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PRINTED MATTER

STAR
Personal & Caring Health Insurance
The Health Insurance Specialist

September 2016

THERE ARE MANY CANCER SURVIVORS LIVING TODAY!

•

CHALLENGE THE CANCER AND SAVOUR THE VICTORY.

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ABOUT YOUR COMPANY

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Upcoming issue will focus on Special children...

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MESSAGE FROM CMD

My Dear Policyholder,

Thank you for continuing to patronize our Company. Our Company operates on the premise 'Customer First, Everything else next'. Naturally every operation in the Company spins around the Customer as the focal point. In tune with this approach, our Company has been educating the Customer through an In-house Magazine about the advances in Health Care Management.

True to its noble objective, this issue has been designed to dwell on 'Cancer Cure' including real life experiences of cancer survivors. I am confident that the articles contributed by experts will be of immense use for the readers.

I take this opportunity to thank our Customers enabling our Company to complete Rs. 2008 crore premium during the financial year 2015-16. We look forward to your support to complete Rs. 2800 crore in the current financial year.

Always at your service
with kind regards,

V. JAGANNATHAN
Chairman-cum-Managing Director



FOREWORD

Greetings from Your very own "Star Health"

We, from Star Health and Allied Insurance Company Ltd, continue with each issue of our health magazine to reach out to all customers and create health awareness in them. This magazine is our continuing effort ensuring our customers are looked after and are empowered with knowledge of preventive care, treatment scope and post treatment care as well... Taking into account the emergence of newer effective treatments for cancer in this issue, we focus on "**Cancer is curable - Curable Cancer**"

Your health is our priority and we always wish our customers a happy, healthy and disease-free life.

The professionals who contribute articles in our magazine, as always, are chosen based on their proficiency and I am confident that each one of you will benefit from their updated expertise. On this occasion I congratulate all the authors for their valuable inputs and members of the Editorial Board for their determination and efforts to bring out this magazine with customer-centric topics.

Dr. S. PRAKASH, MS., FRCS (Glasg) FAIS
Senior Executive Director
STAR HEALTH AND ALLIED INSURANCE CO. LTD

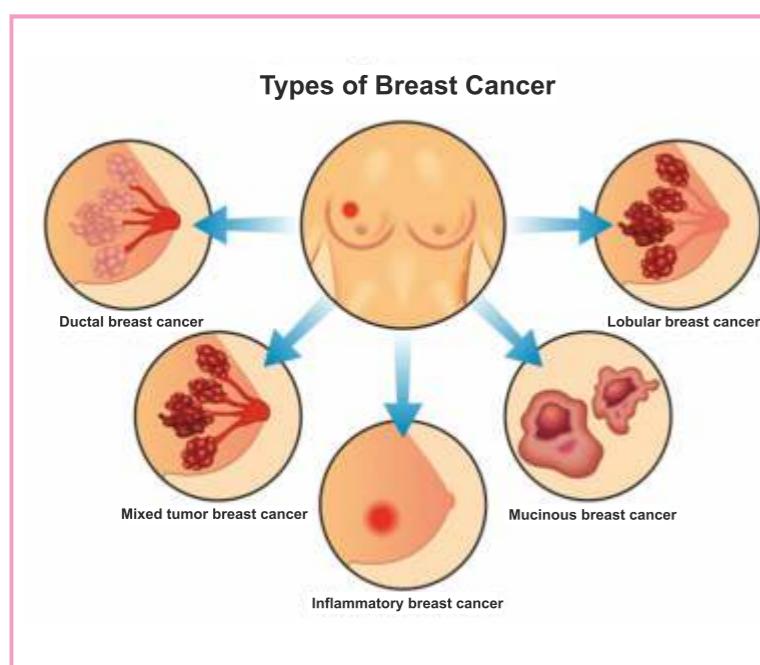
Ladies be aware so you LIVE well

“Owing to the lack of awareness about the disease and the absence of a breast cancer screening program, the majority of breast cancers are diagnosed at a relatively advanced stage”

The 5-year relative survival rate for women with stage 0 or stage I breast cancer is close to 100%. For women with stage II breast cancer, the 5-year relative survival rate is about 93%

Which are amazing statistics and offer hope for women affected. Breast cancer is one of the most common cancers awareness of affecting women Worldwide.

Breast cancer is the most common cancer of urban Indian women and the second most common in rural women. Owing to the lack of awareness of the disease and the absence of a breast cancer screening program, the majority of breast cancers are diagnosed at a relatively advanced stage.

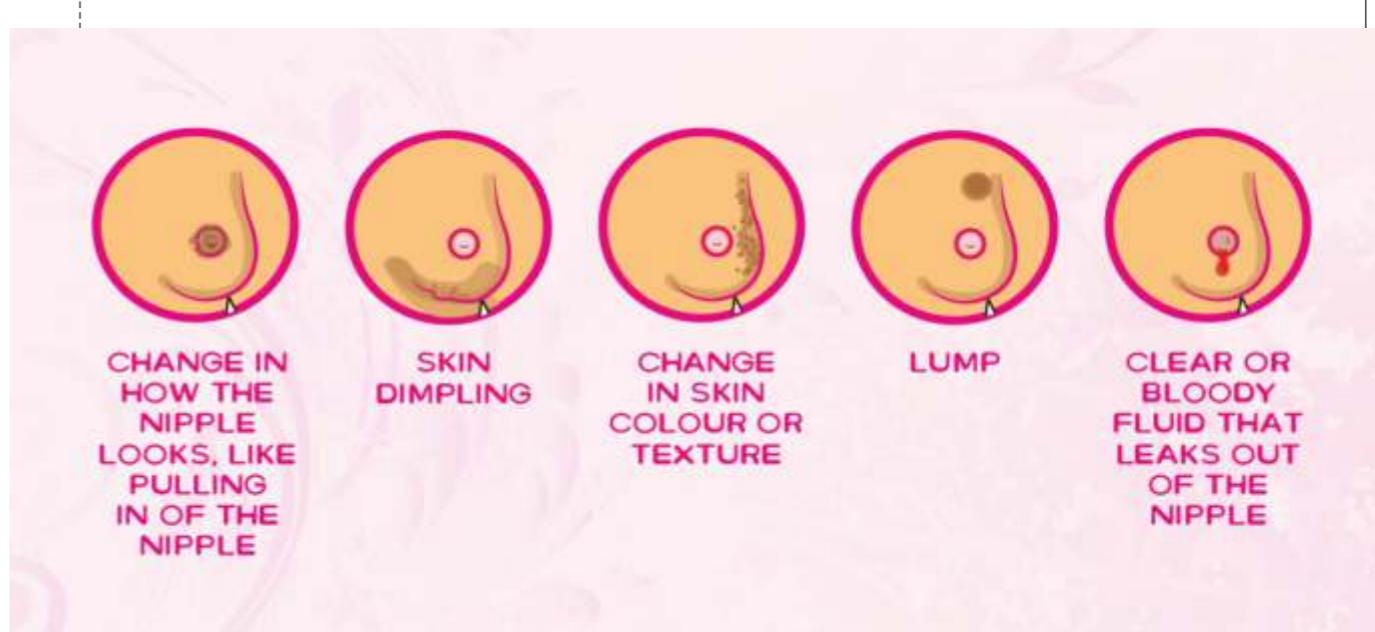


The quality of care available for breast cancer patients varies widely according to where the patient is treated

Although there are some centers of excellence providing multimodality protocol-based treatment at par with the best anywhere in the world, the vast majority of breast cancer patients undergo inadequate and inappropriate treatment due to lack of high-quality infrastructure and sometimes skills, and above all financial resources. The recent emphasis on health education, early diagnosis of cancers, and more public facilities for cancer treatment are expected to bring about the much needed improvement in breast cancer care in India.

Risk Factors

Although breast cancer can develop for no apparent reason, there are certain risk factors which increase the chance that breast cancer will develop. These include:



- Age. The risk of developing breast cancer roughly doubles for every 10 years of age. Most cases develop in women over the age of 50.
- Where you live. The rate of breast cancer varies between countries. This may reflect genetic or environmental factors.
- Family history – This means if you have close relatives who have or have had breast cancer. In particular, if they were aged under 50 when diagnosed.
- If you have had a previous breast cancer.
- Being childless, or if you had your first child after the age of thirty.
- Not having breast-fed your children.
- Early age of starting periods (Menarche).
- Chest being exposed to radiation.
- Having a menopause over the age of 55.
- Taking continuous combined hormone replacement therapy (HRT) for several years (in women over 50 years), leading to a slightly increased risk.
- Excess alcohol consumption

Family History and Genetic Testing

About 1 in 20 cases of breast cancer are caused by a faulty gene which can be inherited. The genes BRCA1 and BRCA2 are the most common faulty genes.



Breast Cancer Symptoms

A breast lump

The usual first symptom is a painless lump in the breast although most breast lumps are not cancerous. Most breast lumps are fluid-filled cysts or fibroadenomas (a clumping of glandular tissue) which are benign. However, you should always see a doctor if a lump develops, as the breast lump may be cancerous.



Other symptoms of breast cancer

Other symptoms which may be noticed in the affected breast include:

- Changes in the size or shape of a breast.
- Dimpling or thickening of some of the skin on a part of a breast.
- The nipple becoming inverted (turning in).
- Rarely, a discharge occurring from a nipple (which may be bloodstained).
- A rare type of breast cancer, causing a rash around the nipple, which can look similar to a small patch of eczema.
- Rarely, pain in a breast. Pain is not a usual early symptom. Many women develop painful breasts (mastalgia) and this is not usually caused by cancer.

The first place that breast cancer usually spreads to is the lymph glands (nodes) in the armpit (axilla). If this occurs, you may develop a swelling or lump in an armpit. If the cancer spreads to other parts of the body then various other symptoms can develop.

How is breast cancer diagnosed?

Initial assessment

If you develop a lump or symptoms which may be breast cancer, a doctor will usually examine your breasts and armpits to look for any lumps or other changes. You will normally be referred to a specialist. Sometimes a biopsy of an obvious lump (see below) is arranged, but other tests may be done first such as:

- Mammogram. This is a special X-ray of the breast tissue.
- Ultrasound scan of the breast.
- MRI scan of the breast. This is more commonly performed on younger women, who may have denser breast tissue.

Biopsy - to confirm the diagnosis

A biopsy is when a small sample of tissue is removed from a part of the body. The sample is examined under the microscope, to look for abnormal cells. A specialist may take a biopsy with a needle which is inserted into the lump for some

cells to be withdrawn. Sometimes the doctor may be guided as to where to insert the needle with the help of a mammogram or ultrasound scan. Sometimes a small operation is needed to obtain a biopsy sample.

The biopsy sample can confirm or rule out breast cancer. Also the cells from a tumour can be assessed and tested to determine their grade and receptor status (see above).

What is the treatment for breast cancer?

Treatment options which may be considered include surgery, chemotherapy, radiotherapy and hormone treatment. Often a combination of two or more of these treatments is used. The treatments used depend on:

- The cancer itself - its size and stage (whether it has spread), the grade of the cancer cells, and whether it is hormone responsive or contains HER2 receptors; AND
- The woman with the cancer - your age, whether or not you have had your menopause, your general health and personal preferences for treatment.

You should have a full discussion with a specialist who knows your case. They will be able to give the pros and cons, likely success rate, possible side-effects and other details about the various possible treatment options for your type of cancer.

You should also discuss with your specialist the aims of treatment. For example:

- Treatment aims to cure the cancer in many cases - In particular, the earlier the stage of the cancer, the better the chance of a cure. Because of routine mammography, many women are diagnosed with breast cancer in

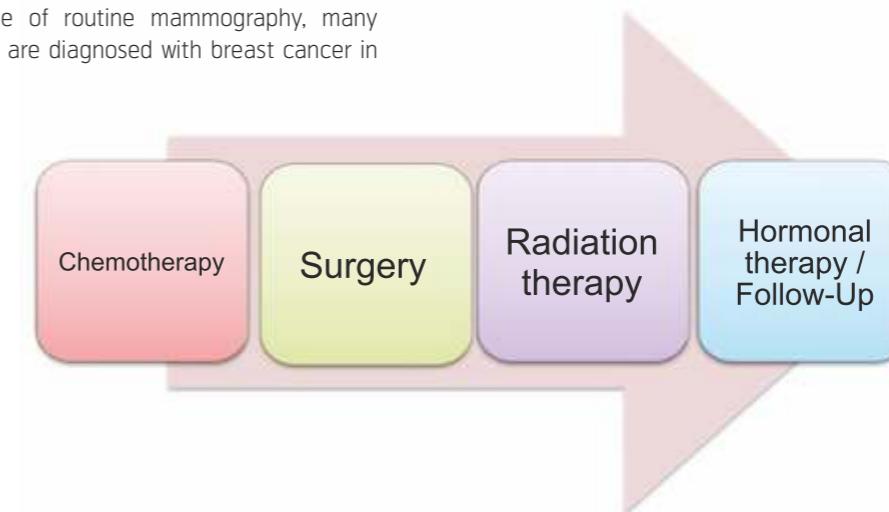
the early stages and have a good chance of a cure. Doctors tend to use the word remission rather than the word cured. Remission means there is no evidence of cancer following treatment. If you are in remission, you may be cured. However, in some cases a cancer returns months or years later. This is why doctors are sometimes reluctant to use the word cured.

• **Treatment may aim to control the cancer.** If a cure is not realistic, with treatment it is often possible to limit the growth or spread of the cancer so it progresses less rapidly. This may keep you free of symptoms for some time.

• **Treatment may aim to ease symptoms** in some cases. Even if a cure is not possible, treatments may be used to reduce the size of a tumour, which may ease symptoms such as pain. If a cancer is advanced then you may require treatments such as nutritional supplements, painkillers, or other techniques to help keep you free of pain or other symptoms.

“ 7-9 lac cancers are detected each year in India - on an average
8-10 cancers are detected daily.

More than 2/3rd (70%) cancers are related to life style which are preventable. ”

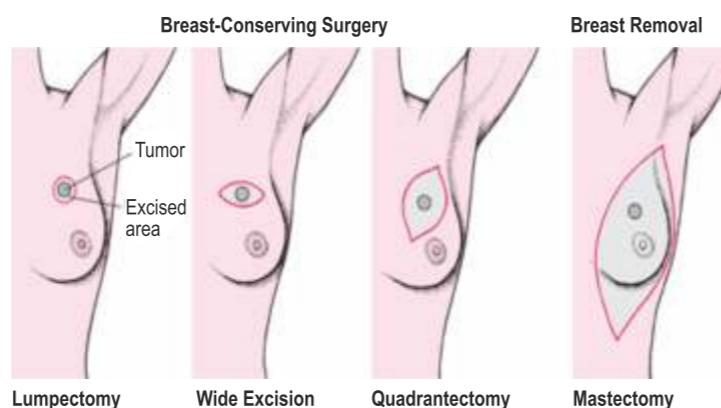


Surgery

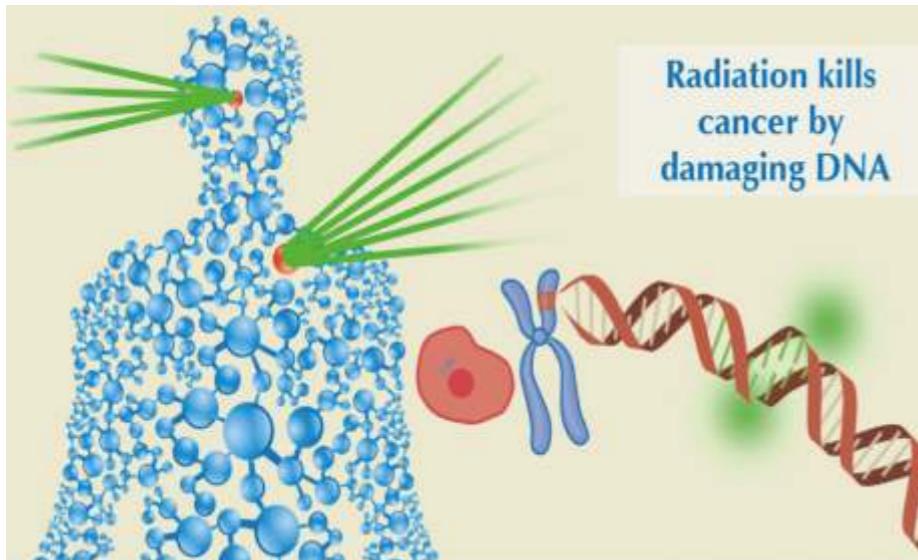
The types of operation which may be considered are:

- Breast-conserving surgery. This is often an option if the tumour is not too big. A lumpectomy (or wide local excision) is one type of operation where just the tumour and some surrounding breast tissue are removed. It is usual to have radiotherapy following this operation. This aims to kill any cancer cells which may have been left in the breast tissue.

- Removal of the affected breast (mastectomy). This may be necessary if there is a large tumour or a tumour in the middle of the breast. It is often possible to have breast reconstructive surgery to create a new breast following a mastectomy. This can often be done at the same time as the mastectomy, although it can also be done months or years later. There now are many different types of reconstruction operations available.



- A sentinel lymph node biopsy may be performed. This is a way of assessing if the main lymph nodes draining the breast contain cancer. If they are clear then the remaining lymph nodes in the armpit will not need to be removed. If it is not possible to do this, one or more of the lymph nodes in the armpit may be removed. This helps to stage the disease accurately and to guide the specialist as to what treatment to advise following surgery.



For breast cancer, radiotherapy is mainly used in addition to surgery. For example, if you have breast-conserving surgery it is usual to have radiotherapy to the affected breast after the operation. This aims to prevent breast cancer returning in the same breast. When radiotherapy is used in addition to surgery it is called adjuvant radiotherapy.

Radiotherapy

Radiotherapy is a treatment which uses high-energy beams of radiation which are focused on cancerous tissue. This kills cancer cells, or stops cancer cells from multiplying.

“ I had three sessions of chemotherapy so it was really tough. It was hard to go through it. But while I was going through my treatment, I was always motivated that I was going to come back and play for India. I think that's what kept me going and got me through. ”

Yuvaraj Singh

Hormone Treatments

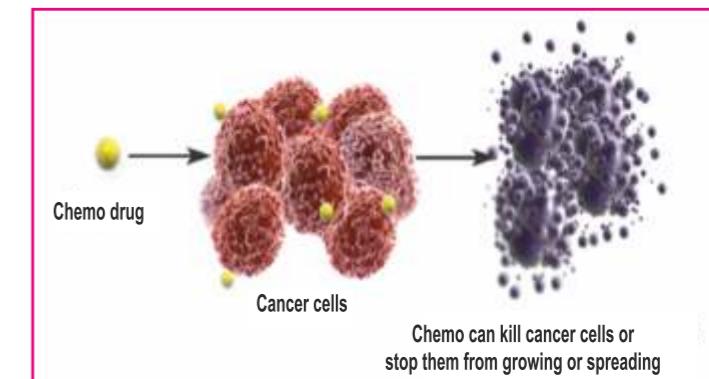
Some types of breast cancer are affected by the female hormones oestrogen and progesterone. These hormones stimulate the cancer cells to divide and multiply. Most oestrogen and progesterone are made by the ovaries. Treatments which reduce the level of these hormones, or prevent them from working, are commonly used in people with breast cancer.

Hormone treatment works best in women with hormone-responsive breast cancer, but they sometimes work in cancers classed as non-hormone-responsive.

Chemotherapy

Chemotherapy is a treatment of cancer by using anti-cancer medicines which kill cancer cells, or stop them from multiplying.

When chemotherapy is used in addition to surgery it is known as adjuvant chemotherapy. For example, following surgery you may be given a course of chemotherapy. This aims to kill any cancer cells which may have spread from the main tumour site.



Chemotherapy is sometimes given before surgery to shrink a tumour so that surgery may have a better chance of success and also a smaller operation may be performed. This is known as neoadjuvant chemotherapy. The type of chemotherapy given may depend on the type of cancer.

New gene tests are being developed to help doctors decide which women will benefit the most from chemotherapy.

Chemotherapy may also be used for some women to treat breast cancer which has spread to other areas of the body.

Prevention

A lot of breast cancers are detected at an early stage, by breast screening. However, a small number are not. Some women may have developed breast cancer before they have their first mammogram and some may develop breast cancer between mammograms. All women of every age should be breast aware. That is, get to know how your breasts and nipples normally look and feel. Try to recognise any changes that occur before and after your periods. See your GP if you notice any changes, lumps, or other abnormalities in your breasts or nipples. Don't wait until your next scheduled screening appointment.

There are also two preventative types of treatment; surgery to remove the breasts (mastectomy) or medication. Surgery can be used to treat breast cancer as well as reduce the chances of developing it. By removing as much breast tissue as possible, a mastectomy can reduce your risk of breast cancer by up to 90%. Like all operations there can be several complications and this is not an easy step to take. If genetic testing has shown you are one of the small number of women from a high-risk family, you will need an in-depth discussion with your doctors, before deciding to have this operation.

Dr. Krithika Murugan,
MBBS MRCS CCBST
Consultant - Breast Cancer Surgery HCG - Bangalore
Mail ID: krithikam@hotmail.co.uk

"NOT JUST A MERE CANCER SURVIVOR, BUT A CANCER CONQUERER"

While researching for people who had lived through cancer with courage and determination for the magazine the name that showed up often in the search engine is Neerja Malik. She calls herself a cancer conqueror not a "mere survivor" who fought the "disturbing" disease not just once but twice

A phone call to her did not get us off to the best start. She thought I was trying to sell her insurance! Ultimately after introductions and clarifications she agreed to meet me at her gracious flat in Boat Club road. As the radiant sun streamed in and sitting with tea and namkeens she spoke freely and candidly. Her courage and spirit were evident.

She was initially diagnosed with breast cancer just a few months before her twins Shivani and Sidharth's 8th birthday, being there for the celebrations was a major motivation for her. She told me how she had been gregarious, bold, a tom boy and also had an insatiable zest for life. An incident regarding a horse which she had ridden and got thrown from had imbued a courageous spirit as her Naval Officer father told her to "Get back on" and it is this spirit I could see that enabled her to conquer cancer and offer support to others in the form of counseling

Her counseling career had started accidentally as a request from her Uncle to motivate a demoralized cancer affected Muslim gentleman.

She explained how even in nursery school she had been a girl beyond her years counseling her tender young classmates and reassuring the parents that "sab Teek Hogaya" .. Everything will be fine.

What came through from my short interaction was her sense of humour and her eloquent words that find form in a book "I Inspire"

After the usual gamut of surgery, chemotherapy and radiotherapy which is the "lot" of many cancer patients life seemed to settle for a while and the tryst with cancer had left her feeling purified.

On Nov 17th 2004 while tossing and turning Neerja felt a discomfort in her right breast and she booked for a mammogram the next day. While getting ready she got a call from Kavitha a dear friend and who after a 45 minute conversation when Neerja said she was "going to the hospital" asked her "Who's the patient?" "Me!" replied Neerja. Kavitha who was a true friend promised to meet her in 10 minutes. She knew she had been visited by the big C again. Another dear friend Suraiya joined her in Mumbai for her surgery. She was calm and OK about everything and even went to see an afternoon show of "Mughal E Azam"

There is much more to write about her but space and time can not do justice.

She is a shining example of how a cancer conqueror should be. May her words and actions inspire our readers and others around affected by the Big C



I Fought Cancer NOT ONCE, But TWICE!



I am a survivor of this deadly disease called cancer. My life has got so much to share, I have always been seen as an energetic and active person amongst others, but it all changed. In 2004 when I was 19, (after multiple misdiagnoses). I was diagnosed with 2nd stage of Hodgkin's lymphoma, I had surgery in neck, followed by chemotherapy and radiotherapy. 12 yrs back, cancer treatment was really hard for me both financially and physically. To sustain the treatment, I had to face severe complications and multiple admissions, but I had a strong feeling that 'It's not an end' which drove me through. After eight months of hardship, I was finally

cured by the Grace of God.

Having done with regular exercise and proper diet, I could lead a happy life for 10 years. But, the relapsed in 2014, and this time, it has progressed to 3rd stage and I was distressed and hopeless, so I left the hospital saying 'I will not take treatment'. After the compulsion of my family members, I stepped into the hospital again believing doctors. The treatment advised was not the same as before; doctors decided to give combination Chemotherapy called 'DHAP'. My health deteriorated due to a high dosage of treatment and I wasn't able to endure it further. Somehow, I crossed two cycles of chemotherapy, side effects of third cycle including hepatitis C were dreadful. My Haemoglobin level was very low; I was under treatment continuously for 20 days. Doctors were clueless about next action as there was no improvement. One fine day, a nurse who took care of me in the hospital, gave a thought to believe in one spirit and I started trusting myself again, taking a high risk, doctors discharged me from the hospital. My hope and health gradually improved. I strongly believed in my spirit, it always said 'Never give up'. Anything can be achieved when you have faith in what we think of. 'My faith has healed me' and is driving me.

Light and dark are the most common phenomenon of human life, but when we trust in light and follow it, our darkness disappears.

I am doing very well. Initially, I enjoyed 10 years of life after my treatment and again nearly 1 1/2 years since I completed treatment, cancer is no longer a fear. I enjoy an active life and normal diet. I'm grateful that the Lord almighty gave me these past years. I'm living proof that only God knows the number of "all the days ordained for me" (Psalm 139:16). I thank God for each day He gives me.

Benefits of VMAT

How is Radiotherapy Advancing?

VMAT (Volumetric arc modulated therapy) Technology in Radiotherapy: Benefits

What is Radiotherapy?

Radiotherapy uses high-energy rays to treat disease. It can be given both externally and internally.

- External radiotherapy aims high-energy x-rays at the affected area using a large machine.
- Internal radiotherapy involves having radioactive material placed inside the body.



Radiotherapy works by destroying cancer cells in the area that's being treated. Normal cells can also be damaged by radiotherapy, which may cause side effects. Cancer cells cannot repair themselves after radiotherapy, but normal cells usually can.

Role of RT in head and neck cancers:

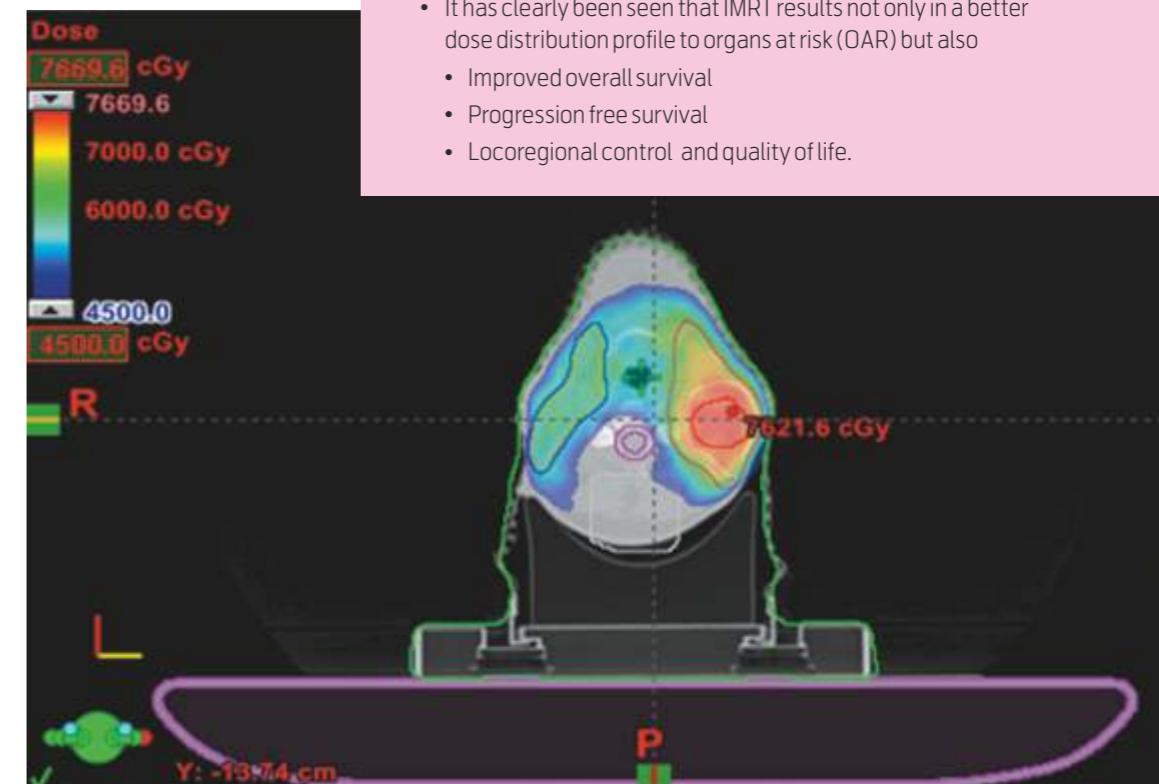
The three main types of treatment for managing head and neck cancer are radiation therapy, surgery, and chemotherapy.

The primary treatments are radiation therapy, surgery, or both combined; chemotherapy is often used as an additional, or adjuvant, treatment. The optimal combination of the three treatment modalities for a patient with a particular head and neck cancer depends on the site of the cancer and the stage (extent) of the disease.

“ CANCER IS A WORD, NOT
A SENTENCE ”
- John Diamond

IMRT is a type of radiotherapy: Advantages:

- Intensity modulated radiotherapy (IMRT) in head and neck cancers (HNC) has been in use for around two decades.
- It has clearly been seen that IMRT results not only in a better dose distribution profile to organs at risk (OAR) but also
 - Improved overall survival
 - Progression free survival
 - Locoregional control and quality of life.



Images of IMRT planning for cancer treatment

VMAT is an advanced radiotherapy method: which allows the radiation dose to be delivered accurately and efficiently in significantly shorter treatment time.

VMAT is the next generation arc therapy technique that establishes new standards for radiation therapy treatment speed and dose reduction to the patient. VMAT treatment is specially recommended for patients who cannot lie still for long time and the movement can impair the delivery of radiation. It is also beneficial for patients undergoing re-irradiation as the sharp fall of dose in the proximity of previous treated fields can be achieved.

It has been seen in various studies that techniques like VMAT, first introduced in 2007, results in:

1. Fast delivery of radiation
2. Provide better sparing of OARs and
3. This may also enable more frequent online imaging which can be good for the cancer patients

All this means a better outlook for treatment of the patients with ultimate quality of life being maintained.

Dr. Sheh Rawat, MBBS MD
Chief of Radiation Oncology Services
Dharamshila Hospital & Research Centre, New Delhi

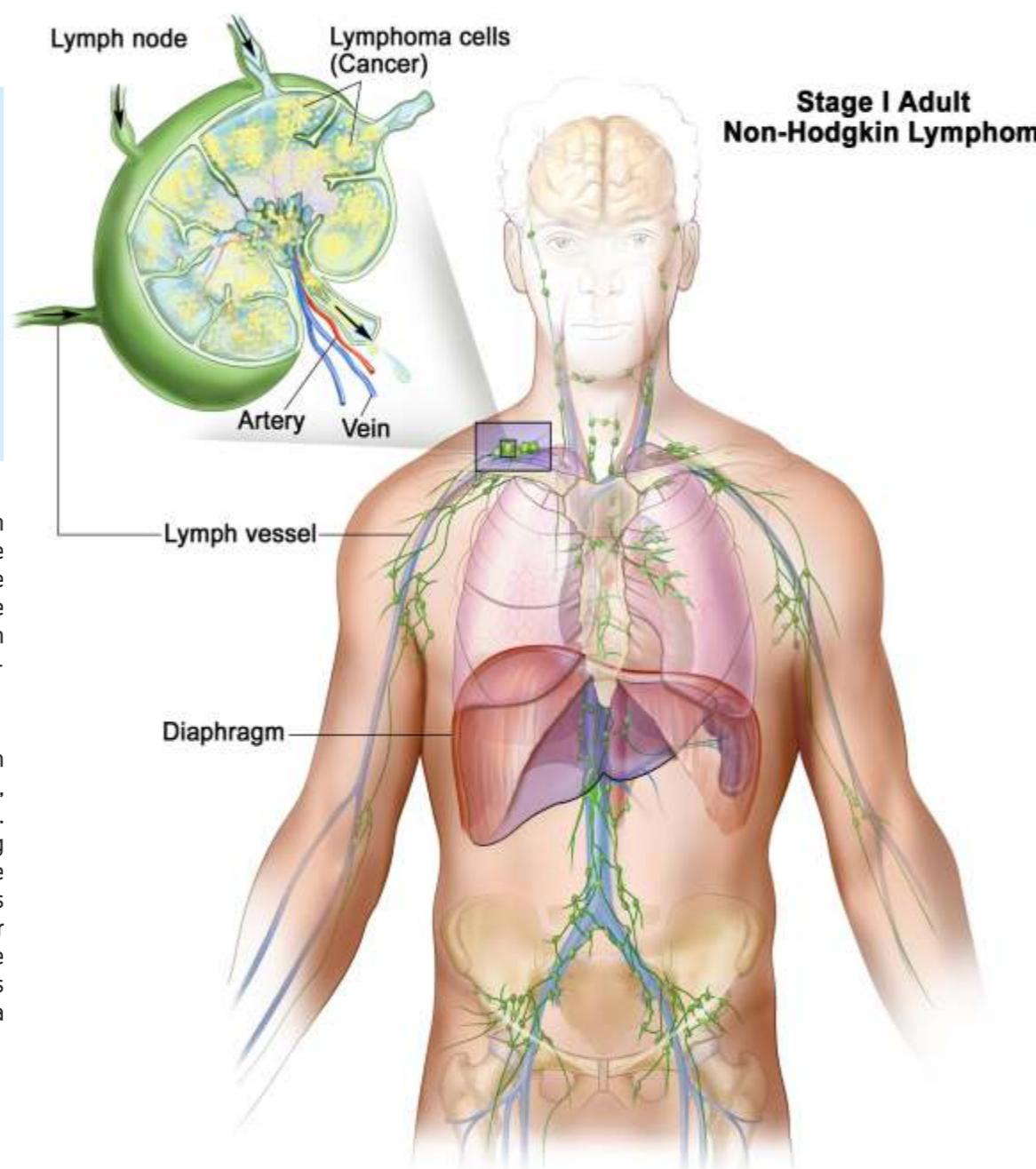
LYMPHOMA is HIGHLY CURABLE

"You should never ignore painless lumps anywhere in the body as these could be lymphoma or any other Cancer."

Lymphomas are cancers that arise from lymphocyte, a type of white cell. Lymphomas are the most common cancers of the blood and are one of the most curable cancers. Lymphomas are of two types Hodgkin Lymphoma and non Hodgkin lymphoma. There are over 50 types of non-Hodgkin lymphoma.

Symptoms of lymphoma

Lymphocytes reside in structures known as lymph nodes. Lymph nodes are found the neck, armpit, groin, in your abdomen and in your chest. Lymphoma enlarges lymph nodes causing formation of lumps at any of these sites. The commonest manifestation of lymphoma is lumps in the neck. Unlike lumps that are seen after infection, say sore throat, these lumps are painless. You should never ignore painless lumps anywhere in the body as these could be lymphoma or any other cancer.



Stage I Adult Non-Hodgkin Lymphoma

How are lymphomas diagnosed?

The only definitive way to diagnose lymphoma is by a biopsy. Other investigations like a CT scan, MRI scan or a PET scan can only suggest the presence of lymphoma, not give a definite diagnosis. Biopsy is removal of the lymph node, entirely or a part. This can be a challenge for lying deep in the body. A technique known as a CT guided core needle biopsy allows biopsy of deep nodes without surgery.

Amongst all cancers lymphomas require the most expertise for diagnosis. Many lymphomas need specialised techniques that are not available with all labs. The biopsy should be evaluated by an expert pathologist.

How are Lymphomas treated?

Lymphomas are treated by drugs. An important advance in the treatment of lymphoma is the development of anti-lymphoma antibodies.. Rituximab is one such antibody. Antibodies are used with chemotherapy. Radiation is used to supplement drug. Some low grade lymphomas grow very slowly and may not need treatment for years.

Lymphomas are very curable. Some lymphomas have a cure rate of more than 90% if diagnosed in the early stage. This makes timely consultation with a medical oncologist critical.

Dr. Avinash Deo
MD General Med, DM Oncology,
SL Raheja Hospital, Mumbai.

“BREAST CANCER CHANGES YOU,
AND THE CHANGE CAN BE BEAUTIFUL.”
Jane Cook,
Breast Cancer Survivor

DID YOU KNOW THAT
REGULARLY GETTING
A GOOD NIGHT'S
SLEEP HELPS
PREVENT CANCER?



CANCER : HOW THINGS HAVE CHANGED FOR THE BETTER

Cancer, Cancer, Cancer the word brings nothing but Fear, Fear, Fear of life more than fear caused by pistol, knife or any other means in a human life. But it need not today as i have seen how things for cancer survivors have changed for the better

When I think about that deadliest disease, my thoughts are roaming about the pathetic path of life my eldest sister had to take on with pain and agony which ended with her death.

Losing one of her sons at 25 caused much depression, anxiety which messed up her immunity and she had to undergo Hysterectomy and was subsequently diagnosed with Ovarian Cancer.

Being an iron lady and having such a will power she wanted to see that a house is built on the land gifted by her late son before her untimely death and her wish was fulfilled. She had her last breath

in that house only. Though only school final and not a RBI Governor, her financial dealings were so much adorable and educative and her system of managing money is still followed by us.

Her agony of pain & strain, was so much she could not withstand Chemotherapy or Radiotherapy. Her husband (my brother in law) was so innocent that he could not realize the severity of the situation.

Knowing pretty well that her days are numbered she had such a will power that even at the last moment she was quite confident that she will be living more years beating the doctors' prediction.

She was more drawn towards the welfare of her wards, grand children and even neighbours. Not even pet animals were denied her attention

Yes we know that the absence of sophistication of the present medical advancement and various new treatments which are coming up day by day are surely making stories like her more rarer thankfully

She passed away at the age of 58. Our family legend, guide, friend still lives in our heart even after 28 years and will stay there forever.

From that day on wards, I am paying much attention to bring awareness among friends and family not only on cancer issues but health in general among the public.

Mr.Jagannathan
Chennai

“
IF YOU HAVE A FRIEND OR FAMILY MEMBER WITH BREAST CANCER,
TRY NOT TO LOOK AT HER WITH ‘SAD EYES.’ TREAT HER LIKE YOU ALWAYS DO JUST SHOW A LITTLE EXTRA LOVE.”

Hoda Kotb

”



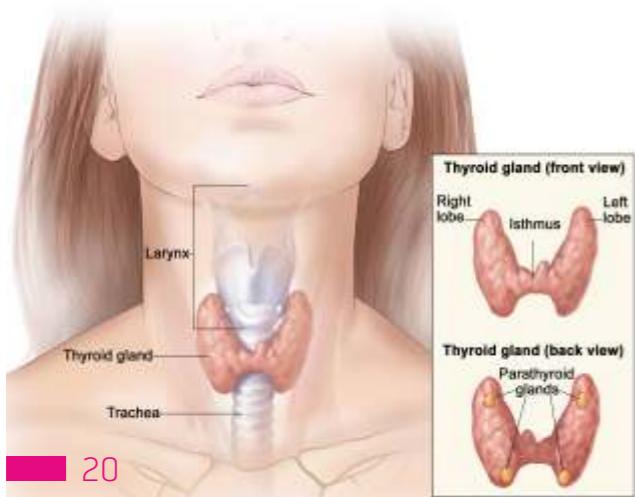
'CANCER, WHEN DETECTED EARLY IS CURABLE'

Dr. S.Ayappan MS, M.Ch (Surgical Oncology), Apollo Hospital - Chennai

When people were first diagnosed with cancer, they would often begin to immediately consider their own mortality and that would be the end of the world for them. However, modern treatment and earlier diagnosis rates mean that cancer is no longer a death sentence. Depending on the location and size of the cancer, it is treatable, and an early diagnosis gives cancer patients an even better chance of survival. With the advent of screening methods (esp. for breast, colorectal, cervical and prostate) and genetic counselling (which are very well popularized in western world and are becoming popular in India) there is a huge Paradigm Shift in Cancer Treatment. Here is a bird's eye view of some common cancers.

Breast Cancer

Due to the widespread awareness about breast cancer, this cancer type is extremely treatable. Women are constantly encouraged to undergo breast examinations and mammograms, so these types of cancers are normally caught at an early stage that makes it easy to treat the cancer. Women diagnosed early with breast cancer have survival rates upto 98%.

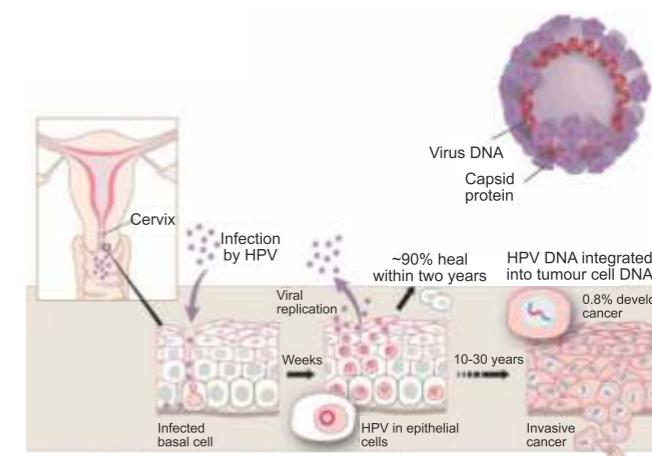


Thyroid Cancer

Most thyroid cancers are very curable especially the papillary and follicular variety. In younger patients, these cancers have a more than 97% cure rate if treated appropriately and can lead a perfectly normal life on proper follow up and treatment.

Cervical Cancer

The quick Pap test that is available at most gynecological visits can detect the presence of abnormal cells on the cervix before they are even cancerous. The cervical cancers are very slow growing, so if they are diagnosed at a precancerous stage, they can usually be treated before they get the chance to develop and spread, offering the patient a normal quality life.



Prostate Cancer

As this form of cancer is detected early it is curable.. Though there are not many symptoms of early stage prostate cancer, regular prostate cancer testing is often encouraged after men reach the age of 50 so that it is diagnosed before it spreads outside of the prostate gland in which case there is a survival rate of 99 percent.

Colorectal Cancer

Colorectal cancer is cancer that starts as a premalignant polyp, that can be easily detected with a colonoscopy. Often, doctors recommend that people over the age of 50 occasionally have a colonoscopy and if any polyps are detected, they can be easily removed before they become cancer. Even in later stages, the survival rate is still at 65 percent and many cases of colorectal cancer can be treated with surgery, instead of chemotherapy and radiation.

Skin Cancer

Skin cancer is one of the most common types of cancer, but it is normally very treatable. Basal cell carcinomas and squamous cell carcinomas are normally a very slow growing form of skin cancer, so they are usually diagnosed and treated before any real harm is done. Normally, treatment for skin cancer just involves removing the portion of skin that has cancerous cells.

To sum it up all, almost all forms of cancer are curable or atleast treatable if detected early and even in late stages the cancers can be managed with the advanced and state of the art health care available, family support and most importantly the patient's own motivation to fight the disease. One must not forget that recovery is not brought about by the physician but by the patient himself.

POTENTIAL OF PREVENTING CANCER

Dr. S. Khanna MD, President, Dharamshila Cancer Foundation And Research Centre, Delhi

According to International Agency for prevention of cancer, 50% of cancers can be prevented with current knowledge gathered, after decades of research

Availability of lot of information about cancer, on internet, has played a great role in making public aware about cancer. But the percentage of net users in India is only about 5%. Therefore we need to make public aware about their risk factors, through print and electronic media.

It is an established fact that Tobacco, Diet, Alcohol and Body weight are together responsible for 34% of cancers. We also know that 45% of cancers in men and 40% of cancers in women can be prevented, if known lifestyles and environment risk factors are taken care of.

Union for International Cancer Control (UICC) in its 2014 report, on the economics of cancer prevention and control pointed out the following:-

- Implementing appropriate strategies for prevention, early detection and treatment could save 24-37 lacs lives a year.
- Investing just \$ 11.4 billion in core prevention strategies in low and middle income countries could save \$100 billions in cancer costs.

Govt. of India has a good cancer control programme, (for more than two decades) where benefits will be seen if it is implemented properly.

Even globally, there is underfunding of research on cancer prevention. An integrated approach for cancer control requires, balancing the emphasis on new personalised treatments, with efforts to prevent the disease on the first place.

Treatment of cancer is extremely expensive due to high tech equipment and its maintenance, extremely expensive drugs and disposables and high payment to scarcely available trained manpower for treating cancer. By preventing 50% of preventable cancers, the Govt. will have lot more money to treat balance 50% of

cancers, which are not preventable as of today.

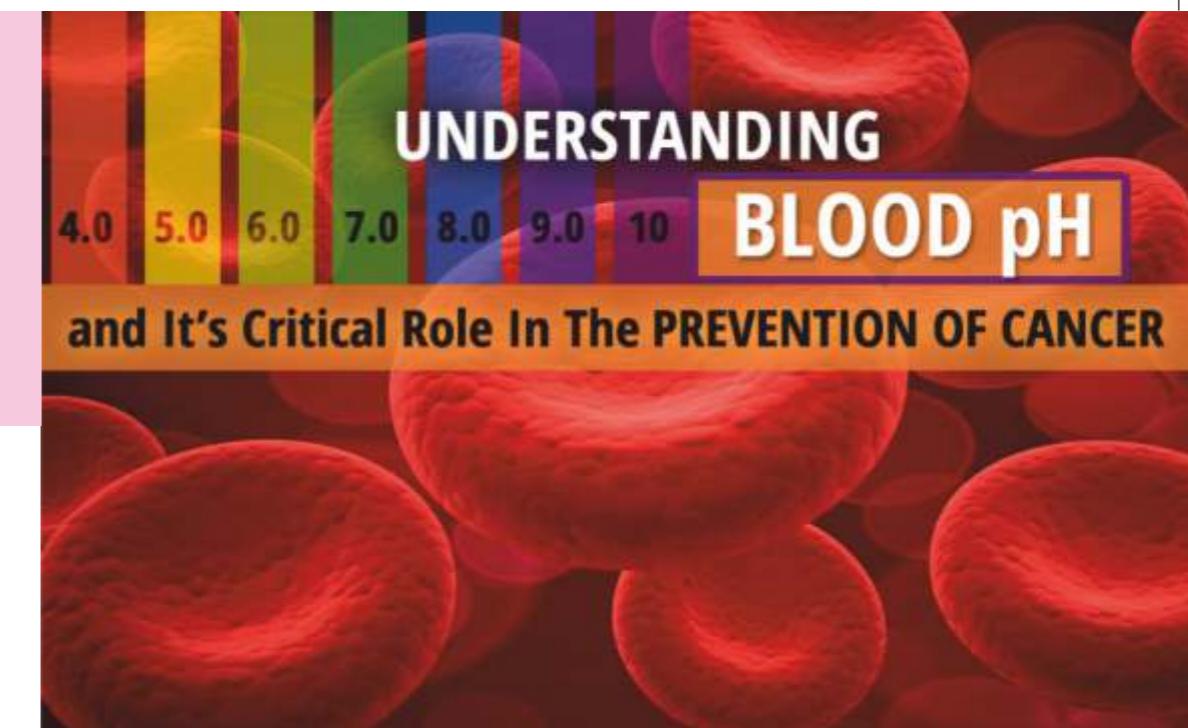
Epidemiologists, Richard Doll and Richard Peto, received Noble Prize for providing the following evidence in 2004:-

- Male smokers born between 1910-1930 lost average 10 years of life.
- Stopping smoking at 40 years of age, brought them 9 years of life.
- Stopping smoking at 30 years of age, brought them nearly the full ten years.

Epidemiologists, Scientists and Research scholars have proved beyond doubt that "Action needs to be taken on two levels to make effective cancer prevention a reality"

First: - Let the entire population know in their vernacular language, about what action they can take to prevent cancer.

Second: - Converting knowledge about risk factors into behaviour change. Information alone does not help. Information initiatives have to be linked to primary healthcare activities in the field e.g. measuring and advising people on their individual risks.



We also have to make healthy choices available, e.g. healthy food to be made available and accessible in schools, restaurants, hotels. Making tobacco products inaccessible, making the entire country tobacco free, stopping use of excessive pesticides, providing safety measures for people working in radiation areas and people exposed to benzene, pesticides fungicides, paints, thinners etc. Decreasing environmental pollution by adopting EURO III standards for vehicles and junking out old polluting vehicles, saving ground water, grains, vegetables and fruits from lethal effect of pesticides by promoting cultivation of organic food are some of the initiatives.

Public also has to be made aware of the causes of cancer, which are as under:-

CAUSES OF CANCER

1. CONSTITUTIONAL

- Our genetic predisposition is responsible for 50% of cancers.

Genetic mutations are going on continuously in all human being, but everyone does not get cancer. What causes impairment of DNA is under active study. With decoding of the genome and identification of few genes, we still have not succeeded in preventing constitutional cancers.



**"GIVE YOURSELF A FEW DAYS TO BE SCARED.
THEN ROLL UP YOUR SLEEVES,
GET WITH YOUR PHYSICIAN, AND
BEAT THE HECK OUT OF YOUR
CANCER."**



2. ENVIRONMENTAL

- Air pollution by vehicles
- Burning of grass, leaves, wood and wires (to extract copper)
- Occupational hazards of working in industries which are manufacturing / handling pesticides, thinners, paints, asbestos etc.
- Radiation workers.
- Too much exposure to sun's ultraviolet rays.
- Extensive use of pesticides in agriculture
- Release of benzene from leather upholstery in closed homes and cars, during hot weather.
- Release of benzene when hot food and beverage are served in plastic cups.

3. BEHAVIOURAL

- Tobacco use in any form whether smoked, inhaled or chewed. One million people died in 2010 due to tobacco use.
- Alcohol consumption
- High fat diet
- Too much consumption of sugar, over salted, spicy smoked food ((barbecue) and processed meat
- Inactivity i.e. too much sitting and not exercising

4. CULTURAL

- Early marriage / Late marriage
- Multiple pregnancies / No children
- Multiple sex partners
- Not breast feeding

5. INFECTIVE

- Hepatitis B
- Human papilloma virus
- Helicobacter pylori

Stay POSITIVE
Stay BRAVE
Stay FOCUSED
Stay FIGHTING
Stay STRONG

BEAT CANCER!

RECOMMENDATIONS FOR CANCER PREVENTION

1



Avoid active and passive smoking e.g. Cigarette, Beedi, Cigar, Churat, Pan Masala, Gutka, Kheni etc.

2



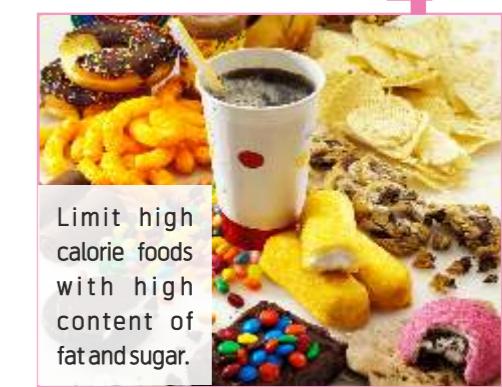
Make your home smoke free.
Support smoke-free policies in your workplace

3



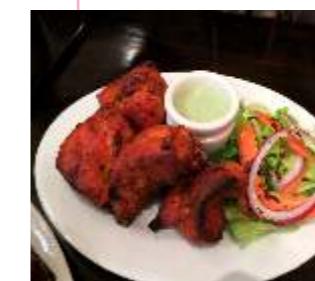
Have a healthy diet i.e. eat whole grains, legumes, fresh fruits and vegetables

4



Limit high calorie foods with high content of fat and sugar.

5



Avoid red meats, smoked or cured foods and hot food / drinks in plastic containers.

6



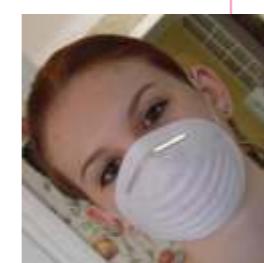
Exercise regularly and actively

7



Limit your alcohol intake.

8



In the workplace, protect yourself against cancer-causing substances by following health and safety instructions.

25



9

Avoid exposure to cleaning fluids, paints, thinners, pesticides, fungicides, chemicals, Plastic containers having hot boiling food.



10

Avoid multiple sex partners



11

Do monthly Self-Examination of the Whole Body



12

Be sure to go for Annual Cancer Checkup with following tests

- Pap smear
- Mammograms
- Ultrasonography
- PSA
- X-ray chest



13

Practice sun safety measures and recognize when skin changes occur.



14

Take part in organised cancer screening programmes for:

- Breast cancer
- Head and Neck Cancer
- Cervical cancer
- Prostate cancer
- Bowel cancer

CANCER POSITIVE HOPE

Cancer is a cloud enveloping society today

Where will people turn to find the better way?

Pollution is a factor as is the food we eat

Bathing in the sun has danger not only heat

Affecting rich and poor it does not see your purse

To get our way through compassionate doctor and nurse

Treatment getting updated on a daily basis

We shall see more survivors with smiling faces

It is a disease no longer to be feared

If it is affecting us or our near and dear

Positive attitude and treatment to be taken

No longer is the cancer patient to be forsaken

Life should be lived with love and joy

Cancer will be beaten by woman, man, girl and boy

By

Dr. Asiya Shahima Khan
AVP - Medical, Star Health

CANCER FIGHTING FOODS



GARLIC:

Higher contents of sulfur compounds stimulates the immune system's natural defences against cancer and has been found that garlic has the potential to reduce tumour growth.



CABBAGE:

Powerful antioxidants like vitamins A and C and phytonutrients such as thiocyanates, lutein, zeaxanthin, isothiocyanates and sulforaphane present in cabbage, stimulates detoxifying enzymes and may protect against breast, colon and prostate cancers.



Tomatoes

Tomatoes contains lycopene, the famous cancer-fighting substance, recent studies show that eating more fruits and vegetables leads to a lower risk of lung, oral, esophageal, and colon cancer.



Broccoli:

Among all the cruciferous vegetables, broccoli is the only one with a sizable amount of sulforaphane, a particularly potent compound that boosts the body's protective enzymes and flushes out cancer-causing chemicals.



Grapes

Purple (Concord) grapes (with their skin and seeds), and to a slightly lesser degree red and black grapes, contain several nutrients that are known to kill cancer cells. These kinds of grapes also contain nutrients to stop the spread of cancer. They also help detoxify the body.



Ginger

Study proves that ginger is 10000 times stronger than chemotherapy and has an effect on different types of cancer.



Avocados

Avocados are rich in a multiplicity of nutrients, including many potent anti-oxidants and phytochemicals as well as vitamins, minerals, fiber and monounsaturated healthy fats that have been linked to reducing the risk of major chronic diseases including cancer.



Orange:

The oil of orange fruit peels has a phytonutrient known as limonene. Limonene stimulates our antioxidant detoxification enzyme system, thus helping to stop cancer before it begins.



Strawberry

Strawberries contain high amounts of specialized nutrients and powerful antioxidants that create apoptosis, a crucial process used by the body to get rid of cells that are abnormal, mutated, or no longer function properly. Apoptosis targets on cancerous cells and destroys them.



Green tea

Antioxidants in green tea act in a very specific way to prevent cancer cells from growing – and are responsible for at least some of the anticancer health benefits of green tea.



Turmeric:

Turmeric's active ingredient is an extracted compound called curcumin helps prevent several forms of cancer including breast, lung, stomach, liver, and colon because of its anti-inflammatory and antioxidant properties. It stops the development of cancer by interfering with the cellular signaling aspects of the disease.



ABOUT COLORECTAL CANCER

Is colorectal cancer curable?

With early detection, colorectal cancer can be prevented and may even be curable. That is why colonoscopy screenings are generally recommended beginning at age 50 years.

American Society for Gastrointestinal Endoscopy says

Nine out of 10 people with colorectal cancer found and treated at an early stage, before it has spread, live at least five years.

WHAT IS COLORECTAL CANCER?

Colorectal cancer is cancer of the colon and rectum that begins with the development of pre-cancerous polyps from the lining of the colon and rectum.

WHAT IS A POLYP?

Polyps are mushroom-like growths that form when cells lining the colon grow, divide and reproduce in an unhealthy, disorderly way. Polyps can become cancerous over time, invading the colon wall and surrounding blood vessels, and spreading to other parts of the body.

What are the screening options for detecting Colorectal Cancer?

Screening tests are the best way to find and remove polyps before they become cancerous, or to find an early cancer, when treatment can be most effective.

Several screening options exist. These include the fecal occult blood test (FOBT), flexible sigmoidoscopy, double contrast barium enema, and colonoscopy. Patients should talk to their colorectal surgeon or other healthcare provider to find out which screening method is right for them.

*"I look at my cancer journey as a gift:
It made me slow down and realize the
important things in life and
taught me to not sweat the small stuff"*

-Olivia Newton-John

Feedback

Sent: Thursday, June 02, 2016 1:54 PM

To: crc.corp

Subject: Performance Appraisal of Mr Abhinav Anand

I Nihalchand Jain Having Claim No 0349488 would like to thank Mr Abhinav Anand for handling my reimbursement claim of Rs 3070 in best way on priority & also keeping in touch with the matter every now & then.

I appreciate much more because no other customer care executive or other department members were handling the matter properly may be due to lack of information or knowledge.

-
Thanks & Regards
Nilchand (Delhi)

To:

crc.corp

Appreciation mail

Dear Farman,

I want to thank you for being honest in responding to my call and resolving the issue which I was facing. Though I talked to multiple executives, all of them gave me false assurance that the claim request will be completed within 20-30 minutes after talking to them but nobody responded back within the stipulated time nor resolved the issue.

It was only you who responded to me within 20 minutes though you promised me that you would resolve it within 30 minutes & also called back and updated about the same.

Appreciate quick response and for being honest. Keep up the good work.:)
Thanks again
Jyothi (Lucknow)

KIND ATTENTION: DR. Nalini Deepa

Dear Dr. Nalini,

Thanks to Star Health Insurance Team's professional support , my wife Chandra Jayaraman now admitted at the Apollo Specialty Hospital (Bangalore) and Dr. Sanjay Pai is operating on her this afternoon for B/L TKR.

With your continued support & post-operation physiotherapy going well, we are confident Chandra would be back on her feet and lead an active life as in the past.

We seek GOD's cherished blessings for you and the support team at Chennai.
Best Regards
V.Jayaraman (Bangalore)

To:

crc.corp

Dear Ms.Nirmala & Team,

I sincerely thank you all for the quick assistance in supporting my claim submitted in respect of wife A.Sivatharshini.

It is very much appreciated the way you all responded to my queries & thereafter finalizing my claim immediately.

Also convey my gratitude to the panel of Doctors concerned in this respect.
Thank you "STAR Insurance team".

Thanks & Regards,
Ahilan N (Kolkata)