



Acacia News

Inspire Hope • Activate Change • Impact Lives

2019 VOL 2





How to Protect Your Skin from the Sun

USE SUN PROTECTION CREAM

SPF 30 or more. Sun block should be applied 20 minutes before you actually go outside and should be reapplied every 2 hours. Make sure to cover all skin that's going to be exposed to the sun.

SEEK SHADE

Avoiding the sun when it is strongest may seem an obvious tip, but it's one that pays off. The sun is usually strongest when it is highest - between 10:00 and 16:00.

COVER UP

Loose, light layers of clothing will protect you from the sun whilst still keeping you cool. Clothes create a direct barrier between the sun's rays and your skin. Broad-rimmed hats are a very good way to protect your face, neck and ears from sun damage.

WEAR SUNGLASSES

Get in the habit of wearing sunglasses. It has been estimated that 3.2 million people worldwide may be blind due to UV radiation exposure. Sunglasses protect your eyes from sun damage. However, you need to be sure that your sunglasses block UV rays.

CHECK THE UV INDEX

If you have access to the internet, checking the UV index at <http://www.uvawareness.com> is a quick and easy way to see how high UV levels will be on a particular day. If the levels are moderate or above, you'll need to take extra precaution to protect yourself from sun damage.



WO 30

**CANCER ASSOCIATION
OF NAMIBIA**

**40SPF Sunblock is available at the
Cancer Association of Namibia.**

Please call -

WINDHOEK: 061 237 740

ERONGO: 064 461 271

*nhp*TM
We're about you

MESSAGE FROM CAN



Halfway through 2019!

I am immensely thankful to every Namibian who takes hands with CAN to "Inspire Hope, Activate Change and Impact Lives".

Thank you for your support, kind words and so many hugs for care and inspiration. I often wonder how we would be able to cope with it all, if it were not for YOUR support...

As I am typing this message, we are halfway through the 2019 Bank Windhoek Cancer Apple Project.

What started as a humble donation to help CAN 19 years ago, has now developed into "an enterprise of hope and life". Therefore the theme of the 2019 project screams of hope, namely: "More than an Apple, it is a Fruit op Hope!"

I hope to be sharing with you during the final edition of the Acacia Newsletter towards end of the year, the resounding success that our joint efforts as a Namibian community, have presented.

The second half of the year has so many fun events and fundraiser drives – please support and be part of the magic that is "creating hope".

Thank you to Elsabe, Emo, Sonja and Soli who join us from South Africa.

But from the depths of my heart: Thank you to Lize, Priscilla, Johne, Christo and all Namibian artists who hop on the stage with us and inspire action for change!

From policy-writing to laws that must change, to the next National Cancer Incidence Report that we are busy with – we will not waiver, we will carry on, we will fight cancer with all we've got!

With Love and Light,

Rolf.



SKIN CANCER

What is skin cancer?

Most skin cancers are locally destructive cancerous (malignant) growths of the skin. They originate from the cells of the epidermis, the superficial layer of the skin. Unlike cutaneous malignant melanoma, the vast majority of these sorts of skin cancers rarely spread to other parts of the body (metastasize) and become life-threatening.

There are three major types of skin cancer:

(1) basal cell carcinoma (the most common), (2) squamous cell carcinoma (the second most common), which originate from skin cells, and (3) melanoma, which originates from the pigment-producing skin cells (melanocytes) but is less common, though more dangerous, than the first two varieties. Other rare forms of skin cancer include lymphomas, Merkel cell cancers, and cancers of other tissue in the skin, including sarcomas as well as hair and sweat gland tumors. In this article, we will only be reviewing the most common forms of cancers, namely basal cell carcinoma and squamous cell carcinoma.

What are the risk factors for skin cancer?

The most common risk factors for skin cancer are as follows:

- Ultraviolet light exposure, either from the sun or from tanning beds. Fair-skinned individuals, with hazel or blue eyes, and people with blond or red hair are particularly vulnerable. The problem is worse in areas of high elevation or near the equator where sunlight exposure is more intense.
- A chronically suppressed immune system (immunosuppression) from underlying diseases such as HIV/AIDS infection or cancer, or from some medications such as prednisone or chemotherapy.
- Exposure to ionizing radiation (X-rays) or chemicals known to predispose to cancer such as arsenic.
- Certain types of sexually acquired wart virus infections.

- People who have a history of one skin cancer have a 20% chance of developing a second skin cancer in the next two years.

Elderly patients have more skin cancers.

Is skin cancer hereditary?

Since most skin cancers are caused by ultraviolet light exposure, skin cancers are generally not considered to be inherited. But the fact that skin cancer is much more common among poorly pigmented individuals and that skin color is inherited does support the proposition that genetics are very important. There are some very rare genetic syndromes that result in an increased number of skin cancers in those affected.

What causes skin cancer?

Except in rare instances, most skin cancers arise from DNA mutations induced by ultraviolet light affecting cells of the epidermis. Many of these early cancers seem to be controlled by natural immune surveillance, which when compromised, may permit the development of masses of malignant cells that begin to grow into tumors.



What are the different types of skin cancer?

There are several different types of skin cancers:

- Basal cell carcinoma is the most common cancer in humans. There are several different types of basal cell carcinoma, including the superficial type, the least worrisome variety; the nodular type, the most common; and the

morpheaform, the most challenging to treat because the tumors often grow into the surrounding tissue (infiltrate) without a well-defined border.

- Squamous cell carcinoma accounts for about 20% of all skin cancers but is more common in immunosuppressed people. In most instances, its biologic behavior is much like basal cell carcinoma with a small but significant chance of distant spread.

Less common skin cancers include melanoma, Merkel cell carcinoma, atypical fibroxanthoma, cutaneous lymphoma, and dermatofibrosarcoma.

What are the signs and symptoms of skin cancer?

Most basal cell carcinomas have few if any symptoms. Squamous cell carcinomas may be painful. Both forms of skin cancer may appear as a sore that bleeds, oozes, crusts, or otherwise will not heal. They begin as a slowly growing bump on the skin that may bleed after minor trauma. Both kinds of skin cancers may have raised edges and a central ulceration.

Signs and symptoms of basal cell carcinomas include:

- Appearance of a shiny pink, red, pearly, or translucent bump.
- Pink skin growths or lesions with raised borders that are crusted in the centre.
- Raised reddish patch of skin that may crust or itch, but is usually not painful.
- A white, yellow, or waxy area with a poorly defined border that may resemble a scar.

Signs and symptoms of squamous cell carcinomas include:

- Persistent, scaly red patches with irregular borders that may bleed easily.
- Open sore that does not go away for weeks.
- A raised growth with a rough surface that is indented in the middle.
- A wart-like growth.

Actinic keratoses (AK), also called solar keratoses, are scaly, crusty lesions caused by damage from ultraviolet light, often in the facial area, scalp, and backs of the hands. These are considered precancers because if untreated, up to 10% of actinic keratoses may develop into squamous cell carcinomas.

When is a mole dangerous or high risk for becoming a skin cancer?

Moles are almost always harmless and only very rarely turn into skin cancer. If a mole becomes cancerous, it would be a melanoma. There is a precancerous stage, called a dysplastic nevus, which is somewhat more irregular than a normal mole. An early sign of melanoma is noticing a difference in a mole: asymmetry, irregular border, colour changes, increasing diameter, or other evolving changes may signify a mole is melanoma. Moles never become squamous cell carcinomas or basal cell carcinomas.

What are the most common sites where skin cancer develops?

Skin cancers typically arise in areas of the skin exposed to the sun repeatedly over many years such as on the face and nose, ears, back of the neck, and the bald area of the scalp. Less commonly, these tumors may appear at sites with only limited sun exposure such as the back, chest, or the extremities. However, skin cancer may occur anywhere on the skin.

How do physicians diagnose skin cancer?

A skin examination by a dermatologist is the way to get a definitive diagnosis of skin cancer. In many cases, the appearance alone is sufficient to make the diagnosis.

A skin biopsy is usually used to confirm a suspicion of skin cancer. This is performed by numbing the area under the tumor with a local anaesthetic such as lidocaine. A small portion of the tumor is sliced away and sent for examination by a pathologist, who looks at the tissue under a microscope and renders a diagnosis based on the characteristics of the tumor.

What is the staging for skin cancer?

There is no specific staging system for basal cell carcinoma. If the tumor is wider than 2 cm it is probably a more serious tumor. Basal cell carcinomas of the ears, nose, and eyelid may also be of more concern, regardless of the size.

There is a staging system for squamous cell carcinoma. Large tumors that are thicker than 2 mm, invade the nerve structures of the skin, occur on the ear, and have certain worrisome characteristics under the microscope are of more concern. If the tumor metastasizes to a site at

some distance from the primary tumor, the cancer is likely to be a dangerous tumor.

What is the treatment for skin cancer?

There are several effective means of treating skin cancer. The choice of therapy depends on the location and size of the tumor, the microscopic characteristics of the cancer, and the general health of the patient.

- **Topical medications:** In the case of superficial basal cell carcinomas, some creams, gels, and solutions can be used, including imiquimod (Aldara), which works by stimulating the body's immune system causing it to produce interferon which attacks the cancer, and fluorouracil (5-FU), a chemotherapy drug. Some patients do not experience any side effects of these topical treatments, but others may have redness, inflammation, and irritation. A drawback of topical medications is that there is no tissue available to examine to determine if a tumor is removed completely.
- **Destruction by electrodesiccation and curettage (EDC):** The tumor area is numbed with a local anaesthetic and is repeatedly scraped with a sharp instrument (curette), and the edge is then cauterized with an electric needle. The advantage of this method is that it is fast, easy, and relatively inexpensive. The disadvantages are that the scar is often somewhat unsightly, and the recurrence rate is as high as 15%.
- **Surgical excision:** The area around the tumor is numbed with a local anaesthetic. A football-shaped portion of tissue including the tumor is then removed and then the wound edges are closed with sutures. For very big tumors, skin grafts or flaps are needed to close the defect. The advantages of this form of treatment are that there is a greater than 90% cure rate, the surgical specimen can be examined to be sure that the whole tumor is successfully removed, and the scar produced is usually more cosmetically acceptable than that of the EDC procedure. It is a more complicated procedure and is more expensive than EDC.
- **Mohs micrographic surgery:** The site is locally anaesthetized and the surgeon removes the visible tumor with a small margin of normal

tissue. The tissue is immediately evaluated under a microscope and areas that demonstrate residual microscopic tumor involvement are re-excised and the margins are re-examined. This cycle continues until no further tumor is seen.

This more complicated and expensive option is the treatment of choice for tumors where normal tissue preservation is vital, where the tumor margins are poorly defined, in tumors that have been previously treated and have recurred, and in certain high-risk tumors.

- **Radiation therapy:** Ten to fifteen treatment sessions deliver a high dose of radiation to the tumor and a small surrounding skin area. This form of treatment is useful in those who are not candidates for any surgical procedure. The advantage of radiation therapy is that there is no cutting involved. The disadvantages of this expensive alternative are that the treated area cannot be tested to be sure the whole tumor is gone and radiation scars look worse over time. It is for this reason it is usually reserved for elderly patients.
- **Other types of treatments for skin cancers** include cryosurgery where tissue is destroyed by freezing, photodynamic therapy (PDT) in which medication and blue light is used to destroy the cancerous tissue, laser surgery to vaporize (ablate) the skin's top layer and destroy lesions, and oral medications like vismodegib (Erivedge) and sonidegib (Odomzo).

What kinds of doctors treat skin cancer?

The main type of doctor who will treat skin cancer is a dermatologist. Your primary care physician or internist may first notice a sign of skin cancer, but will refer you to a dermatologist for further testing and treatment. You may also see an oncologist, which is a cancer specialist.

If you have surgical removal of a tumor, depending on how much skin is removed, you may see a plastic or reconstructive surgeon after the tumor removal to help restore the appearance of the skin, especially on the face.

What is the prognosis and survival rate for skin cancer?

The prognosis for nonmelanoma skin cancer is generally excellent. Both basal cell carcinoma and squamous cell carcinoma are highly curable.

There are virtually no deaths from basal cell carcinoma and only rare deaths with squamous cell carcinoma skin cancers, mostly in immunosuppressed individuals. Depending on the method of treatment and the location and type of skin cancer, the likelihood of a recurrence of a previously treated skin cancer is as low as 1% to 2% for Mohs surgery and up to 10% to 15% for destruction by electrodesiccation and curettage.

Early detection of skin cancers can lead to better outcomes. Know your skin and if you have any moles or spots that are suspect, see a dermatologist for a skin cancer screening. Awareness is key in identifying and treating skin cancers early.

Is it possible to prevent skin cancer?

Many skin cancers can be prevented by avoiding triggers that cause tumors to develop. Prevention strategies include protection from the sun by the use of sunscreens, protective clothing, and avoidance of the sun during the peak hours of 9 a.m. to 3 p.m.

Parents should ensure children are protected from the sun. Do not use tanning beds, which are a major cause of excess ultraviolet light exposure and a significant risk factor for skin cancer. The American Academy of Dermatology (AAD) has noted a dramatic rise in the numbers and cost of skin cancer. Furthermore, there has been an increase in the total number of skin cancers and that new breakthrough treatments for melanoma, although expensive, comprise only a small portion of the total cost of skin cancer treatment. Most skin cancers are treated cost efficiently by dermatologists in an office setting.

Sunscreen use and vitamin D

A major source of vitamin D comes from sunlight exposure, which leads to the production of the vitamin in the skin. Some argue sunscreens block out so much of the sun's rays that inadequate vitamin D synthesis results. In fact, very few people actually apply sunscreen to every inch of their exposed skin, so vitamin D synthesis does occur. There is no reason not to use sunscreens because of a fear of low vitamin D. If there is a concern, vitamin D can be obtained by eating leafy vegetables or taking an oral multivitamin supplement.

WHAT YOU'RE LOOKING FOR

RELAX



NORMAL MOLE

A mole is a small brown spot or growth that appears in the first few decades of life. It can be flat or raised and generally is round.



ACTINIC KERATOSIS

The most common precancer, it's small, crusty, bump. Colours vary. It can itch and bleed and can turn into squamous cell carcinoma.



DYSPLASTIC NEVI

These noncancerous moles resemble melanoma in colour variation within the blemish and sometimes in their unusual shapes and border irregularities.



BASAL CELL

This is the most common skin cancer. This nonlethal blemish can be a shiny bump, a pink growth, a scar-like area or an open sore that doesn't heal easily.



SQUAMOUS CELL

Persistent bleeding is common with this rarely deadly cancer. Warts, scaly patches, open sores and rapidly growing bumps are telltale signs.



MELANOMA

This deadly cancer is usually larger than a pencil's eraser, multicoloured and changes size and shape. Also look for asymmetry and uneven borders.

WORRY

CAN PROJECTS



In order to sustain the programmes initiated and executed daily, the Cancer Association of Namibia is heavily dependent on the success of fundraising projects in addition to awareness and education drives. Several projects are run throughout the year to sustain the fund, while others overlap with the educational cause to fight cancer in Namibia.

Education and supplying information is an ongoing process. By way of our annual program and by invitation, we raise awareness in different sectors of the community, i.e. schools, farm communities, religious denominations, women organisations, corporate exhibitions and CAN fundraisers.

Welfare is at the core of serving cancer patients in Namibia. CAN offers its care and supportive services, not only to patients, but also to their families.

The association, strictly following the criteria set by the Board of Trustees, financially assists patients without a medical aid as well as those with no/or low income.

Research is costly. The association sets funds aside every year to support research. In 1998 CAN presented the first Namibian cancer Incidence Report to the Minister of Health and Social Services. This register is updated on an ongoing basis, and results are published every 3-5 years.





Thank you to the Namibian community who continue to support the CHICA Trust. This year's Spray A Thon 2019 raised N\$ 206 000.

During 2018 the CHICA Fund supported childhood cancer patients with N\$245,616. These amounts exclude the accommodation support at the House Acacia Interim Home and the CHICA Interim Home, as well as the construction costs to build the new wing at House Acacia.

The Cancer Association of Namibia values your efforts and commitment to assist child cancer patients in Namibia.





The Shake a Can for Cancer project raises funds for the CHICA Fund. This event is hosted 4 times a year when CAN and project partners greet early morning traffic by handing out cancer manuals and raising funds.

These funds are used to sustain the CHICA Interim Home and Patient Financial Support Programme for child cancer patients.

During 2018 the CHICA Fund supported childhood cancer patients with N\$215,616.

On 5 April 2019, CAN Windhoek, NOC, Indongo Toyota, Alexander Forbes, Justine, Pioneers Park Neighbourhood Watch, Pupkewitz Megabuild and Aztech Consulting Services collected N\$40 657 in aid of children fighting cancer.

The Cancer Association of Namibia sincerely thanks all the project partners that assisted with the campaign and every individual that contributed to the cause.





NAMIBIA



Family and friends came together early in the morning on 6 April 2019 for a sunrise fun walk. The annual cancer walk creates awareness on different cancer types diagnosed in Namibia. The funds that are raised are used to produce the I Can, We Can, Namibia Can cancer manual that is freely distributed during the National Outreach campaign.

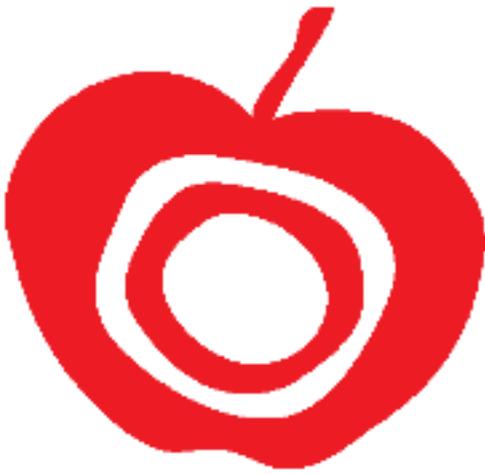
Swakopmund raised N\$3,650 on 30 March 2019
 Walvis Bay raised N\$16,450 on 30 March 2019
 Windhoek raised N\$24,750 on 5 April 2019
 Tsumeb raised N\$11,500 on 5 April 2019

Rehoboth will host their annual National Cancer Walk in September 2019.

Thank you to all the participants and project partners: DTS, Bio Dynamics, Hopfast Engineering, Lilly's Pub & Grill, Radiowave, Sardinia Blue Olive Restaurant and Webtickets for making the National Cancer Walk a fun family affair while raising funds and creating awareness.

N\$45 000 was raised to sustain the cancer manual information booklet.





Bank Windhoek CANCER APPLE PROJECT

I recently had the privilege to read up on US-writer John Muir, where he writes: "Climb the mountains and get their good tidings. Nature's peace will flow into you as sunshine flows into trees. The winds will blow their freshness into you, and the storms their energy; while the cares will drop away from you like the leaves of autumn."

As we embark on another annual chapter of the Bank Windhoek Cancer Apple Project, aptly focussed on "A Slice of Hope for a Slice of Life", I want to ask every person participating to let "nature's peace flow into you and allow the rays of hope that this project brings to radiate through you!"

I ask this of every Namibian, because the global community could last year, at the World Cancer Congress, so clearly feel and experience this

loving ray of hope that this project portrays. What a privilege and honour to present the Bank Windhoek Cancer Apple Project at this highly regarded international congress in Kuala Lumpur, Malaysia. We walked back under the tree-lined streets of Kuala Lumpur, media loving the project, the world seeing "how Namibians care for each other" and the concept of "A slice of life, a slice of hope" developed right then and there.

"In 2019, what do we sell to Namibians to buy into the next chapter of the Apple Project?" I asked Sanet from Bank Windhoek, who joined me to present the project and engage partners and stakeholders.

It is a drought in Namibia. It is a time of economic hardship in Namibia. It is trying times in our motherland.

But cancer remains on the rise and while we need to continue with awareness, education, screening for earlier detection and treatment to save lives; we ask "How can we activate Namibians to do more, to be more a part of this project, to be unified in hope and impact lives to make our country better?"

The answer was so simple and so pure: We walked past a billboard of an apple sliced in half and that "Freshness and Life and Goodness" just washed over us. "Let's share in that slice of hope with Namibia – let us share in the slice of LIFE".

The Cancer Association of Namibia has screened more than 35 000 Namibians for free for breast, cervical or prostate cancer since the inception of the National Cancer Outreach Programme in August 2015.





From 1 March 2018 to 28 February 2019 CAN screened 3 778 women for cervical cancer, referred 1 083 ladies and 31 confirmed cervical cancer cases were treated. More than 4 500 clinical breast examinations were conducted. A total of 788 men were screened for prostate cancer, of which 54 were referred and 17 prostate cancer diagnoses confirmed.

91 Hospital visit days were conducted and 57 corporate wellness and education days were hosted.

At House Acacia Interim Home, 484 cancer patients were accommodated over 3 317 nights for free during the year. And through the Patient Financial Assistance Programme, we could help patients with N\$1,938,660 and through the CHICA Fund we supported childhood cancer patients with N\$215,616.

While we render these care support services, we remain steadfast to break stigmas, educate the nation on cancer and fight cancer through all possible ways and means.

Statistics show us that 3 700 Namibians are now diagnosed on average with a form of cancer, while GloboCAN estimates that 1 238 Namibians will succumb to this disease during 2019.

We have a responsibility to one another. But more importantly, I feel that each one of us has the privilege to serve one another and be each other's keeper, because we never know when we may need help or support. Do not give because we fear, but because we boldly proclaim that we are willing to impact lives and positively change the future.

Once again, thank you to all partners, stakeholders, the entire Bank Windhoek Family and every Namibian joining the "appleicious madness" that will now officially descend on our country. Let's stand together: Inspire Hope, Activate Change and Impact Lives.



NATIONAL CANCER AWARENESS & PREVENTION WEEK

Don't use tobacco - Using any type of tobacco puts you on a collision course with cancer. Smoking has been linked to various types of cancer — including cancer of the lung, mouth, throat, larynx, pancreas, bladder, cervix and kidney. Chewing tobacco has been linked to cancer of the oral cavity and pancreas. Even if you don't use tobacco, exposure to second-hand smoke might increase your risk of lung cancer. Avoiding tobacco — or deciding to stop using it — is one of the most important health decisions you can make. It's also an important part of cancer prevention. If you need help quitting tobacco, ask your doctor about stop-smoking products and other strategies for quitting.

Eat a healthy diet - Although making healthy selections at the grocery store and at mealtime can't guarantee cancer prevention, it might help reduce your risk. Consider these guidelines:

- Eat plenty of fruits and vegetables. Base your diet on fruits, vegetables and other foods from plant sources — such as whole grains and beans.
- Avoid obesity. Eat lighter and leaner by choosing fewer high-calorie foods, including refined sugars and fat from animal sources.
- If you choose to drink alcohol, do so only in moderation. The risk of various types of cancer — including cancer of the breast, colon, lung, kidney and liver — increases with the amount of alcohol you drink and the length of time you've been drinking regularly.
- Limit processed meats. A report from the International Agency for Research on Cancer, the cancer agency of the World Health Organisation, concluded that eating large amounts of processed meat can slightly increase the risk of certain types of cancer.

Maintain a healthy weight and be physically active - Maintaining a healthy weight might lower the risk of various types of cancer, including cancer of the breast, prostate, lung, colon and kidney. Physical activity counts, too. In addition to helping you control your weight, physical activity on its own might lower the risk of breast cancer and colon cancer. Adults who participate in any amount of physical activity gain some health benefits. But for substantial health benefits, strive to get at least 150 minutes a week of moderate aerobic activity or 75 minutes a week of vigorous aerobic physical activity. You can also do a

combination of moderate and vigorous activity. As a general goal, include at least 30 minutes of physical activity in your daily routine — and if you can do more, even better.

Protect yourself from the sun - Skin cancer is one of the most common kinds of cancer — and one of the most preventable. Try these tips:

- Avoid midday sun. Stay out of the sun between 10 a.m. and 4p.m., when the sun's rays are strongest.
- When you're outdoors, stay in the shade as much as possible. Sunglasses and a broad-brimmed hat help, too.
- Cover exposed areas. Wear tightly woven, loose-fitting clothing that covers as much of your skin as possible. Opt for bright or dark colours, which reflect more ultraviolet radiation than pastels or bleached cotton.
- Don't skimp on sunscreen. Use generous amounts of sunscreen when you're outdoors, and reapply often.
- Avoid tanning beds and sunlamps. These are just as damaging as natural sunlight.

Get immunized - Cancer prevention includes protection from certain viral infections. Talk to your doctor about immunization against:

- Hepatitis B can increase the risk of developing liver cancer. The hepatitis B vaccine is recommended for certain high-risk adults — such as adults who are sexually active but not in a mutually monogamous relationship, people with sexually transmitted infections, intravenous drug users, men who have sex with men, and health care or public safety workers who might be exposed to infected blood or body fluids.
- Human papillomavirus (HPV) is a sexually transmitted virus that can lead to cervical and other genital cancers (especially cervical and anal cancers) as well as squamous cell cancers of the head and neck. The HPV vaccine is recommended for girls and boys aged from 9 to 13 years (before sexually active!). Ladies should be tested for HPV and have regular cervical screenings.





Avoid risky behaviours - Another effective cancer prevention tactic is to avoid risky behaviours that can lead to infections that, in turn, might increase the risk of cancer:

- Practice safe sex. Limit your number of sexual partners, and use a condom when you have sex. Oral sex spread STDs, including Hepatitis and HPV. The more sexual partners you have in your lifetime, the more likely you are to contract a sexually transmitted infection — such as HIV or HPV. People who have HIV or AIDS have a higher risk of cancer of the anus, liver and lung. HPV is most often associated with cervical cancer, but it might also increase the risk of cancer of the anus, penis, throat, vulva and vagina.
- Don't share needles. Sharing needles with an infected drug user can lead to HIV, as well as hepatitis B and hepatitis C — which can increase the risk of liver cancer. If you're concerned about drug abuse or addiction, seek professional help.

Get regular medical care - Regular self-exams, become “body aware and breast aware” together with screenings for various types of cancers — such as cancer of the skin, colon, cervix and breast, testicular and prostate — can increase your chances of discovering cancer early, when treatment is most likely to be successful. Ask your doctor about the best cancer screening schedule for you.



TEKKIE DAY
2019

2 AUGUST 2019

Get your colourful
shoelaces for N\$30 and
support CAN
in the fight against cancer.
061 237 740
admin@can.org.na
90 John Meneirt St.
Windhoek West



A lavender ribbon brings awareness to All Cancers. This may acknowledge any of the cancers that do not have a specific awareness colour, or it may be used to represent a variety of different cancers that families might have experienced.



Shake a can for cancer

IN SUPPORT OF CANCER RESEARCH IN KAPPA

From January 2019 the CHCA Interim Home spent more than R\$150 000 on providing free accommodation, meals and transport to medical centres for the little cancer fighters and mothers.

Please join the CAN team and host your own street collections corner for Shake a Can for Cancer on Friday, 1 November 2019.

Please contact projects@can.org.na to support in WINDHOEK and erongo@can.org.na to participate in the ERONGO region.



HARTKLOP
Van Kaap
Van Kaap
Van Kaap



TOER PROGRAM

ROJOBOTI	WALWISSAAL
20 September 2019	24 September 2019
PLEK: St. Joseph Skool	PLEK: Protea Hotel
TYD: 19:30	Teieners Day
KAARTJIE: NS150pp	TYD: 19:00
Kaartjie boekjaar by	KAARTJIE: NS150pp
CANI Lingo Kanior	Kaartjie boekjaar by
961 051 477 3030	Natasha Lomaxard
GODABIS	961 061 148 7030
21 September 2019	Hydrogen Dettiner
PLEK: NG Kerk Sebatis	961 061 246 1089
Kersaal	SWAKOPMUND
TYD: 10:00	26 September 2019
KAARTJIE: NS150pp	PLEK: Strand Hotel
Kaartjie boekjaar by	TYD: 19:30
Kersaal	KAARTJIE: NS150pp
Tel: 082 962 277	Kaartjie boekjaar by
HENJESBAAL	CANI Lingo Kanior
20 September 2019	Tel: 064 461 271
PLEK: Jimies Laai Golf	ORAKWANDA
Klub	26 September 2019
TYD: 19:00	PLEK: NG Kerk
KAARTJIE: NS150pp	Orakwanda Kersaal
Kaartjie boekjaar by	TYD: 19:30
Herodesdai Golf Klub of	KAARTJIE: NS150pp
Herodesdai Spar	Kaartjie boekjaar by
Tel: 054 461 277	Tantra Ower-
	961 061 439 1400





ALEXANDER FORBES

SELECTION OF FINEST WINE & CULINARY

HATS & ROSES

LADIES EVENT 2019



JOIN LWO ADAMS & LESABE ALDRICH
WITH CAN IN CELEBRATING LIFE AS A
WOMAN

DATE: SATURDAY 28 SEPTEMBER 2019
TIME: 09:00

VENUE: WINDHOCK COUNTRY CLUB RESORT
& CASINO

TICKETS: \$5550/1, \$3550 PER TABLE OF 10
PLEASE CONTACT JEANETTE SPICKARD@CAN
TO BOOK YOUR TABLES TODAY.

LIMITED SEATS AVAILABLE



Make a Difference!

WB
Wuertmannbrock

HATS & ROSES

LADIES EVENT 2019

JOIN SONJA HARROLD WITH CAN &
WIERMANN BROCK COASTAL IN
CELEBRATING LIFE AS A WOMAN.

DATE: 12 OCTOBER 2019
TIME: 09:00

VENUE: SWANSGRUND HOTEL &
ENTERTAINMENT CENTRE

TICKETS: \$450/1, \$450 PER TABLE OF 10

TICKETS ARE AVAILABLE AT CAN PONGO
CENTRE, 30 FERDINAND STREET, TOR
TEL: 04-461 371



Swansgrund
HOTEL & ENTERTAINMENT CENTRE



Wiertmannbrock
Wiertmannbrock

Wiertmannbrock
Wiertmannbrock



PINK DAY

25 OCTOBER 2019

Celebrate Pink Day 2019 and support women fighting cancer in Namibia.

Golf Shirt N\$150
Caps N\$90
Buffs N\$100

WINDHOEK

061 237 740 • admin@can.org.na

ERONGO

064 461 271 • erongo@can.org.na



NOVEMBER MOVEMBER



be part of the
**Mo Bro & Mo Sista
MOVEMENT THIS**

**November and support
men fighting cancer
in Namibia**

**Join CAN & Desmond Wells at
the 2019 Mo Bro &
Mo Sista Awards**

DATE: 29 November 2019

TIME: 18:30 for 19:00

VENUE: Wanderers Sport Club

TICKETS: NSIBOPP. Tickets available at

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EVENTS TODAY

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NOVEMBER 2019



M&S

Desmond Wells
Cancer Society of Namibia



CANCER ASSOCIATION OF NAMIBIA ANNUAL GENERAL MEETING

To all stakeholders and contributors,

Cancer Association of Namibia (WO30) Annual General Meeting (04.06.19) and Audited Financial Report 2018/19.

It is with an immense sense of gratitude that I communicate the feedback and financial position of the Cancer Association of Namibia to all stakeholders and the broader Namibian community.

In addition to the audited financial report presented by Mr Andy Welzig of Grant Thornton Neuhaus, I am satisfied to present to the Namibian public results that encompass transparent management procedures and sustainable business practices.

The current economic climate, accompanied by one of the worst droughts affecting Namibia, places immense pressure on welfare organisations dependant primarily on the goodwill of the nation. It is therefore, despite these severe challenges, that the Cancer Association of Namibia extends our sincerest gratitude to the Namibian people for their unwavering support and love, to help our cause and impact lives.

Some of our key highlights at CAN for the past reporting period are the 50th Anniversary of CAN celebrated in June 2018; the inauguration of the Kurt Johannesson Wing at House Acacia Interim Home to accommodate more patients; the new "World Cancer Day" education movement; and our National Outreach Programme that screened more than 30 000 Namibians for free in 3 years' time by 2018!

Miracles surprise us in humbling ways, and the 2018 Bank Windhoek Cancer Apple Project was evidence of this yet again. Bank Windhoek and project partners joined forces once more and raised an astounding N\$3 million for the fight against cancer in Namibia!

I am also proud to share that this project was invited to present an abstract at the 2018 Union for International Cancer Control World Cancer

Congress in Kuala Lumpur, Malaysia, and was chosen as "a success story of hope".

We were recognised as one of 17 global projects for the UICC International Award for Innovative Fundraising Models for this exemplary approach on co-operative ways in which to help fight cancer in local communities. Although we did not win, losing to the MacMillan Cancer Foundation in the UK by a close call, is indeed still something to truly be proud of.

The Bank Windhoek Cancer Apple project was welcomed by all, the winner included, and the international media as a fresh and highly inclusive way to raise awareness and funds, and for this, we thank the management and all staff of Bank Windhoek for their commitment to the cause.

We truly appreciated every Namibian who supports this drive annually!

From a statistical point of view:
CAN screened 3 778 women for cervical cancer, referred 1 083 ladies and 31 confirmed cervical cancer cases were treated. More than 4 500 clinical breast examinations where conducted. A total of 788 men were screened for prostate cancer, of which 54 were referred and 17 prostate cancer diagnoses confirmed.

91 Hospital visit days were conducted and 57 corporate wellness and education days were hosted. At House Acacia Interim Home, 484 cancer patients were accommodated over 3 317 nights complimentary during the year.

CAN supported cancer patients through the Patient Financial Assistance Programme with N\$1,938,660 and the CHICA Fund supported childhood cancer patients with N\$215,616. These amounts exclude the accommodation support at the House Acacia Interim Home and the CHICA Interim Home, as well as the construction costs to build the new wing at House Acacia.

Some of the major operational cash flow:
The total expense for cytology services (community-based Pap smear services to fight

cervical cancer in Namibia) amounted to N\$383,544; while research work for the Namibia National Cancer Registry cost CAN N\$155,391. Medical supplies to host clinics and screen patients was N\$1,427,289.

Our municipal accounts, office expenses and communication lines to render effective services to the community amounted to N\$513,465.

Through our collective efforts, we managed to generate a surplus of N\$4,863,752 through fundraising drives; while the remainder of income to sustain our operations was supported by programme donations and meticulous fund administration protocols by the management and board of directors.

The total annual inflow is recorded at N\$12,153,277 and the total annual outflow is recorded at N\$9,932,463

A nett surplus of N\$2,220,814 for the financial year is recorded and carried over as opening balance for the 2019/20 budget.

Regretfully, due to the current economic climate, the Cancer Association of Namibia has been necessitated to introduce a nominal donation structure for patients who have until now received fully complimentary accommodation, meals and transport at our House Acacia Interim Home while receiving cancer treatment. Patients who truly have no means to make the N\$150 daily donation are encouraged to apply for assistance, but we remain confident that we can keep our interim home doors open and continue to help our patients in their cancer treatment journey.

Now more than ever, we need the support of Namibians to keep our support programmes ongoing!

Services and programmes by the Cancer Association of Namibia include:

1. House Acacia Interim Home for adult cancer patients
2. CHICA Interim Home for childhood cancer patients
3. Patient Financial Assistance Programme
4. CHICA Fund for childhood cancer financial assistance

5. Transport and accommodation financial support
6. Commodity/Equipment support
7. Standard Bank Circle of Hope psychosocial support programme
8. National Cancer Outreach Programme
9. Namibia National Cancer Registry for quality data capturing and planning
10. CAN Medical Centre and Erongo Medical Centre (screening services)
11. Education and awareness drives (we visit your school or place of work in request)
12. Advocacy and law reform – we work with "decision-makers" to better the fight against cancer in Namibia
13. Support to the Ministry of Health & Social Services (Windhoek Central Hospital and Dr AB May Cancer Care Centre to upkeep infrastructure and services for cancer patients)

The Cancer Association of Namibia also bade farewell to one of its longest serving directors, Dr Thys (Marthinus) Greeff, who served on the board for thirty years.

In line with the constitution of the Cancer Association of Namibia, a new Executive Committee, serving a 2-year term was elected:

- Chairperson/President of the Cancer Association of Namibia: Mrs Lynn Swart
- Vice-Chairperson/Vice-President of the Cancer Association of Namibia: Mrs Saima Nambinga
- Treasurer of the Cancer Association of Namibia: Mrs Monique Cloete
- Vice-Treasurer of the Cancer Association of Namibia: Mr Harmut Diehl

The Cancer Association of Namibia remains committed to fight cancer in Namibia and we look forward to engage with the community to impact the lives of persons affected by this disease.

Yours faithfully,



Ralf Hansen
Chief Executive Officer
Cancer Association of Namibia (W030)

OUR CARING COMMUNITY

The Cancer Association of Namibia, in cooperation with the community, fights cancer and its consequences countrywide to the benefit of all Namibians by supporting research; health education and information; care and support services.

It is the distinct aim of the Cancer Association of Namibia (CAN) to educate the general public regarding the prevention, early detection and dangers of cancer. CAN renders a welfare service to all cancer sufferers according to established criteria:

1. Education and care
2. Advocacy
3. Regional committees and branches
4. Data and research
5. Patient accommodation support (adults)
6. National cancer outreach programme
7. Communication and awareness
8. Patient financial assistance programme
9. Patient accommodation support (children)
10. Psychosocial support
11. Projects and fundraising
12. Support to the Ministry of Health and Social Services (MoHSS)

The Cancer Association of Namibia is solely dependant on the goodwill of the Namibian community. The Association does not receive any funding from the Namibian government or any international organisations. Without the continued support of Namibians, it will not be possible to honour our various commitments.

Even though words cannot fully explain the gratitude, appreciation and admiration for every donation - whether in kind or monetary, big or small - please know that your efforts are valued.

It has been proven over and over again that Namibians care about Namibians and it is an honour to be your tools in the field.

TAEUBER & CORSSEN ASSIST CAN INTERIM HOMES



Thank you Bianca and the T&C family for the much needed cleaning agents for our two Interim Homes.

We REALLY need this kind of support to keep our doors open and be a home from home for cancer patients while receiving treatment.

All companies or private individuals who also want to donate to House Acacia and CHICA House, please contact MJ at 061 237 740 or reception@can.org.na

IN KIND DONATIONS FOR CHICA INTERIM HOME



CAN and the CHICA residents thank Wilderness Safaris & AS Foundation for your generous donation towards our CHICA Interim home. This will help our mothers and children so much and bring smiles to their faces.



PUPKEWITZ MEGABUILD & MARATHON TOOLS SUPPORTING CAN



As responsible corporate citizens, we at Pupkewitz Megabuild take our Social Responsibility towards Namibia very seriously. More than 3,700 Namibians are newly diagnosed with cancer annually. Thus, it is crucial that we take hands and break the stigmas attached to health and build bridges to connect healthcare and support services.

Pupkewitz Megabuild supports the commitment of the Cancer Association Namibia, to create awareness, education, earlier interventions and support to those diagnosed with cancer.

Pupkewitz Megabuild sells an exclusive tool brand, Marathon Tools, in our 17 branches nationwide. Pupkewitz Megabuild and Marathon Tools have teamed up and will support the Namibian Cancer Association by donating N\$ 30 per sold toolkit from 1 March – 31 November 2019.

This applies to three defined tool kits from Marathon Tools:

- A12203 - KIT TOOL M79-HTK-25P HOMEOWNER 25PC MARATHON
- A12204 - KIT TOOL M150-52P ESSENTIAL 52PC MARATHON
- A11677 - KIT TOOL M77-85PC BLUE PROFESSIONAL 85PCE MARATHON

Through this contribution, Pupkewitz Megabuild and Marathon Tools are delighted to take part and be represented at events and initiatives organised and hosted by the Namibian Cancer Association throughout 2019.

ROUGH & TOUGH RALLY GOES BIGGER!



The annual Rough & Tough Rally handed over in excess of N\$400,000 to CAN through funds raised by the project. The Omaruru team alone raised more than N\$100,000!

The Baard family of Walvis Bay initiated the project in 2018, and welcome old wheeler enthusiasts to take a truly Namibian drive for hope with their classic vehicles to not only create awareness on cancer, but also much needed funds to help sustain the Patient Financial Assistance Programme of CAN.

The funds raised will directly be channelled towards the financial and transportation support program managed by the association. We are truly humbled by the good faith and generosity of fellow Namibians to impact lives.

GF WOUND CARE NOW AVAILABLE AT CAN, TEL: 061 237 740



DONASIE VIR CHICA INWONERS



Meneer Otty het vir CHICA Huis 'n donasie van kosgoedjies gebring. Ons huismamma, Barseba, het ontvang. Dankie!

SHARING FRUIT OF HOPE



Amazing Jorn Dedig and Elegant Collection friends! Thank you for buying and sharing in "The Fruit of Hope".

CIRCLE OF HOPE TRAINING



More than 40 volunteers that will now engage and help support cancer patients in and around Rehoboth, were trained by CAN CEO, Rolf Hansen, at this town. We thank Standard Bank Namibia who enables this positive change activation programme through the Standard Bank Circle of Hope project.

"Every single one of us has the capacity to be positive change activators. We need only wander beyond ourselves and sincerely care, to impact lives," said Rolf as an opening passage to the today's proceedings.

KAVANGO WEST OUTREACH



Nkurenkuru, Kavango West
National Outreach Programme clinic:

98 Pap Smears for cervical cancer, plus 10 more at Hakusembe River Lodge! 104 clinical breast examinations plus ten more at Hakusembe River Lodge! 30 PSA for prostate cancer prevention and early detection, plus 41 more at Hakusembe River Lodge! Four referrals re possible Lymphoma and/or Kaposi Sarcoma Multiple Hypertension and diabetes referrals and two serious health talks and counselling with testing for HIV.

This was all done for free for the poorest of the poor. The neediest and most humble and appreciative fellow Namibians - walking for over two hours from villages to Nkurenkuru to be tested.

Thank you Gondwana Collection for housing, feeding and driving us. Thank you Spar Namibia for your 2018 contribution that is still impacting lives. Thank you Bank Windhoek Cancer Apple Project for touching so many lives without waiver.

WE LOVE #SHARINGHOPE



Indongo Toyota Otjiwarongo and staff sharing 180 apples from Bank Windhoek cancer apple project, with two pre-primary schools in DRC.

PEER TO PEER SUPPORT



Voice of Hope gave the first handmade blanket to Linda, a Gr.8 WHS learner with cancer. Linda may the love portrayed through this blanket help you get through the tough times!

SANLAM CANCER CHALLENGE



The yearly Sanlam Cancer Challenge was once again a huge success. Thank you to Sanlam and all the players for their support.

BREAKFAST AT TIFFANY'S



To all the lovely ladies and sponsors from Walvis Bay, thank you for your support. N\$22,000 was raised through the Breakfast at Tiffany's event and was handed over to the Cancer Association of Namibia.

NATIONAL CANCER REGISTRY / CANCER INCIDENCE PUBLICATION



FINAL CALL: Cancer patients are requested to please connect with CAN regarding the National Cancer Incidence Report.

The Cancer Association of Namibia is in the process of completing the 2015 - 2017 data pertaining to cancer cases in Namibia. We thank every citizen who has communicated the diagnosis, recurrences and/or passing of loved ones due to cancer during 2015, 2016 and 2017.

The Namibian National Cancer Registry, managed by CAN, requests all Namibian patients who have been diagnosed with cancer during the 2015-2017 period, and who are uncertain that their case may not be properly recorded, to urgently make contact with Mrs Lizelle van Schalkwyk at Tel: 061 237 740, Fax: 061 237 741 or Email: canreg@can.org.na

All patient information is treated with the utmost respect and privacy. This information allows for the compiling of quality data to publish the "2015 – 2017 Cancer in Namibia Incidence Report", guiding relevant stakeholders to make informed decisions to better the fight against cancer in Namibia. Under no circumstances is primary patient information communicated in this publication, or relayed to third parties.

Your support of this endeavour is greatly appreciated.



WO 30

**CANCER ASSOCIATION
OF NAMIBIA**

MEMBERSHIP

N\$100 Annual Membership Fee

NAME:.....

SURNAME:.....

CELL:.....

EMAIL:.....

PO BOX.....

TOWN:.....

ID NR:.....

Membership payment for 20....

- ★ Membership fees will go towards our various community outreach projects.
- ★ The "Acacia Magazine" showcasing what CAN and our community does to alleviate the scourge of and better the fight against cancer complimentary in electronic format.

Please fax / email application and proof of payment to

Fax: 061 237 741 projects2@can.org.na

Bank details:

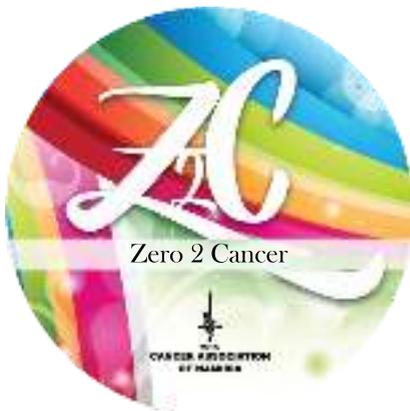
CANCER ASSOCIATION OF NAMIBIA

FNB

BRANCH CODE: 280 272

ACC NR: 555 1334 9239

REF: YOUR NAME & SURNAME MEMBERSHIP



Zero2Cancer Campaign

“Zero2Cancer” (Z2C) is the Cancer Association of Namibia's latest drive to help create awareness and fight cancer in Namibia.

The campaign entails the securing of membership donations at N\$100 per month to be automatically debited from individuals' account who have a heart for the fight against cancer in our country.

Funds raised through the new membership programme will ensure the doors and operations of the Cancer Association of Namibia (a registered welfare organisation) will remain open and continue to the benefit of all Namibians.

Z2C membership tackles various topics and hopes to raise much-needed funds to sustain CAN's operations that include the House Acacia Interim Home for adult cancer patients, the CHICA Interim Home for childhood cancer fighters, our National Cancer Outreach Programme and especially the Patient Financial and Commodity Assistance Programme.

Registration to become a Z2C member and debit order forms to make a monthly donation of N\$100 for one year in support of the Cancer Association of Namibia, can be obtained and completed at our offices, or by e-mailing projects2@can.org.na. Memberships are renewable annually and at the discretion of the member.

Members will receive:

- The “Acacia Magazine” showcasing what CAN and our community does to alleviate the scourge of and better the fight against cancer complimentary in electronic format.
- Members will also have first access to information on all our ongoing campaigns and invitations to join us at events. They will receive the audited financial statements indicating our commitment to transparency and accountability in what we do.
- Zero2Cancer members will also be registered as full organisational members as per the constitution of the Cancer Association of Namibia and will subsequently also have voting rights on matters relating to the official direction of the association (at least 10 out of 12 annual months membership fees must be paid up).
- As a new member you will receive a free cervical & breast screening for ladies or a PSA screening for men.
- And finally (and we feel most importantly) Z2C members will receive a stylish lapel pin badge annually to proudly wear indicating that they are fighting cancer and impacting lives in our community!

For more information on the Z2C campaign follow the link www.can.org.na/z2c.

CANCER ASSOCIATION OF NAMIBIA (Wo30)

TEL: 061 237 740 • FAX: 061 237 741 • EMAIL: projects2@can.org.na

PO BOX 30230 WINDHOEK, NAMIBIA





“HUMANS ARE THE ONLY CREATURES IN THIS WORLD WHO CUT THE TREES, MADE PAPER FROM IT AND THEN WROTE, ‘SAVE TREES’ ON IT”

- Anonymous

The Cancer Association of Namibia is integrating sound environmental business practices into its day-to-day operations to deliver a greener tomorrow.

The Cancer Association of Namibia is committed to reducing its impact on the environment. CAN strives to enhance sustainability at its facilities for employees, patients, members and customers working in and conducting business at CAN facilities across the country. The association also continues to enhance standards and processes to design, construct and operate sustainable and efficient buildings that are lifecycle cost effective.

Recycle - This enables the materials you throw away to be used again by making them into new products.

Reduce - Try to reduce the amount of waste you produce, as this is the best way to help the environment!

Reuse - Think of ways you could reuse something. Not only can you recycle the mail you receive, but you can also share your magazines and catalogs with family and friends, or donate them to hospitals, clinics, and doctors' offices for the waiting room, to retirement communities, and to schools for

use in art projects.

It is in this spirit of taking better care of our environment that CAN management made the decision to no longer provide printed copies of Acacia News magazine, but to make use of digital distribution.

As from 2019, three editions of Acacia News will be freely available on the website.

The Cancer Association of Namibia is aware that there are members who do not have access to the internet and website and therefore a print-ready copy will be made available on disc to view or to print at your own discretion.

Please contact MJ at 061 237 740 or projects2@can.org.na to confirm your membership and to order your CD copy of Acacia News. The CD will be sent at the end of the year with your Christmas card.

Five reasons why we should take care of the Earth!

- It's the only home we have.
- It grounds us.
- It provides us with food and water.
- It gives us a place to run and play.
- It is a living entity.

We value your understanding and assistance in leaving a greener planet for our children. Thank you for your cooperation and helping CAN to evolve and grow into an eco-friendly organisation.



“BE THE CHANGE YOU WANT TO SEE IN THIS WORLD”

- Mohandas Gandhi



WE STRIVE TO HELP CANCER PATIENTS IN NAMIBIA

- Accommodation support at House Acacia & CHICA Interim Home
- Patient Financial Assistance
- Circle of Hope psychosocial support
- National Cancer Outreach Programme
- Namibia National Cancer Registry

Tel: 061 237 740 • Fax: 061 237 741
 Email: help@can.org.na • PO Box 30230 Windhoek
 90 John Meinert St. Windhoek West