Beyond the pink ribbon: Why breast cancer survival remains unequal



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In Bangladesh, a breast cancer diagnosis can mark the beginning of two battles: one against the disease and another against fear, financial hardship and delayed treatment.

For countless women, the greatest danger is not simply cancer itself, but discovering it when precious time has already slipped away.

As October marks Breast Cancer Awareness Month, the message is urgent: finding cancer early and receiving timely treatment can mean the difference between life and death.

Breast cancer remains the most common cancer worldwide and a leading cause of cancer deaths among women. Yet the chances of surviving it vary dramatically depending on where a woman lives, how quickly she receives care and whether treatment is affordable.

According to the World Health Organisation (WHO), the global five-year survival rate between 2017 and 2021 was approximately 77.8 per cent. However, the figure was just 41.9 per cent in low-income countries, compared with 87.3 per cent in wealthier nations.

These numbers reveal an uncomfortable truth: survival is not determined by medical advances alone. Access to healthcare matters enormously.

For Bangladesh, where many women face financial pressures, limited awareness and difficulties reaching specialist services, the global findings carry particular significance.

A painless lump may be dismissed. Changes in breast appearance may go unnoticed. Fear of diagnosis, embarrassment or family responsibilities may push medical appointments further down the priority list.

Unfortunately, cancer does not wait for a convenient moment. Recognising these inequalities, WHO launched its Global Breast Cancer Initiative in 2021, bringing together governments, healthcare professionals and organisations to improve breast cancer care worldwide.

The initiative aims to reduce breast cancer deaths by 2.5 per cent annually, potentially saving 2.5 million lives over two decades.





Its approach rests on three essential priorities: helping women recognise warning signs and seek care early, ensuring faster diagnosis, and providing complete treatment and continuing support.

For women in Bangladesh, awareness must extend beyond wearing pink ribbons or sharing social media messages.

Knowing what is normal for one's breasts, recognising unusual changes and seeking medical advice promptly are practical starting points. A new lump, nipple discharge, skin changes or persistent breast discomfort deserves attention, although such symptoms do not necessarily indicate cancer.

Equally important is ensuring that women who seek help can actually receive it.

Affordable testing, accessible specialist services, clear referral pathways and uninterrupted treatment could transform the experience of patients, particularly those living outside major cities.

Families also have a crucial role. Emotional reassurance, financial support and encouragement to seek treatment can help women navigate an already frightening journey.

Breast cancer awareness should never become a month-long campaign that fades when October ends.

The pink ribbon may symbolise hope, but real hope comes from action: listening to women, removing barriers to care and ensuring that early detection leads to timely treatment. Because surviving breast cancer should depend less on geography, income or circumstance, and more on the simple promise that every woman deserves a fighting chance.

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A cancer vaccine made just for you: Is the future here?

Imagine a cancer vaccine designed for you, and you alone. What once sounded like science fiction is moving closer to reality, offering fresh hope to patients worldwide.

On 22 October 2026, pharmaceutical companies announced encouraging findings from research into a personalised cancer vaccine. Developed using the unique features of an individual's tumour, the vaccine aims to train the body's natural defences to recognise and destroy cancer cells, according to the study of the American Journal of Managed Care®.

Unlike conventional vaccines, this one does not prevent cancer. Instead, it is designed to stop the disease from returning after surgery.

Researchers reported that combining the experimental vaccine with an existing cancer medicine reduced the risk of skin cancer returning or causing death by 42 per cent over two years. The findings suggest a future where cancer treatment could be tailored to each patient rather than following the same approach for everyone.

However, the treatment remains experimental, and further scientific assessment is essential before its wider use.

For Bangladesh, the breakthrough raises an uncomfortable question: who will afford such personalised care?

With cancer treatment already financially devastating for many families, individually manufactured vaccines could deepen inequalities between wealthy and poorer nations.

The promise is extraordinary. But its greatest achievement will be ensuring that lifesaving innovation reaches everyone, not merely those who can pay.

The invisible poison stealing our children's future

Some of the most dangerous threats to our health are those we cannot see, smell or feel. Lead poisoning is one such silent danger, capable of creeping into our bodies through everyday products and polluted surroundings. Often unnoticed until the damage is done, it can affect people of all ages, particularly children, whose developing brains are most vulnerable. What makes this threat especially alarming is that even small amounts of lead can cause lasting harm, yet exposure is entirely preventable.

The World Health Organisation (WHO) has sounded a fresh alarm, warning that lead exposure contributes to more than 3.5 million deaths worldwide every year. Hundreds of millions of children remain at risk, often without their families realising it.



Unlike many illnesses, lead poisoning does not always announce itself through obvious symptoms. A child may appear perfectly healthy while the poison quietly affects brain development, learning abilities and behaviour. Even small amounts can cause lasting damage.

For Bangladesh, where informal recycling, industrial pollution and potentially unsafe consumer products raise concerns, the warning deserves serious attention. Children are particularly vulnerable because their developing bodies absorb the consequences more severely.

Marking International Lead Poisoning Prevention Week 2026, WHO is urging countries to shift their focus from identifying poisoning to stopping exposure before it happens.

The organisation plans to introduce a global action plan and practical prevention guidance in 2027, helping governments identify dangerous products, strengthen safety rules and protect vulnerable communities.



From paper prescriptions to digital care: A new hope for Bangladesh

STAR HEALTH REPORT

Imagine walking into a hospital in Bangladesh without carrying a bundle of prescriptions, waiting hours for a ticket or repeating your medical history to every new doctor. What sounds like a distant dream could become part of the country's healthcare future.

Bangladesh has announced a nationwide push towards digital healthcare, with plans for a universal electronic health card and a competition inviting young innovators to help transform the system.

State Minister for Health and Family Welfare Dr M A Muhit unveiled the initiative on 18 October 2026 at a Dhaka event organised in partnership with the World Health Organisation (WHO).

At its heart is an ambitious plan to build a national health database covering nearly 200 million people. Medical consultations, prescriptions, medicine purchases and test results could eventually become part of connected health records.

For patients, the potential benefits are considerable. Doctors could access previous medical information more easily, while families might spend less time navigating paperwork and hospital queues.

One proposed solution is an appointment system allowing patients to book specific time slots through mobile applications, rather than arriving early and waiting for hours.

The government is also exploring digital tracking of medicines supplied to public hospitals to prevent illegal sales and improve accountability.

Young innovators will have an opportunity to contribute through a national e-Hackathon. Selected teams will attend a three-day training programme in Dhaka, receiving guidance from local and international experts to develop practical healthcare solutions.

However, digital convenience brings serious responsibilities. Protecting personal medical information, preventing misuse and ensuring secure access will be essential.

There is another challenge: making sure rural communities, older patients and people without smartphones are not left behind.

A digital health card alone cannot solve shortages of doctors, medicines or hospital beds. Yet, if thoughtfully introduced, it could make healthcare more organised, accessible and responsive.

For millions of Bangladeshis accustomed to crowded hospital corridors and endless paperwork, that would be a welcome beginning.

The real test will be whether these promises translate into shorter queues, safer records and better care for everyone.

Learn more about the national e-Hackathon on https://ehealthhackathonbd.org/

When menopause arrives too soon

The silent struggle of younger women



DR SUMAIYA KHALED

For many women in Bangladesh, missed periods in their twenties or thirties may raise concerns about pregnancy, stress or hormonal changes. Menopause rarely enters the conversation. Yet, for some women, this life-changing transition arrives decades earlier than expected, bringing physical discomfort, emotional distress and unanswered questions.

A recent World Health Organisation (WHO) feature highlights the experience of physician and scientist Priya Satalkar-Götz, whose first warning sign appeared at just 26.

It began with an intense hot flush during a flight. Over the following years, sleepless nights, irregular periods and worsening symptoms became part of her daily life. Despite consulting several doctors, her concerns were repeatedly attributed to stress, lifestyle changes or weight loss.

Only at 33 did blood tests reveal that she had already reached the final stages of menopause. Her experience exposes a troubling reality: even medically trained women can struggle to obtain timely answers.

Early menopause can affect far more than fertility. Disturbed sleep, mood changes, memory difficulties and fragile skin may disrupt everyday life. Longer-term concerns include weakened bones and emotional distress.



In Bangladesh, where conversations about reproductive health can remain uncomfortable, recognising these symptoms and seeking appropriate care deserve greater attention.

Satalkar-Götz eventually found a specialist who listened, explained her options and involved her in treatment decisions. Appropriate hormone treatment subsequently improved her physical and emotional wellbeing.

However, her journey revealed a wider problem: limited research on younger women experiencing menopause and insufficient guidance for healthcare professionals. WHO's feature underscores the need for stronger research and internationally agreed recommendations to ensure women receive consistent, evidence-based care.

Families and workplaces also have important roles. Compassion, flexible working arrangements and emotional support can ease an already difficult transition.

For Bangladeshi women experiencing unexplained menstrual changes, persistent hot flushes or disrupted sleep, early medical consultation may help identify underlying causes.

Menopause should never be dismissed simply because a woman seems too young.

Ultimately, every woman deserves something beyond reassurance: the opportunity to be heard, properly assessed and supported without judgement.

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