,211.74	--		2,52,98,211.74
NCCP Equipments	15,64,251.70				15,64,251.70	15%	2,34,637.76	13,29,613.94
	9,95,120.08				9,95,120.08	15%	1,49,268.01	8,45,852.07
	38,20,39,215.65	17,83,664.00	10,16,70,167.00	-	48,54,93,046.65		5,33,01,440.77	43,21,91,605.88

Contd., 2



Director
Dr. B. Boroogah Cancer Institute
 Guwahati- 16

FINANCE AND ACCOUNTS OFFICER
DR. B. BOROOGAH CANCER INSTITUTE
 GUWAHATI-16

-2-

BROUGHT FORWARD	38,20,39,215.65	17,83,664.00	10,16,70,167.00	-	48,54,93,046.65	5,33,01,440.77	43,21,91,605.88
Office Equipments	3,13,211.87		2,12,926.00		5,26,137.87	41,967.49	4,84,170.38
Park	1,72,900.20				1,72,900.20	17,290.02	1,55,610.18
PCO	5,845.37				5,845.37	584.54	5,260.83
Statue of Dr. B. Barooah	7,24,507.76				7,24,507.76	1,08,676.16	6,15,831.60
Transformer	1,452.46				1,452.46	217.87	1,234.59
Water supply	69,30,252.37				69,30,252.37	10,39,537.86	58,90,714.51
Fountain & Landscaping	18,12,436.41				18,12,436.41	2,71,865.46	15,40,570.95
UNDER CONSTRUCTION							
1000 KVA Transformer	32,10,803.00				32,10,803.00	-	32,10,803.00
Power Grid Oncology Cent	1,19,78,116.00				3,01,17,159.00	-	3,01,17,159.00
Guest House II	3,78,64,838.00	79,01,260.00	1,02,37,783.00	3,78,64,838.00			
Three Storied RCC Grade	72,79,994.00			72,79,994.00			
High Energy LA Room	20,03,112.00			20,03,112.00			
Linac D-Room	64,30,544.00			64,30,544.00			
Modular Laboratory	86,799.00			86,799.00			
Nuclear Medicine Ward	88,50,805.00			88,50,805.00			
Pet C.T. Scan Building	89,06,979.00			89,06,979.00			
Sub Total : Rs.	47,86,11,812.09	96,84,924.00	11,21,20,876.00	7,14,23,071.00	52,89,94,541.09	5,47,81,580.17	47,42,12,960.92
Hospital Cloths	12,81,838.50	10,452.00	2,36,405.00		15,28,695.50	2,11,573.95	13,17,121.55
Library Books	9,34,779.00		20,31,385.00		29,66,164.00	7,80,188.60	21,85,975.40
Utensil	19,269.04		20,449.00		39,718.04	4,424.03	35,294.01
Sub Total : Rs.	22,35,886.54	10,452.00	22,88,239.00	-	45,34,577.54	9,96,186.58	35,38,390.96
Ambulance Bus (MPLAD F	12,63,503.75				12,63,503.75	1,89,525.56	10,73,978.19
Equipments &							
Accessories (NCCP)	2,38,31,450.45				2,38,31,450.45	35,74,717.57	2,02,56,732.88
Current Year	50,59,42,652.83	96,95,376.00	11,44,09,115.00	7,14,23,071.00	55,86,24,072.83	5,95,42,009.88	49,90,82,062.95
Previous Year	46,50,03,142.45	7,19,92,190.00	3,73,62,348.00	53,27,419.00	56,90,30,261.45	6,30,87,608.62	50,59,42,652.83


 Director
 Dr. B. Barooah Cancer Institute
 Guwahati-16


 Director
 Dr. B. Barooah Cancer Institute
 Guwahati-16



SCHEDULE-12 : CAPITAL GRANT-IN-AID

Grants received from	Amount (Rs.)	
	Current Year	Previous Year
Govt. of India Department of Atomic Energy (4/18(1)/2017/R&D-II/11828) Dated: 11-09-2017	10,00,00,000.00	19,03,62,000.00
	10,00,00,000.00	19,03,62,000.00

SCHEDULE-19 : GRANT-IN-AID

Grants received from	Amount (Rs.)	
	Current Year	Previous Year
North East Council (NEC/MED/BBCI/197/12) Dated 17-08-2017	8,00,00,000.00	8,12,31,000.00
Government of Assam (HLB178/2002/PT-170) Dated : 06-11-2017	10,06,00,000.00	7,95,36,000.00
	18,06,00,000.00	16,07,67,000.00



[Signature]
 Director
 Dr. B. Borooah Cancer Institute
 Guwahati- 16

[Signature]
 FINANCE AND ACCOUNTS OFFICER
 DR. B. BOROORAH CANCER INSTITUTE
 GUWAHATI-16

PATIENT INFORMATION LEAFLET

*Dr. B. Borooah Cancer Institute is your hospital. Please help to keep the Hospital clean. **Do not litter garbage or spit on the walls of the buildings.** Please read the following points in order to familiarize yourself with the facilities available in this hospital. In case of any difficulty you can approach **DEEPSHIKHA Help Desk** situated near the reception counter or **Social Investigator OPD Room No.5**. In case of any complaints you can directly approach any officer of Administration in the Administrative Block.*

1. You can open a patient file in any of the **3** existing categories as per your suitability: **general, reimbursement and private**. Please read the reception counter notice boards for details.
2. Please state your **name, age and address** correctly at the time of registration. Any correction needed later will require production of a **court affidavit** from you.
3. Please procure **receipt against payment of cash** for registration fee, hospital dues, investigation charges etc. Please do not pay cash to any person without obtaining a receipt. Any person demanding money from you for doing any service should be brought to the notice of the Director or Administrative Medical Officer of the Institute.
4. All cancer related radiological investigations (X-rays, Ultrasonography, Mammography, Orthopantogram, C.T.Scan and MRI) and Pathological investigation (Blood, Urine, Stool, Immunohistochemistry, biopsy, biochemistry etc) facilities are available within the hospital premises at highly subsidized rates. Endoscopy facility is also available. If any person directs you to do investigations outside the hospital please inform Administration.
5. Hospital is well equipped for providing treatment in Surgery, Radiotherapy, Chemotherapy and Pain & Palliative care.
6. Tobacco Cessation Clinic for helping persons in quitting the habit of tobacco consumption is available **FREE OF COST TO ALL**.
7. **Free Treatment facility** (subject to Hospital rules & regulations) is available for BPL (Below Poverty Line) Card holders only. Applications should be filled up in Hospital format available at Office of Administrative Officer or Sister in-charge.
8. **Jironi Ghar** (Attendants' lodge) is available next door to the hospital campus for boarding facilities of patients' attendants and relatives.
9. Ambulance service is available.
10. 24 hour Pharmacy service at subsidized rate is available.
11. Canteen service is available.
12. Indian Overseas Bank and PCO facilities are available.
13. Yoga facility is available on Saturdays.
14. Meditation and all-religion community prayer hall is available.
15. Mortuary cabinet for preservation of dead bodies is available.
16. Kindly fill in the Hospital services appraisal form on discharge which is made available at Room No.5, OPD building.
17. If you or anyone else whom you know of is interested in conducting cancer awareness activities in your locality, then kindly contact Deptt. of Preventive Oncology, OPD building, Room No.4, Phone No. 0361-2472366 extn. 242 for organizing such events.

By order of BBCI Administrate

হস্পিতালৰ বিষয়ে ৰোগীয়ে জানিবলগীয়া তথ্য।

ডাঃ ভুবনেশ্বৰ বৰুৱা কৰ্কট প্ৰতিষ্ঠান আপোনাৰ চিকিৎসালয়। চিকিৎসালয়খন পৰিষ্কাৰ-পৰিচ্ছন্নকৈ ৰখাত আমাক সহায় কৰক। য'তে ত'তে জাৱৰ-জোখৰ আৰু পিক পেলাই লেতেৰা নকৰিব। চিকিৎসালয়ত থকা সা-সুবিধাসমূহৰ বিষয়ে ভালদৰে জানিবলৈ তলৰ কথাখিনি মন দি পঢ়ক। যদি কিবা অসুবিধা পায় অভ্যর্থনা কক্ষৰ ওচৰত থকা দীপশিখা অথবা বহিৰ্বিভাগৰ ৫ নং কোঠাত সামাজিক তদন্তকাৰী বিষয়া (ছ'ছিয়েল ইনভেষ্টিগেটৰৰ) লগত যোগাযোগ কৰক। আপোনাৰ যদি কিবা অভিযোগ থাকে তেন্তে প্ৰশাসনীয় বিভাগৰ যিকোনো বিষয়াক অবগত কৰক।

- (১) আপোনাৰ সুবিধা অনুসৰি তলত উল্লেখ কৰা ধৰণৰ যিকোনো শ্ৰেণীৰ এখন ফাইল ৰোগীৰ বাবে খুলি লব পাৰে।
(ক) সাধাৰণ (জেনেৰেল) (খ) পৰিসোধিত (ৰিইম্বাৰ্ছ) (গ) ব্যক্তিগত (প্ৰাইভেট)।
- (২) ৰোগীৰ পঞ্জীয়নৰ সময়ত আপোনাৰ নাম, বয়স আৰু ঠিকনা শুককৈ দিয়ক। পিছত কিবা শুধৰণীৰ প্ৰয়োজন হ'লে ন্যায়ালয়ৰ শপত নামা (এফিডেফিট) জমা দিব লাগিব।
- (৩) পঞ্জীয়ন মাচুল, চিকিৎসালয়ৰ বায়, ৰোগী পৰীক্ষা আদিৰ বাবে ৰছিদ সংগ্ৰহ কৰক। ৰছিদ নোলোৱাকৈ কোনো ব্যক্তিকে কোনো ধন আদায় নিদিব। কোনো ব্যক্তিয়ে কোনো সেৱাৰ বিনিময়ত ধন দাবী কৰিলে লগে লগে সঞ্চালকক অথবা প্ৰশাসনীয় চিকিৎসা বিষয়াৰ দৃষ্টি গোচৰ কৰক।
- (৪) কৰ্কট ৰোগৰ লগত জড়িত সকলো ধৰণৰ ৰেডিঅ'লজীকেল পৰীক্ষা (এক্সৰে, আলট্ৰা চনোগ্ৰাফী, মেমোগ্ৰাফী, অৰথ' পেণ্টোগ্ৰাম, সিটি স্কেন আৰু এম আৰ আই); পেথোলজীকেল পৰীক্ষা (তেজ, প্ৰসাব, মল, ইমুনো হিষ্টে'কেমিষ্ট্ৰি, বায়প্ৰি, বায়োকেমেষ্ট্ৰি আদি) অতি কম নিৰিখত কৰাৰ বাবে চিকিৎসালয়ৰ চৌহদৰ ভিতৰতে সুবিধা আছে। যদি কোনো ব্যক্তিয়ে এই পৰীক্ষাসমূহ বাহিৰত কৰাৰ বাবে আপোনাক কয়, চিকিৎসালয়ৰ প্ৰশাসনক অবগত কৰক।
- (৫) কৰ্কট ৰোগৰ চিকিৎসাৰ বাবে প্ৰয়োজনীয় শৈল্য-চিকিৎসা, ৰেডিঅ'থেৰাপী, কেমোথেৰাপী আৰু বিষ উপযম কেন্দ্ৰ (পেইন এণ্ড পেলিয়োটিভ কেয়াৰ) আটাইকেইটা বিভাগেই সম্পূৰ্ণ সুসজ্জিত।
- (৬) ধৰ্ম্মাৰ্থ নিবাৰণ কেন্দ্ৰৰ দ্বাৰা ধৰ্ম্মাৰ্থ সেৱাৰ নিবাৰণৰ ব্যৱস্থা বিনামূলীয়াভাবে কৰা হয়।
- (৭) দৰিদ্ৰ সীমাৰেখাৰ তলত বাস কৰা ৰোগীৰ বাবে বিনামূলীয়া চিকিৎসাৰ ব্যৱস্থা আছে (চিকিৎসালয়ৰ নীতি-নিয়ম সাপেক্ষে)। ইয়াৰ বাবে চিকিৎসালয়ৰ নিৰ্দিষ্ট প্ৰ-পত্ৰত আবেদন জনাব লাগিব। আবেদন পত্ৰ প্ৰশাসনীয় বিষয়াৰ কাৰ্যালয়ৰ অথবা নাৰ্চৰ তত্ত্বাৱধানক (চিষ্টাৰ-ইন-চাৰ্জ) ৰ পৰা সংগ্ৰহ কৰিব পাৰিব।
- (৮) ৰোগীৰ লগত অহা পৰিচৰ্যাকাৰী ব্যক্তিৰ থকাৰ সুবিধাৰ বাবে 'জিৰণি ঘৰ'ৰ ব্যৱস্থা আছে।
- (৯) এম্বুলেন্স সেৱাৰ ব্যৱস্থা আছে।
- (১০) ৰেহাই মূল্যত ২৪ ঘণ্টীয়া ফাৰ্মাচীৰ সুবিধা আছে।
- (১১) কেণ্ডিনৰ সুবিধা আছে।
- (১২) ইণ্ডিয়ান অভাৰচীজ বেংকৰ শাখা আৰু পি.চি.অ'ৰ সুবিধা আছে।
- (১৩) প্ৰতি শনিবাৰে যোগাভাসৰ ব্যৱস্থা আছে।
- (১৪) প্ৰাণায়াম আৰু সৰ্বধৰ্মৰ প্ৰাৰ্থনা গৃহৰ সুবিধা আছে।
- (১৫) মৃতদেহ সংৰক্ষণৰ বাবে শীত-তাপ নিয়ন্ত্ৰিত 'শৰ-গৃহ'ৰ ব্যৱস্থা আছে।
- (১৬) অনুগ্ৰহ কৰি ৰোগীসকলে চিকিৎসালয়ৰ সেৱাৰ মান নিৰূপন প্ৰ-পত্ৰ পূৰণ কৰক।
- (১৭) যদি আপুনি বা অন্য কোনোৱে আপোনাৰ অঞ্চলত কৰ্কট ৰোগ সজাগতা শিবিৰ আয়োজন কৰিবলৈ ইচ্ছুক বা আগ্ৰহী তেন্তে অনুগ্ৰহ কৰি উক্ত ঠিকনাত যোগাযোগ কৰক— ধৰ্ম্মাৰ্থ নিদান কেন্দ্ৰ, কোঠা নং - ৩, নতুন অ পি ডি বিল্ডিং, ডাঃ ভুবনেশ্বৰ বৰুৱা কৰ্কট প্ৰতিষ্ঠান, গোপীনাথ নগৰস গুৱাহাটী- ৭৮১ ০১৬, ফোন নং - ০৩৬১-২৪৭ ২৩৬৬, এক্সটেনশ্বন নং - ২৪২, ওয়েবছাইট- www.bbcioline.org, ই-মেইল : tccguwahati@rediffmail.com

ডাঃ ভুবনেশ্বৰ বৰুৱা কৰ্কট প্ৰতিষ্ঠানৰ প্ৰশাসনীয় বিভাগৰ দ্বাৰা প্ৰচাৰিত

Skill Development Programme for Financial Rehabilitation of Patients and Relatives

Dr B Borooah Cancer Institute
16-31 May, 2017



Abu Sama Ali (Patient)

Trainee - Zarina Begum
Noonmati, Kamrup(M)
Contact No- 9577009036, Hospital No-A-58682

I am feeling happy for attending this training programme. Though I am 65 years old woman, I am eager to take this training with a hope that in future I may earn regularly which will help my family and above all it will help my husband's treatment. Also, I believe that in future after completing this training, I will be efficient enough to provide training to my village people. I am thankful to BBCI for providing us this platform.

Late Rubul Ahmed

Trainee Name Ms. Pinky Begum
Ulubari, Guwahati



My brother underwent his treatment in this institute for more than 3 years but he passed away on November 2016. I was informed about the water hyacinth training programme from this institute. I was very interested about it and joined the programme. My brother was the only person to run the family. His demise had shattered the entire family. I am happy to get such opportunity to take part in this 15 days learning programme. I convey my gratitude to all who are associated behind organizing this learning programme.



Suma Sarkar

Madhu Sarkar
Misa, Ramrai Pati, Nagaon
Contact No-7637885765, Hospital No-C03222

My hobby is to learn new things and utilise my skills in livelihood. I am undergoing my treatment in this hospital since 1st May 2017. I am obliged to the hospital for providing me free treatment facility under Health Minister Cancer Patient Fund (HMCPF). In addition to this, the hospital has also provided me the opportunity to learn a creative art. I wish, I will recover from my disease soon and thankful to hospital for organizing this training camp which has added a ray of new hope for living.

Manju Rai Chetri

Late Dilip Chetri
Dudnoi, Goalpara
Contact No-8876444604, Hospital No-A-19273



Since last 11 years I am undergoing my treatment at Dr B. Borooah Cancer Institute. At present I am receiving treatment in the Pain and Palliative Care Department. I joined training programme from 16.5.2017. I am feeling

happy and hope that after this training I will be able to make household products from water hyacinth (Pani Meteka). In the long run, I expect to get monetary benefit from this training. Further, I am thankful to Pain and Palliative Care Department for organizing training session.

Dr B Borooah Cancer Institute (RCC), Guwahati, email : bbc_i_info@yahoo.co.in, www.bbcionline.org

Dr B Borooah Cancer Institute (RCC), Guwahati

Warning Signal of Cancer

Nine Warning Signals of Cancer

(CAUTION US)

- C** hange in bowel or bladder habits.
- A** sore that does not heal.
- U** nusual bleeding or discharge.
- T** hickening of skin / lump in the breast or elsewhere.
- I** ndigestion or difficulty in swallowing.
- O** bvious change in a wart or mole.
- N** agging cough or hoarseness of voice.

- U** nexplained anemia, fever.
- S** udden unexplained weight loss.

Childhood Cancer

- C** ontinued, unexplained weight loss
- H** eadaches, often with early morning vomiting
- I** ncreased swelling or persistent pain in bones, joints, back, or legs
- L** ump or mass, especially in the abdomen, neck, chest, pelvis, or armpits
- D** evelopment of excessive bruising, bleeding, or rash

- C** onstant infections
- N** whitish color behind the pupil
- C** ausea which persists or vomiting without nausea
- E** onstant tiredness or noticeable paleness
- R** eye or vision changes which occur suddenly and persist
- ecurrent or persistent fevers of unknown origin

Head & Neck Cancer

- Lump in the mouth or neck
- Soreness, redness or white plaque in the mouth not getting better.
- Non-healing ulcer.
- Dry cough that does not go away.
- Feeling that something is caught in the throat most of the time.
- Difficulty in swallowing.
- Swelling of the jaw.
- Loosening of teeth.
- Restricted mouth opening
- Double vision
- Bleeding in mouth or from nose
- Ear ache that does not go away
- Hearing loss on one side
- Frequent and unexplained ear infections
- Stuffiness on one side of nose that does not go away.
- Decreased sense of smell or bad breath.

Breast Cancer

- Lump or thickening within the breast armpit.
- A discharge from the nipple.
- A discolouration or change in the texture of the skin overlaying the breast (dimpling/puckering/Scaling)
- A recent change in the nipple direction retraction (inward turning).

Cervical Cancer

- Bleeding between a women's menstrual periods.
- Bleeding after sexual intercourse.
- Bleeding after menopause (cessation of menstruation)
- Irregular blood stained vaginal discharge
- Unexplained weakness / tiredness / weight loss.

কৰ্কট ৰোগ নিয়ন্ত্ৰণ অভিযান

ডাঃ ভুবনেশ্বৰ বৰুৱা কৰ্কট প্ৰতিষ্ঠান
কৰ্কট ৰোগ প্ৰতিৰোধ আৰু প্ৰাথমিক অবস্থাত চিনাক্তকৰণ

কৰ্কট ৰোগৰ ৯টা প্ৰাথমিক লক্ষণ

- ডিঙিত কাইট লাগি থকাৰ দৰে অনুভব কৰা, খোৱাত লগা বা মাত ভাঙি যোৱা।
- জিভা, মূখ বা গালৰ ভিতৰত ঘাঁ হোৱা আৰু লাহে লাহে বাঢ়ি অহা।
- স্তন, ডিঙিৰ বাহিৰত বা যি কোনো ঠাইত টেমুনা উঠা আৰু টান হৈ পৰা।
- অনিয়মিত বক্তস্ৰাৱ হোৱা।
- বদহজম অথবা আহাৰ গ্ৰহণত অসুবিধা পোৱা।
- দেহত থকা তিল অথবা মাহৰ ম্পষ্ট পৰিবৰ্তন।
- সঘনাই হোৱা কাঁহ বা কৰ্ণস্বৰ সলনি হোৱা।
- সহজে ধৰি নোৱাৰা বক্তহীনতা, জ্বৰ।
- হঠাৎ শৰীৰৰ ওজন হ্রাস হোৱা।

কৰ্কট ৰোগ প্ৰতিৰোধৰ বাবে লবলগীয়া সাবধানতা

- অধিক পৰিমাণৰ সেউজীয়া শাক পাচলি খোৱা
- অধিক পৰিমাণৰ ফল-মূল খোৱা
- যিকোনো ধৰণৰ ধূঁপাত সেৱন বৰ্জন কৰা
- অত্যধিক চৰি যুক্ত খাদ্য আৰু অধিক নিমখ যুক্ত খাদ্য বৰ্জন কৰা
- নিয়মীয়া শাৰীৰিক পৰিশ্ৰম অথবা ব্যায়াম

জৰায়ুৰ কৰ্কট ৰোগ

মহিলাৰ জৰায়ু গ্ৰীবাৰ কৰ্কট ৰোগ প্ৰতিৰোধ অথবা প্ৰথম অৱস্থাত চিনাক্ত কৰণৰ বাবে চিকিৎসকৰ পৰামৰ্শ গ্ৰহণ কৰি পেপ্ টেষ্ট পৰীক্ষা / এচিটিক এচিড বা আয়ডিন মিশ্ৰনৰ দ্বাৰা জৰায়ুগ্ৰীবাৰ পৰীক্ষা কৰক।

আশংকাৰ কাৰকসমূহ (জৰায়ুগ্ৰীবাৰ কৰ্কট ৰোগ)

- কম বয়সতে যৌন সম্পৰ্ক।
- কম বয়সতে বিবাহ।
- ২০ বছৰ বয়সৰ আগতে গৰ্ভধাৰণ।
- কম সময়ৰ ব্যৱধানত গৰ্ভধাৰণ।
- অত্যধিক যৌন প্ৰবনতা।
- যৌনাস্থ স্নায়ুবিধি সন্মতভাবে পৰিষ্কাৰ কৰা নাথায়।
- যৌনাস্থ সংক্ৰমণ বিশেষকৈ এইচ পি ভি (Human Papilloma Virus)ৰ দ্বাৰা সংক্ৰমণ।
- ধূঁপাত সেৱন।
- পৰিপূষ্টিৰ অভাৱ আৰু অজ্ঞানতা।

সংকেত আৰু লক্ষণসমূহ

- দুটা মাহেকীয়া ঋতুস্ৰাৱৰ মাজৰ সময়খিনিতো বক্তক্ষৰণ হোৱা।
- যৌনসঙ্গমৰ পিছত বক্তক্ষৰণ হোৱা।
- বজেনিবিৰ্তি (Menopause) পিছতো বক্তক্ষৰণ হোৱা।
- অনিয়মিতভাবে যোনিৰ পৰা বগা বা বক্তমিশ্ৰিত স্ৰাব নিৰ্গত হোৱা।
- বাখ্যা কৰিব নোৱাৰা ধৰণ, দুৰ্বলতা / ভাগৰ লগা / ওজন কম।

স্তনৰ কৰ্কট ৰোগ

মহিলাৰ স্তনৰ কৰ্কটৰোগ প্ৰথম অৱস্থাত চিনাক্ত কৰণৰ বাবে প্ৰতি মাহত এবাৰকৈ দাপোণত স্তনৰ স্ব-পৰীক্ষণ কৰক আৰু চিকিৎসকৰ দ্বাৰা স্তনৰ পৰীক্ষা আৰু মেমোগ্ৰাফিৰ বাবে পৰামৰ্শ গ্ৰহণ কৰক।

আশংকাৰ কাৰকসমূহ

- বৰ্দ্ধিত বয়স।
- বংশ পৰিয়ালত আন কাৰোবাৰ, বিশেষকৈ প্ৰথম বৰ্গৰ আত্মীয় (মাক, ভনীয়েক বা মাইয়েক) কাৰোবাৰ, যদি আগতে স্তনৰ কৰ্কট ৰোগ ধৰা পৰিছে অথবা উল্ভকৌশিক (Fibrocystic) স্তনৰ ৰোগ (খতুস্ৰাৱৰ লগত জড়িত স্তনৰ বৰ্দ্ধিত লদাৰ দৰে বেদনাদায়ক অৱস্থা) আছে।
- প্ৰথম ঋতুস্ৰাৱৰ কম বয়সতে হোৱা।
- ৩০ বছৰ বয়সৰ পিছত প্ৰথম গৰ্ভধাৰণ হোৱা।
- কোনো সন্তান নাই।
- যিসকল মহিলাই সন্তানক নিজৰ গাখীৰ খুটুৱা নাই।
- পলমকৈ বজেনিবিৰ্তি (ঋতুস্ৰাৱ বন্ধ) হোৱা।
- খাদ্যজড়িত কাৰক যেনে মদ্যপান (সপ্তাহত তিনিবাৰতকৈ অধিক), অধিক জৈৱচৰ্বি থকা খাদ্য আৰু স্কুলতা (শৰীৰৰ অত্যধিক ওজন)।
- হৰমান চিকিৎসা।

ৰোগৰ লক্ষণ আৰু উপসৰ্গ

- কায়তিৰ কাষত, স্তনৰ ভিতৰত লদা বা টেমুনা সৃষ্টি হোৱা।
- স্তনৰ পৰা বস ওলোৱা।
- স্তনৰ ওপৰচোৱাৰ চালৰ বঙ সলনি হোৱা অথবা চালৰ মন্থতা সলনি হোৱা (পোষ্টেকা পৰা, শেট্টোৰা পৰা, চাল এৰাই যোৱা)।
- স্তনৰ পৰা আকাৰ আৰু দিশ সলনি হোৱা বা কেঁচ খাই যোৱা (ভিতৰলৈ সোমাই যোৱা)।

গৰেখণাপত্ৰৰ বাবে উৎকৃষ্টতাৰ প্ৰমাণপত্ৰ লাভ

ফ্ৰান্সৰ আন্তৰ্জাতিক কৰ্কট সন্মিলনত সন্মানিত অসমীয়া চিকিৎসক



প্ৰতিদিন বাস, চক্ৰবৰ্তী, ৯ নৱেম্বৰ
১৫ বছৰ বয়সৰ অসমীয়া ইন্ডিগোলেণ্ড
লৈ গৈছিল ২০১৫ চনত। সেই ১৫ বছৰ
এই পৰিচালনা পৰিকল্পনাৰ সূচনী
কৰ্মৰ পৰা হৈছে ১৫ বছৰ অসমীয়া
ইন্ডিগোলেণ্ড লৈ গৈছিল ২০১৫ চনত।
১৫ বছৰ বয়সৰ অসমীয়া ইন্ডিগোলেণ্ড
লৈ গৈছিল ২০১৫ চনত। ১৫ বছৰ
এই পৰিচালনা পৰিকল্পনাৰ সূচনী
কৰ্মৰ পৰা হৈছে ১৫ বছৰ অসমীয়া
ইন্ডিগোলেণ্ড লৈ গৈছিল ২০১৫ চনত।

SUNDAY, SEPTEMBER 30, 2018

BBCI team for world cancer meet

STAFF REPORTER
GUWAHATI, Sept 29: Two doctors and a basic researcher of Dr B Borooah Cancer Institute (BBCI), Guwahati, will be attending the World Cancer Congress (WCC) at Kuala Lumpur, Malaysia from October 1 to 4. The World Cancer Congress is an international conference organised by the Union for International Cancer Control (UICC).
BBCI director Dr Anil Chandra Katak, said that the team will present a paper on cancer in patients of and above 90 years. Katak will present a paper that showed patients in late stages who completed treatment had similar survival compared to patients with early cancers.
This is for the first time that three research papers from the institute highlighting cancer research will be presented at the WCC.

Subsidised drugs at BBCI pharmacy

ALIFALF HASSAN
Guwahati: Dr B. Borooah Cancer Institute (BBCI) has recently launched a pharmacy to provide medicines at highly subsidised prices.
Earlier, most of the patients from here used to go to Tata Memorial Hospital (TMH), Mumbai, in search of subsidised chemotherapy drugs.
The BBCI pharmacy, where 120 varieties of anti-cancer drugs are available, sells anti-cancer and chemotherapy drugs at the subsidised rate similar to that of the Mumbai institute.
Prices of drugs at the BBCI pharmacy are lower by 40 to 60 per cent than pharmacies outside, an institute source said. Highly expensive monoclonal antibodies like Rituximab



BBCI director Dr Anil Chandra Katak, pictured by U.P. Phukan

Govt healthcare beneficiaries to get services at rly & Army hosps

Sushmi.Dey@timesgroup.com
New Delhi: Beneficiaries of government-funded health insurance scheme Pradhan Mantri Jan Arogya Yojana (PM-JAY) will soon get treatment at all railway, Army and ESIC hospitals as well as at some hospitals owned by public sector units (PSUs) across the country.
In a move to enhance capacity and increase accessibility for patients to avail of hospitalization, the National Health Agency – responsible for implementation of the health insurance scheme – is trying to expand the network of hospitals by empanelning those in the government sec-

Stoma clinic at BBCI from Sept 8

STAFF REPORTER
GUWAHATI, Sept 5: A stoma clinic will be started at Dr Borooah Cancer Institute (BCI), Guwahati, from September 8.
This will be the first time that a dedicated Stoma clinic would be set up in the three eastern region.

person with stoma can lead a normal physical and social life, BBCI said in a statement.
Training will be imparted to nurses on recognizing stoma abnormalities, importance of effective communication in stoma care, including cultural and religious considerations, care of the stoma patient in the immediate post-operative period, support that may be needed to become independent, practical demonstration on understanding of the general nutritional requirements for the three types of stoma and of products used in stoma care, and finally, requirements for the safe discharge from hospital of a patient with a stoma.
At BBCI, permanent stoma is created on an average annually for 15-20 patients who are unable to take food orally or there is obstruction in discharge of urine or stool.
In addition to this, around 361 tracheostomies (stoma in the wind pipe) are performed at BBCI to overcome breathing difficulties for patients with advanced head and neck cancers.
The stoma clinic which is first of its kind in the region will help ostomates learn about stoma care, said BBCI.
The clinic will be managed by trained nurses under supervision of surgical oncologists at BBCI.
The Ostomy Association of India, which is a voluntary organisation of ostomates, nurses, and doctors dedicated to the service of fellow ostomates, will also train two nurses from BBCI at Tata Memorial Hospital, Mumbai, for rendering better services to patients of the region.

14-day training on early detection of common cancers begins

STAFF REPORTER
GUWAHATI, Oct 22: A 14-day training programme on early detection of common cancers with special focus on 'Visual Inspection using Acetic Acid' for staff nurses working at various government health centres got under way at the Dr B Borooah Cancer Institute (BBCI) today.
The training programme is being organised by the National Health Mission, Assam in collaboration with the Department of Preventive Oncology at BBCI and Assam Cancer Care Foundation. Staff nurses from five districts – Kamrup, Barpeta, Nagaon, Jorhat and Dibrugarh – are participating in the training.

Certificate course on 'domestic help care giver' to be launched

STAFF REPORTER
GUWAHATI, Oct 21: City-based Dr B Borooah Cancer Institute (BBCI) is going to introduce a certificate course in Domestic Help Care Giver from November 1.
The programme will have both theoretical and practical sessions, said an official statement.
"Individuals with 10-12 standard and any previous certificate course and this will be self-employment oriented. The certificate course in Domestic Help Care Giver will provide the services of volunteers, BBCI has started the Domestic Health Services, Ge-

BBCI initiatives for cancer patients, attendants

STAFF REPORTER
GUWAHATI, Nov 16: To commemorate one year of takeover of the Dr Bhudameswar Borooah Cancer Institute (BBCI) by the Department of Atomic Energy (DAE), Government of India as a unit of Tata Memorial Centre, Mumbai, BBCI today announced several initiatives for the benefit of its patients and attendants.
Addressing a press conference, Anil Chandra Katak, Director of BBCI said that to reduce scan machine and a high-dose radio isotope therapy ward which is a first of its kind in the entire North East will be started within a month. Earlier, patients had to go outside for radio isotope therapy due to the absence of this facility. To provide better care for patients, a number of doctors, nursing and paramedical staff have been inducted and private practice by doctors has been abolished," he said.
Prizing out that cancer is usually treated in a multi-disciplinary manner, BBCI has started a new pharmacy which now sells expensive anti-cancer drugs/chemotherapy at the same highly-subsidised price of TMH, Mumbai. Altogether 150 varieties of anti-cancer drugs have been made available. At present these prices in outside pharmacies are higher by 60 per cent to 80 per cent," he added.
Highly expensive monoclonal antibodies like Rituximab

কৰ্কট ৰোগ নিৰাময়ৰ জীৱনদায়িনী ঔষধ কৰ্কট প্ৰতিষ্ঠানত কম মূল্যত বিক্ৰীৰ ব্যৱস্থা শিশু ৰোগীৰ উপশম কেন্দ্ৰ ডিচেপ্তৰত মুকলি হ'ব

মহানগৰ লাভৰি সেৱা
গুৱাহাটী, ১৬ নবেম্বৰ: কৰ্কট ৰোগ নিৰাময়ৰ জীৱনদায়িনী ঔষধ যথেষ্ট কম মূল্যত গুৱাহাটীৰ ডাঃ ভদ্রেশ্বৰ বৰুৱা কৰ্কট প্ৰতিষ্ঠানত মুকলি হ'ব।
ঔষধ বিক্ৰী কৰা হৈছে। লক্ষ্যবস্তু হৈছে প্ৰতিষ্ঠানৰ সমাজসেৱাৰ্থীকৈ কম বে প্ৰতিষ্ঠানত কৰ্কট ৰোগীৰ চিকিৎসা কৰা শিশু ৰোগীসকলৰ একাংশত প্ৰতিষ্ঠানৰ চিকিৎসাৰ বাবে।
গুৱাহাটী, ১৬ নবেম্বৰ: কৰ্কট ৰোগ নিৰাময়ৰ জীৱনদায়িনী ঔষধ যথেষ্ট কম মূল্যত গুৱাহাটীৰ ডাঃ ভদ্রেশ্বৰ বৰুৱা কৰ্কট প্ৰতিষ্ঠানত মুকলি হ'ব।
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27th November 2017 on day of take over of BBCI by DAE/TMC