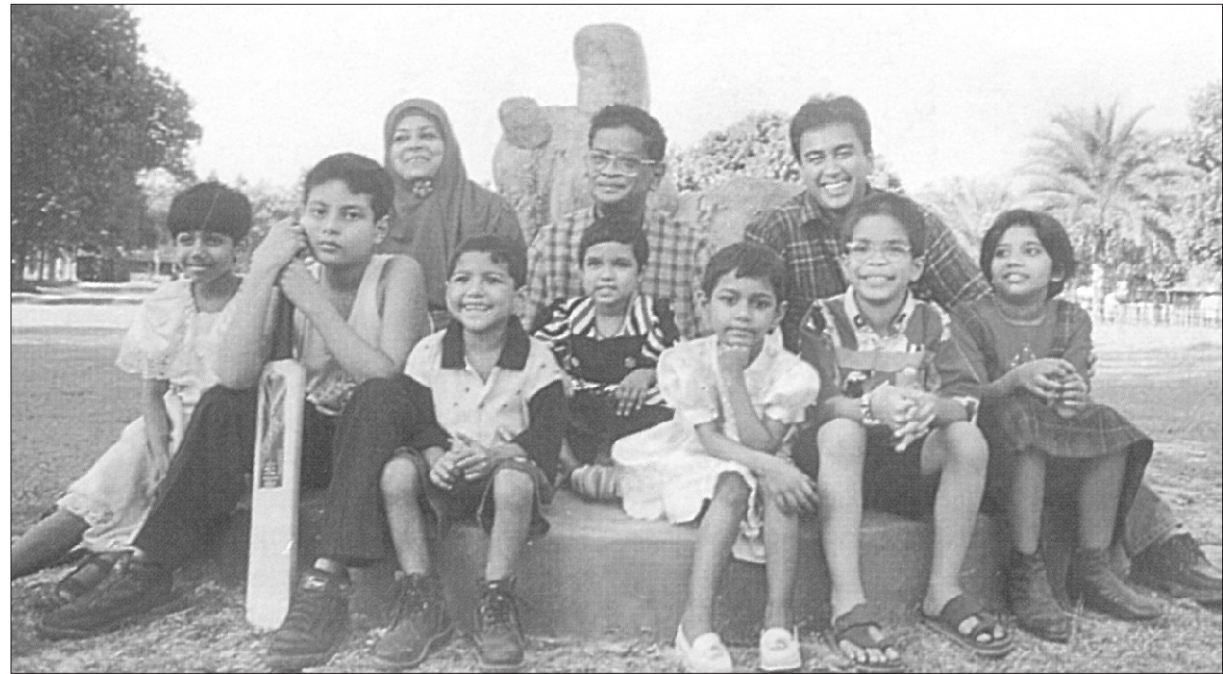


# ASHIC - A hope for childhood cancer survivors

About 6000 children die from blood cancer each year



Noted writer Humayun Ahmed and popular actor Zahid Hassan embrace the ASHIC children

## STAR HEALTH DESK

ASHIC (A Shelter for Helpless Ill Children) is a foundation that endeavors to provide relief to the children surviving with deadly genetic disease like blood cancer and provides for the parents a psychological support base unprecedented in Bangladesh which was set up in 1994. Such unique patients care centre for cancer survivors is the first of its kind in the country and a few other similar centre is now being set up following ASHIC's footsteps.

In Bangladesh, there are tragic stories of thousand of families mostly poor trying to save their child suffering from cancer, while dealing with all their other distresses in life. A country where the priority is usually given to treat children suffering from malnutrition, oncology or treatment for cancer receives virtually no recognition for funds although about 6000 children die from blood cancer. As such, the treatment facilities are lacking, trained doctors are scarce and whatever meager infrastructure there is, it is very poorly maintained. The majority of the people cannot afford the luxuries of adequate treatment for their children. Their children are quickly forgotten by society and they slowly fade into the oblivion of their grieving hearts.

Learning from experience and inspired by the ultimate loss of their beloved Ashic Hossain Choudhury to blood cancer or leukemia at a tender age of three who was treated for a year in Great Ormond Hospital for blood cancer in London, the Choudhury family pioneered ASHIC (A Shelter for Helpless Ill Children).

The foundation is completely dedicated to serving children surviving cancer in Bangladesh in any way possible. Salma Choudhury, Ahic's mother, as the chair person, along with her husband, Afzal H Choudhury, as the president of the foundation started ASHIC in 1994 using their own resources and have led the foundation to grow modestly since its tender beginnings to encompass a range of programmes.

## History

ASHIC as a charity organisation aims;

To take such measures as may enable the children suffering from cancer to make their life memorable and enjoyable through various programmes of sports, entertainment, sightseeing, excursion etc,

To provide emotional support to the family members of the affected children,

To establish "play center" in different hospitals,

To try and fulfil their last wishes,

To run awareness programmes on childhood cancer,

To facilitate accommodation and transportation for the parents to remain close to their children during hospital care,

To provide all possible benefits and services to children suffering from cancer and especially those who are at terminal stage.

To establish home service and offer symptomatic care to those children who are suffering from cancer but wish to stay at home before terminal stage,

To build and establish refuge center and hospitals, treatment center and residential accommodations for the children suffering from cancer, To establish research center.

## Shelter

The shelter is an exclusive accommodation facility for the commuting cancer-affected families or patient attendants. It has been set up at 114, Central Road near Bangabandhu Sheikh Mujib Medical University (BSMMU).

Since all of the treatment facilities for cancer are based in Dhaka, families with sick child come to seek treatment in the capital not only for a few days but often for months. One of the major problems for the commuting families in Dhaka City is accommodation and transportation. Accommodations near the hospital are quite difficult for the parents most of the time. The socio-economic conditions of the patients are poor and treatment procedure for cancer is very lengthy.

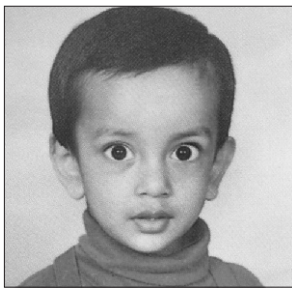
It is a 20 bed accommodation facility in the heart of the city where a patient and the attending parents can stay free of cost and any additional family member can stay at a low cost paying only Tk 30 per day if accommodation is available. SHELTER only accepts families who come on recommendation from hospital authorities.

## Supply of free medicine and accessories

Since 1997, ASIC has entered into an agreement with National Children Cancer Society "NCCS" of USA where ASHIC will receive important cancer medicine, medical equipment and other goods for free. Even though the medicines are donated by NCCS but once they arrive in Bangladesh, the government's bureaucratic tangles pose a big hurdles in getting them released from customs. It often takes months and costs a lot of money paying taxes/duties to free the goods.

## Outing programmes

It is an opportunity for the ASHIC family to get together and spend an enjoyable afternoon (or a day) at interesting places which helps the children to enjoy the brief leisure away from their shelter. It is organised on the last Monday of every month. Concord Entertainment Ltd., owner of the newly created Fantasy Kingdom (Theme Park), at Ashulia, some 30 km from the town, has recently granted a special rebate to the ASHIC children and their families. Under this programme 30 ASHIC members will get free entrance with three rides to Fantasy Kingdom on every last Monday of each month.



Ashic



Afzal H Choudhury and Salma Choudhury

## A specialised hospital for children with cancer is essential

Starhealth spoke to Afzal H Choudhury and Salma Choudhury founders of ASHIC. They shared different aspects about the foundation and views on the problems and future plans.

Salma Choudhury said, "We want to give a good quality of life during the days or months or perhaps years a child is surviving with the dreadful ailment. This is our slogan and I know how my son felt before he died and how badly he needed me just before his terminal stage. So we built this home for the survivors so that the children can be as close as possible with their parents."

When a child is in her/his terminal stage they don't want to express their feelings but I can tell you the pains inside they suffer. In most Western countries there are special homes for exclusive care for such children who suffer from childhood cancer and since we don't have one I thought of creating one for the loved ones.

Since we did not want to depend on donations the beginning was very tough for us. We still spend Tk 30,000 on average a month for recreation, food, accommodation and other facilities but we would welcome any partnerships who generously wish to help take this project forward.

One of the most striking thing is that most parents come to ASHIC at the end or terminal stage when there is little we can do to help. It is very important to raise awareness about childhood blood cancer and we want to build strong partnership with any relevant organisation in doing this but I would invite media to come forward first.

We also have a plan to build a specialised hospital using our own resources which is so badly needed but we need suitable land for this. There are a few friends who would like to help but they first like to see some sort of establishment.



Dr Deen Mohammed performing a surgery

## "Glaucoma is a common problem ignored by many"

“Eye patients do not have to travel outside the country for cataract and glaucoma surgeries”

## NAIMUL HAQ

The Starhealth last week spoke to a leading ophthalmologist Dr Deen Mohammed Nurul Huq who is now serving as Associate Professor at the Sir Salimullah College at Mitford Hospital. He joined this profession in 1984 and obtained his fellow college of physician and surgery (FCPS) in 1991 and since then he has been working as a surgeon in different institutes including National Institute of Ophthalmology (NIO). He also practices as a senior consultant at the Ahmad Medical Centre in the city. Dr Deen is an expert on phaco and glaucoma surgery and talked about the common problems of the eye diseases or defects. Dr Deen performs, on average, 200 surgeries both in public and private hospitals.

Dr Deen said, "For those who are blind, the gift of sight is the greatest gift of all. I believe that sight is a basic human right, and that everyone - including those in the world's poorest countries - should have access to the treatment and eye care that they need. This is my motto and today with the modern machinery in hand we can confidently say that eye patients do not have to travel abroad for cataract and glaucoma surgeries."

**Starhealth (SH): What is glaucoma and what are the treatment regimes?**

**Dr Deen Mohammed (DM) explained.** "Glaucoma" is the term for a diverse group of eye diseases, all of which involve progressive damage to the optic nerve. Glaucoma is usually, but not always, accompanied by high intra-ocular (internal) fluid pressure. Optic nerve damage produces certain characteristic defects in the individual's peripheral (side) vision, or visual field."

**SH: What are the types of glaucoma? How do they vary?**

**DM:** There are three basic types: primary, secondary and congenital.

Primary glaucoma is the most common type and can be divided into open angle and closed angle glaucoma.

Open angle glaucoma is the

type seen most frequently in the Bangladesh. It is usually detected in its early stages during routine eye examinations.

Closed angle glaucoma, also called acute glaucoma, usually has a sudden onset. It is characterised by eye pain and blurred vision.

Secondary glaucoma occurs as a complication of a variety of other conditions, such as injury, inflammation, vascular disease and diabetes.

Congenital glaucoma is due to a developmental defect in the eye's drainage mechanism.

**SH: How is glaucoma detected?**

**DM:** Early detection of open angle glaucoma is extremely important, because there are no early symptoms. Routine eye exams, common after age 45, are a major factor in early detection. People with a family history of glaucoma should be checked at intervals in their 30s or even earlier to establish a baseline.

**SH: Does high intraocular pressure inevitably cause blindness?**

**DM:** No. Glaucoma is a lead-

ing cause of blindness, but high pressure within the eye does not inevitably cause sight loss. In some cases, pressure may be elevated without any detectable abnormal change in vision. Conversely, damage can develop in some eyes even when intra-ocular pressure is not above "normal."

**SH: When is surgery necessary? What happens in glaucoma surgery?**

**DM:** When medication and laser surgery fail to control progression of glaucoma, a surgical procedure known as a filtering operation is recommended to create an artificial outlet for fluid from the eye, thus lowering intra-ocular pressure. Requiring use of an operating microscope and a local anesthetic, this procedure is performed in the hospital and now being done in the country frequently.

**Examine your eye for pressure every six months after age 30**

"There are different types of eye diseases but most patients I receive come with complain of cataract, which is quite a com-

mon disease of the old age. But more importantly I have noticed that people are not aware of glaucoma, which is another major problem.

I want to give emphasis on one particular thing that is every people after age of 30 should check for pressure of his or her eyeball. Once the damage is done by the pressure exerted on the optic nerves it is very hard to bring back vision. So it is my advice to all that everyone after the age of 30 should check for pressure of their eye ball.

**SH: What is being done to bring all people under the eye care facilities?**

Bangladesh also endorsed vision 2020 targets like in other countries in November 2000. Vision 2020 aims at bringing all people under the eye care facilities or in other words everyone should have the access to eye care facility.

We can treat all the preventable blindness. In Bangladesh Sight Savers International has been actively working to the goal of achieving the targets of vision 2020. Helen Keller Intentional,

## CHILDHOOD LEUKEMIA (BLOOD CANCER IN CHILDREN)

The type of leukemia that most often occurs in children is called acute lymphoblastic leukemia, or ALL. As the most common form of childhood cancer, ALL usually strikes between the ages of two and 10. Sometimes described as blood cancer, it affects the white blood cells, which help the body combat infection. In ALL, immature white blood cells divide uncontrollably, accumulating in the bloodstream, bone marrow and lymph system. This invasion of abnormal cells interferes with the production and function of the healthy blood cells making the person with leukemia highly susceptible to infections with little or no defense.

**Q: What is childhood leukemia?**

**A: Leukemia is cancer of the blood cells. However, cancer in children and adolescents is rare.**

**Q: What happens in leukemia?**

**A: Abnormal cancer cells (also called as blast cells) accumulate in the bone marrow. They begin to crowd out the normal blood cells that develop there causing anemia, bleeding and infections. These cancer cells may also spread to other parts of the body such as the lymph nodes, liver, spleen, joints & bones ultimately leading to death.**

**Q: What are the causes of leukemia?**

**A: The cause of blood cancer still remains unknown. However, few factors have been implicated. The incidence of leukemia is high in patients;**

- Exposed to radiation
- Exposed to Benzene, pesticides and herbicides.
- Patients given Chemotherapeutic agents previously.
- Exposed to infectious agents such as Ebstein Barr virus, HTLV I & II virus etc.
- Patients with Bloom's syndrome
- Patients with Fanconi's anemia
- Patients with Down's syndrome
- Patients with Klinefelter's syndrome
- Patients with Wiskott - Aldrich syndrome
- Patients with Ataxia Telangiectasia

**Q: How is leukemia diagnosed?**

**A: On clinical suspicion, a variety of tests are done :- blood tests, bone marrow aspiration & biopsy etc.**

**However, primary diagnosis is made by bone marrow examination.**

**Q: How is a patient with leukemia treated?**

**A: A patient with leukemia is essentially treated by agents that kill the abnormal cancer cells. This is done by either cancer drugs (also called chemotherapeutic drugs or chemotherapy) or by radiation (radiotherapy).**

Source: internet