



2020 VOL 1

# Acacia News

Inspire Hope • Activate Change • Impact Lives





# 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**

## MESSAGE FROM CAN CEO, ROLF HANSEN

Dear CAN Family,  
2020 dawned with great enthusiasm and promise and then Coronavirus turned our world upside down. While we learn, embrace and try to adapt to the "new normal" as things develop, the CAN team extends our sincerest gratitude to each of you, who continue to support our cause. We send our love to every brave cancer warrior who has kept fighting. And, we applaud every single Namibian who, in spite of fear or uncertainty and even perhaps frustration, kept their cool, calm, and helped to keep Covid-19 at bay in Namibia!

15 May 2020 marks my 5th anniversary at the Cancer Association of Namibia. My 5-year contracted term in office comes to a close, and, while I imagined things a bit differently to what it is today, I look back at 5 of the most memorable and truly amazing years of my life! The mission was to execute a turn-around strategy to ensure sustainability and steer this great organisation into a new direction of inclusivity. I am so humbled that with an amazing board of directors, management team and dedicated colleagues, CAN has made great strides building upon the legacy and success of our predecessors.

Our new line of community support programmes, and efforts to better services, facilities and testing procedures have strengthened the fight on cancer in Namibia. We managed to achieve all of this because of loyal and supportive fellow Namibians like YOU!

I accepted the duty to lead and try make better, but in fact, this amazing association and fellow Namibians have made ME a better person. Thank you for 5 beautiful first years of serving. I look forward to walking the path with you in whatever way God deems it to be.

As we continue to battle Covid-19, let us remember that the war on Cancer never ended.

Together we CAN impact lives and make ripples of positive change.

Blessing of Light and Love,  
Rolf.







## HEAD & NECK CANCER AWARENESS

# COMMON SIGNS & SYMPTOMS OF HEAD & NECK CANCER



Sore tongue, non-healing mouth ulcers and/or red or white patches in the mouth



Pain in the throat



Painful or difficulty swallowing



Lump in the neck



Voice changes, becoming gruff or raspy



Blocked nose on one side or bloody discharge from the nose

THESE SYMPTOMS MAY ALSO BE CAUSED BY OTHER, LESS SEVERE CONDITIONS.  
IT IS IMPORTANT TO CHECK WITH A DOCTOR OR DENTIST ABOUT ANY OF THESE SYMPTOMS.

NEED  
TO KNOW  
MORE?

@CANamibia  
[www.can.org.na](http://www.can.org.na)  
[help@can.org.na](mailto:help@can.org.na)  
CALL US ON: 061 237 740 / 064 461 371



CAMPAINING  
FOR CANCER

This campaign was made possible through an unrestricted grant provided by MSD South Africa (Pty) Ltd and through donations in kind by TBWA \ Durban.

# HEAD & NECK CANCERS

## What are cancers of the head and neck?

Cancers that are known collectively as head and neck cancers usually begin in the squamous cells that line the moist, mucosal surfaces inside the head and neck (for example, inside the mouth, the nose, and the throat). These squamous cell cancers are often referred to as squamous cell carcinomas of the head and neck. Head and neck cancers can also begin in the salivary glands, but salivary gland cancers are relatively uncommon. Salivary glands contain many different types of cells that can become cancerous, so there are many different types of salivary gland cancer.

Cancers of the head and neck are further categorized by the area of the head or neck in which they begin. These areas are described below and labelled in the image of head and neck cancer regions.

**Oral cavity:** Includes the lips, the front two-thirds of the tongue, the gums, the lining inside the cheeks and lips, the floor (bottom) of the mouth under the tongue, the hard palate (bony top of the mouth), and the small area of the gum behind the wisdom teeth.



**Salivary glands:** The major salivary glands are in the floor of the mouth and near the jawbone. The salivary glands produce saliva.



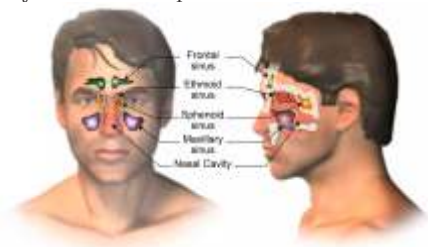
**Pharynx:** The pharynx (throat) is a hollow tube about 5 inches long that starts behind the nose and leads to the esophagus. It has three parts: the nasopharynx (the upper part of the pharynx, behind the nose); the oropharynx (the middle part of the pharynx, including the soft palate (the back of the mouth), the base of the tongue, and the tonsils); the hypopharynx (the lower part of the pharynx).

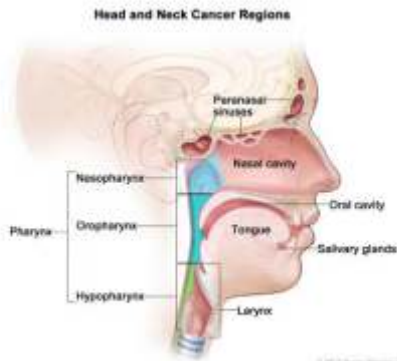


**Larynx:** The larynx, also called the voicebox, is a short passageway formed by cartilage just below the pharynx in the neck. The larynx contains the vocal cords. It also has a small piece of tissue, called the epiglottis, which moves to cover the larynx to prevent food from entering the air passages.



**Paranasal sinuses and nasal cavity:** The paranasal sinuses are small hollow spaces in the bones of the head surrounding the nose. The nasal cavity is the hollow space inside the nose.





## What causes cancers of the head and neck?

Alcohol and tobacco use (including smokeless tobacco, sometimes called "chewing tobacco" or "snuff") are the two most important risk factors for head and neck cancers, especially cancers of the oral cavity, oropharynx, hypopharynx, and larynx. At least 75% of head and neck cancers are caused by tobacco and alcohol use. People who use both tobacco and alcohol are at greater risk of developing these cancers than people who use either tobacco or alcohol alone. Tobacco and alcohol use are not risk factors for salivary gland cancers.

Infection with cancer-causing types of human papillomavirus (HPV), especially HPV type 16, is a risk factor for some types of head and neck cancers, particularly oropharyngeal cancers that involve the tonsils or the base of the tongue.

## Other risk factors for cancers of the head and neck include the following:

**Paan (betel quid).** Immigrants from Southeast Asia who use paan (betel quid) in the mouth should be aware that this habit has been strongly associated with an increased risk of oral cancer.

**Preserved or salted foods.** Consumption of certain preserved or salted foods during childhood is a risk factor for nasopharyngeal cancer.

**Oral health.** Poor oral hygiene and missing teeth may be a weak risk factor for cancers of the oral cavity. Use of mouthwash that has a high alcohol content is a possible, but not proven, risk factor for cancers of the oral cavity.

**Occupational exposure.** Occupational exposure to wood dust is a risk factor for nasopharyngeal cancer. Certain industrial exposures, including exposure to asbestos and synthetic fibres, have been associated with cancer of the larynx, but the increase in risk remains controversial. People working in certain jobs in the construction, metal, textile, ceramic, logging and food industries may have an increased risk of cancer of the larynx. Industrial exposure to wood or nickel dust or formaldehyde is a risk factor for cancers of the paranasal sinuses and nasal cavity.

**Radiation exposure.** Radiation to the head and neck, for noncancerous conditions or cancer, is a risk factor for cancer of the salivary glands.

**Epstein-Barr virus infection.** Infection with the Epstein-Barr virus is a risk factor for nasopharyngeal cancer and cancer of the salivary glands.

**Ancestry.** Asian ancestry, particularly Chinese ancestry, is a risk factor for nasopharyngeal cancer.

## What are the symptoms of head and neck cancers?

The symptoms of head and neck cancers may include a lump or a sore that does not heal, a sore throat that does not go away, difficulty in swallowing, and a change or hoarseness in the voice. These symptoms may also be caused by other, less serious conditions. It is important to check with a doctor or dentist about any of these symptoms. Symptoms that may affect specific areas of the head and neck include the following:

**Oral cavity.** A white or red patch on the gums, the tongue, or the lining of the mouth; a swelling of the jaw that causes dentures to fit poorly or become uncomfortable; and unusual bleeding or pain in the mouth.

**Pharynx.** Trouble breathing or speaking; pain when swallowing; pain in the neck or the throat that does not go away; frequent headaches, pain, or ringing in the ears; or trouble hearing.

**Larynx.** Pain when swallowing or ear pain.

### **Paranasal sinuses and nasal cavity.**

Sinuses that are blocked and do not clear; chronic sinus infections that do not respond to treatment with antibiotics; bleeding through the nose; frequent headaches, swelling or other trouble with the eyes; pain in the upper teeth; or problems with dentures.

**Salivary glands.** Swelling under the chin or around the jawbone, numbness or paralysis of the muscles in the face, or pain in the face, the chin, or the neck that does not go away.

### **How common are head and neck cancers?**

These cancers are more than twice as common among men as they are among women. Head and neck cancers are also diagnosed more often among people over age 50 than they are among younger people.

### **How can I reduce my risk of developing head and neck cancers?**

People who are at risk of head and neck cancers, particularly those who use tobacco, should talk with their doctor about ways that they may be able to reduce their risk. They should also discuss with their doctor how often to have checkups. In addition, ongoing clinical trials are testing the effectiveness of various medications in preventing head and neck cancers in people who have a high risk of developing these diseases.

Avoiding oral HPV infection may reduce the risk of HPV - associated head and neck cancers.

### **How are head and neck cancers diagnosed?**

To find the cause of the signs or symptoms of a problem in the head and neck area, a doctor evaluates a person's medical history, performs a physical examination, and orders diagnostic tests. The exams and tests may vary depending on the symptoms. Examination of a sample of tissue under a microscope is always necessary to confirm a diagnosis of cancer. If the diagnosis is cancer, the doctor will want to learn the stage (or extent) of disease. Staging is a careful attempt to find out whether the cancer has spread and, if so, to which parts of the body. Staging may involve an examination under anesthesia (in an operating room), x-rays and other imaging procedures, and laboratory tests. Knowing the stage of the disease helps the doctor plan treatment.

### **How are head and neck cancers treated?**

The treatment plan for an individual patient depends on a number of factors, including the exact location of the tumor, the stage of the cancer, and the person's age and general health. Treatment for head and neck cancer can include surgery, radiation therapy, chemotherapy, targeted therapy, or a combination of treatments. People who are diagnosed with HPV-positive oropharyngeal cancer may be treated differently than people with oropharyngeal cancers that are HPV-negative. Recent research has shown that patients with HPV-positive oropharyngeal tumors have a better prognosis and may do just as well on less intense treatment.

The patient and the doctor should consider treatment options carefully. They should discuss each type of treatment and how it might change the way the patient looks, talks, eats, or breathes.

### **What are the side effects of treatment?**

Surgery for head and neck cancers often changes the patient's ability to chew, swallow, or talk. The patient may look different after surgery, and the face and neck may be swollen. The swelling usually goes away within a few weeks. However, if lymph nodes are removed, the flow of lymph in the area where they were removed may be slower and lymph could collect in the tissues, causing additional swelling; this swelling may last for a long time.

After a laryngectomy (surgery to remove the larynx) or other surgery in the neck, parts of the neck and throat may feel numb because nerves have been cut. If lymph nodes in the neck were removed, the shoulder and neck may become weak and stiff.

Patients who receive radiation to the head and neck may experience redness, irritation, and sores in the mouth; a dry mouth or thickened saliva; difficulty in swallowing; changes in taste; or nausea. Other problems that may occur during treatment are loss of taste, which may decrease appetite and affect nutrition, and earaches (caused by the hardening of ear wax). Patients may also notice some swelling or drooping of the skin under the chin and changes in the texture of the skin. The jaw may feel stiff, and patients may not be able to open their mouth as wide as before treatment.



Patients should report any side effects to their doctor or nurse, and discuss how to deal with them.

### **What rehabilitation or support options are available for patients with head and neck cancers?**

The goal of treatment for head and neck cancers is to control the disease, but doctors are also concerned about preserving the function of the affected areas as much as they can and helping the patient return to normal activities as soon as possible after treatment. Rehabilitation is a very important part of this process. The goals of rehabilitation depend on the extent of the disease and the treatment that a patient has received.

Depending on the location of the cancer and the type of treatment, rehabilitation may include physical therapy, dietary counseling, speech therapy, and/or learning how to care for a stoma. A stoma is an opening into the windpipe through which a patient breathes after a laryngectomy, which is surgery to remove the larynx.

Sometimes, especially with cancer of the oral cavity, a patient may need reconstructive and plastic surgery to rebuild bones or tissues. However, reconstructive surgery may not always be possible because of damage to the remaining tissue from the original surgery or from radiation therapy. If reconstructive surgery is not possible, a prosthodontist may be able to make a prosthesis (an artificial dental and/or facial part) to restore satisfactory swallowing, speech, and appearance. Patients will receive special training on how to use the device.

Patients who have trouble speaking after treatment may need speech therapy. Often, a speech-language pathologist will visit the patient in the hospital to plan therapy and teach speech exercises or alternative methods of speaking. Speech therapy usually continues after the patient returns home.

Eating may be difficult after treatment for head and neck cancer. Some patients receive nutrients directly into a vein after surgery or need a feeding tube until they can eat on their own. A feeding tube is a flexible plastic tube that is passed into the stomach through the nose or an incision in the abdomen. A nurse or speech-language pathologist

can help patients learn how to swallow again after surgery.

### **Is follow-up care necessary? What does it involve?**

Regular follow-up care is very important after treatment for head and neck cancer to make sure that the cancer has not returned, or that a second primary (new) cancer has not developed. Depending on the type of cancer, medical checkups could include exams of the stoma, if one has been created, and of the mouth, neck, and throat. Regular dental exams may also be necessary.

From time to time, the doctor may perform a complete physical exam, blood tests, x-rays, and computed tomography (CT), positron emission tomography (PET), or magnetic resonance imaging (MRI) scans. The doctor may monitor thyroid and pituitary gland function, especially if the head or neck was treated with radiation. Also, the doctor is likely to counsel patients to stop smoking. Research has shown that continued smoking by a patient with head and neck cancer may reduce the effectiveness of treatment and increase the chance of a second primary cancer.

### **How can people who have had head and neck cancers reduce their risk of developing a second primary (new) cancer?**

People who have been treated for head and neck cancers have an increased chance of developing a new cancer, usually in the head, neck, esophagus, or lungs. The chance of a second primary cancer varies depending on the site of the original cancer, but it is higher for people who use tobacco and drink alcohol. Especially because patients who smoke have a higher risk of a second primary cancer, doctors encourage patients who use tobacco to quit.



*\*<https://www.cancer.gov/types/head-and-neck/head-neck-fact-sheet>*





# UNDERSTANDING #HEADANDNECKCANCER

## WHAT IS HEAD AND NECK CANCER?

Head and neck cancer describes any tumour that is found in the head or neck region, except in the eyes, brain, ears or oesophagus. The treatment plan for individual patients depends on several factors, including the exact location of the tumour, the stage of cancer and the person's age and general health.

You and your doctor should consider treatment options carefully. You should discuss each type of treatment and how it might change the way a patient looks, talks, eats or breathes.

### IMPORTANT QUESTIONS TO ASK YOUR DOCTOR:

- What is the primary site of the cancer?
- Where is it located?
- What are my treatment options?
- What treatment plan would you suggest and why?
- What is the goal of treatment? Is it to completely destroy the tumour, to reduce the tumour size or to alleviate symptoms?
- How often must I receive treatment and how will I feel during and after treatment?
- What risks or potential side effects are there for each treatment?
- How will treatment affect my daily life?  
Can I continue working?

### TIPS TO ENSURE PROPER NUTRITION DURING TREATMENT

Head and neck cancer and its treatment can cause many side effects that may be temporary or permanent. Speak to your doctor about the side effects. Many side effects can impact a person's ability to eat and get proper nutrition.

#### TIPS TO GET PROPER NUTRITION DURING TREATMENT INCLUDE:

- Eat soft and moist foods; add extra gravies and sauces to moisten foods.
- Consume soft, high-protein, probiotic-containing foods, such as plain yoghurt or mageu/maas and protein-based shakes.
- Try drinking liquids and semi-soft solids through a straw to bypass sensitive areas.
- Eat paw-paw to encourage saliva production.
- Practise good oral care during treatment.
- Cut out foods that are sharp and crunchy and need a lot of chewing.
- Limit foods that are spicy or acidic, as they can cause mouth pain.
- Do not drink alcohol or fizzy, sugary drinks.

**EARLY DIAGNOSIS CAN MAKE ALL THE DIFFERENCE AND GREATLY REDUCES THE DEBILITATING  
SIDE EFFECTS ASSOCIATED WITH THIS HIGHLY PREVENTABLE TYPE OF CANCER.**

NEED  
TO KNOW  
MORE?

@CANamibia  
www.can.org.na  
help@can.org.na  
CALL US ON: 061 237 740 / 064 461 371



**CAMPAIGNING  
FOR CANCER**

## 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 causes 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.



This World Cancer Day, we asked Namibians to stand united and call for proper cancer legislation and greater screening interventions. We encourage everyone to become "cancer proactive" and seek timely medical advice and treatment when we suspect irregularities.



Thank you Olthaver & List and Namibia Breweries, so many lives are touched by a gesture so kind.





The Cancer Association of Namibia's annual "Spray A Thon 2020" kicked off on Saturday, 29 February 2020, in Windhoek and Swakopmund and ran for the entire March to the benefit of young Namibians fighting cancer.

Funky coloured heads during March was the game, and saving lives is our aim!

Schools, companies, family and friends were invited to support the hair spraying fun.

Donations are earmarked for the CHICA (Children Fighting Cancer in Namibia) programme that supports the CHICA Interim Home for childhood cancer patients, and also aids the Children's Paediatric Ward (8 West of Windhoek Central Hospital).

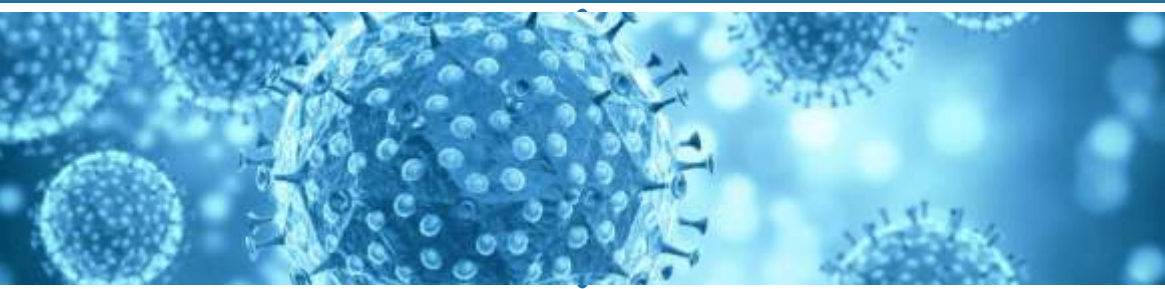
In addition to this support, the CHICA Fund also assists childhood cancer patients financially and paid out N\$185 000 in 2019 towards medical co-payments, formula milk and transport to ensure that minor patients get treated quickly.

Several schools and our committees across the country hosted their own Spray a Thon events in support of kids fighting cancer.

Thank you, dear friends of hope!



# CANCER PATIENTS AND COVID-19



**What is COVID-19?** - COVID-19, or coronavirus disease 2019, is a respiratory illness caused by a novel (or new) coronavirus that was first identified in an outbreak in Wuhan, China, in December 2019.

Coronaviruses are a large family of viruses that can cause mild illnesses, such as the common cold, to more serious diseases, such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). Because the novel coronavirus is related to the SARS-associated coronavirus (SARS-CoV), it has been named SARS-CoV-2.

The disease can spread from person to person, through small droplets from the nose or mouth that may spread when a person coughs or sneezes. Another person may catch COVID-19 by breathing in these droplets or by touching a surface that the droplets have landed on and then touching their eyes, nose, or mouth. While research on COVID-19 is still emerging, the primary belief is that the disease is mainly spread through contact with these respiratory droplets that are spread through the air or land on surfaces we all touch.

Symptoms from COVID-19 can be mild to severe and may appear between 2 and 14 days after exposure to the virus. The symptoms may include fever, cough, shortness of breath, chills, headaches, sore throat, and loss of taste or smell. Other symptoms may include aches and pains, nasal congestion or runny nose, or diarrhea. Some people who are infected may not develop symptoms.

**What can I do to avoid getting COVID-19?** - There is not currently a vaccine to prevent COVID-19, although several clinical studies are being

performed to develop an effective and safe vaccine.

In addition to washing your hands frequently, it's important to:

- Avoid touching your eyes, nose, and mouth.
- If you must cough or sneeze, use a tissue. Then throw the tissue away. Cough or sneeze into your elbow rather than your hand.
- Avoid close contact with people who are sick.
- Clean frequently touched objects and surfaces with household cleaning spray or wipes.

Some people with COVID-19 have no symptoms and don't know they have the virus, or they may not have yet developed symptoms. Because of this, the CDC recommends wearing cloth face coverings when you are out in public. Cloth face coverings won't necessarily protect you from developing COVID-19, but they can help prevent the spread of the virus in the community. The face covering should cover your nose and mouth.

Avoid unnecessary travel, and follow guidance on travel restrictions issued by the U.S. Centers for Disease Control and Prevention (CDC) or the World Health Organization (WHO).

Another critical way to protect yourself is to wash your hands often with soap and water for at least 20 seconds, about the amount of time it would take to hum the Happy Birthday song from beginning to end twice. If soap and water is not available, use hand sanitizer that contains at least 60% alcohol. The best way to clean your hands, though, is through soap and water.

Remember that wearing a cloth face mask or face covering should not replace social or physical distancing.



There is no evidence that taking vitamin C, even at high doses, can help to prevent COVID-19.

**Are there special precautions that people with cancer should take?** - People with cancer, people who are in active cancer treatment, older patients, and people with other serious chronic medical conditions, such as lung disease, diabetes or heart disease, may be at higher risk for the more severe form of COVID-19. The same rules apply for people with cancer as for those without cancer: Be sure to wash your hands well, and wash them frequently. Avoid touching your face, and avoid close contact with people who are sick.

People who are at higher risk of getting very sick from COVID-19 should avoid any non-essential travel during this time. Stay at home to reduce exposure to other people. Avoid any social gatherings. If you must leave your home, keep a distance of at least 2 metres between yourself and other people.

Only leave your home for essential reasons, such as buying groceries or picking up medication from the pharmacy, and make your trip as brief as possible. Be sure to have enough essential medications, both prescription and over-the-counter, to last for at least 1 month. Create or update an emergency contact list that includes family, friends, neighbours, and community or neighbourhood resources who may be able to provide information or assistance to you if you need it.

In order to stay connected to your support system, make plans to connect with your family and friends virtually, through video chat or phone calls. Some examples of technology that can be used for video or other live chats are social media platforms, such as Instagram and Facebook.

If you are scheduled for cancer treatments during the COVID-19 outbreak, have a discussion with your oncologist about the benefits and risks of continuing or delaying treatment. If you are not scheduled for cancer treatment but are scheduled for an appointment with your oncologist, it may be possible for the doctor to conduct the visit using videoconferencing or telemedicine. Be sure to check with your cancer care team to see if this is

## COVID-19 CORONAVIRUS PRECAUTION TIPS



WASH YOUR HANDS  
FREQUENTLY



SELF ISOLATE



AVOID TOUCHING  
YOUR FACE



COVER MOUTH AND  
NOSE WHEN COUGHING



CLEAN AND DISINFECT  
SURFACES



AVOID SICK  
PEOPLE

## SYMPTOMS

FATIGUE

FEVER

SHORTNESS  
OF BREATH

DRY COUGH



recommended for you.

Finally, it is always important to have your health care wishes in writing, in case you are too sick to make decisions for yourself. This way, your family and your medical team will know what is important to you and what your wishes are. If you have not yet done this, now is a good time. Because some hospitals and clinics are limiting visitors, and some are allowing no visitors, having your health care wishes in writing is more important than ever. Here are some examples of important questions to ask yourself, to discuss with your loved ones, and to write down:

- What level of quality of life would be unacceptable to me?
- What are my most important goals if my health situation worsens?
- If I am unable to speak for myself, who is the person in my life who I would want to speak for me?
- Who should not be involved in making decisions for me?
- If my heart stops, do I want to have CPR (cardiopulmonary resuscitation) done?

**Will anything change with my cancer-related medical visits?** - Due to the COVID-19 pandemic and the increased risk of exposure to the virus by going out in public, most hospitals and clinics have changed their visitation policies. Some may allow 1 visitor per patient, and others may allow no visitors. Before heading to your medical appointment, check with the clinic or hospital for their current visitor policy.

Your cancer care team may switch some of your appointments to telemedicine. During a telemedicine appointment, you stay at home and visit with your doctor or other health care team member through video conferencing or by telephone. Your doctor's office will let you know what system they are using for telemedicine appointments, and they will give you instructions on how to have your visit this way. Your doctor may recommend delaying some treatments for supportive care, such as bone-strengthening treatments, for example, denosumab (Xgeva) or zoledronic acid (Zometa), or intravenous iron supplementation. They will only recommend delaying treatments if they feel it is in your best interest to do so.

Cancer screening tests, such as mammograms or colonoscopies, and other tests, such as bone density tests, may also be delayed to reduce your risk of exposure to the virus.

Oncologists may recommend stretching the length of time between cancer treatments using medications, such as chemotherapy or immunotherapy. Or they may recommend delaying starting these treatments, based on your cancer diagnosis and the treatment goals. It's important to remember that your oncologist will only do this after weighing the risks and benefits of your situation.

For people who don't have a cancer diagnosis but are at high risk of cancer, such as those with a hereditary cancer syndrome like Lynch Syndrome or a BRCA mutation, your doctor may recommend delaying some screening tests or cancer risk-reducing procedures. In general, it is safe to have these delayed for some amount of time. If you have concerns about your particular risk, have a discussion with your doctor about the risks and benefits of delaying procedures.

**What should I do if I think I may have COVID-19?** - Call ahead before visiting your health care professional or the emergency department if you have a fever and other symptoms of a respiratory illness, such as cough and shortness of breath. Let them know if you think you may have COVID-19.

They will ask you questions about your symptoms, travel history, exposure, and medical risk factors to find out if you should be tested for COVID-19. They will then give you instructions on how to get tested.

A common question is about which doctor to call. I recommend calling the doctor who you have the most contact with. If you have been off cancer treatment for more than a year and are seeing your primary care provider regularly, you may call your primary care provider. However, if you are seeing your oncologist more regularly or are on active cancer treatment, call your oncologist.

If you are receiving cancer treatment that suppresses the immune system and you develop a



fever and respiratory symptoms, call your oncologist as you usually would if you develop a fever while on treatment. Be sure to follow their guidance on when to come into the office or hospital and when it's safer to stay home.

If you or your loved one has symptoms, such as trouble breathing, persistent pain or pressure in your chest, new confusion, or bluish lips, you should seek medical attention immediately.

If it is possible that you have COVID-19, you should stay at home and isolate yourself while you are tested and waiting for your test results. Staying home when you are sick is the best way to prevent transmitting the novel coronavirus and other respiratory viruses, such as the flu, to other people. If you live with someone, you should quarantine yourself in one part of the home, if possible, to lower the risk of spreading the virus to others living with you.

**Is there a way to find out if I have already had COVID-19?** - Antibody tests, also known as serologic tests, are being developed. These may be able to find out if you have already had a COVID-19 infection. These tests look for antibodies in the blood. Antibodies are specific proteins made by the body in response to an infection.

Antibody tests will not necessarily tell you if you are immune to COVID-19 or if you might be immune to a second COVID-19 infection. Some people who get COVID-19 may not make antibodies. Or they may make very low levels of antibodies. Some people may have a "false positive" antibody test, meaning the test finds antibodies, but the antibodies are related to a

different coronavirus and not COVID-19.

**If I have had COVID-19, will I be able to continue cancer treatment?** - If you have tested positive for COVID-19, you should have a discussion with your oncologist about the impact of this on your cancer treatment. At many centres, a negative COVID-19 test is recommended before chemotherapy or other cancer treatment starts again. However, some patients with COVID-19 continue to test positive even after recovering from their symptoms. In this situation, your health care team will consider the risks and benefits of restarting cancer treatment despite the positive test.

When your cancer treatment resumes, it is important to wear a mask when coming to the infusion clinic or cancer treatment centre and to practice good hand hygiene by using hand sanitiser or hand washing before and after visits.

**When will things return to normal?** - Public health experts are working with governments to help answer this question. In some parts, stay-at-home restrictions have been lifted or may be lifted in the coming days or weeks. However, we know that the coronavirus continues to circulate in in some communities more than others. As nonessential businesses reopen and as more people begin to leave their homes regularly, it is likely that we will see another surge in COVID-19 cases and deaths.

If your local community allows nonessential businesses to reopen, the best way to stay safe is to continue to stay at home and avoid being in public as much as possible. Wear cloth face masks or face coverings when you must leave your home. Continue to wash your hands thoroughly and frequently and stay at least 2 metres away from other people if you need to go to the grocery store or pharmacy or other areas where other people may be.

The safest approach, especially if you are considered high risk, is to continue living as if the stay-at-home restrictions are still in place.

<https://www.cancer.net/blog/2020-05/coronavirus-and-covid-19-what-people-with-cancer-need-know>



# CAN CONTINUES TO SUPPORT CANCER PATIENTS

## CAN DONATES TO PAEDIATRIC WARD AT WINDHOEK CENTRAL HOSPITAL



While the battle on Covid-19 continues, the war on Cancer never ends. The Cancer Association of Namibia reaffirmed its fight against childhood cancer by extending support to the Ministry of Health and Social Services' paediatric oncology treatment department for the new financial year.

A donation of nappies, paediatric formula milk, food supplements and hydration medication to the value of N\$10 000 was handed over at the occasion.

In addition to ongoing donations to the hospital as needs arise, the CHICA Interim Home also provides free accommodation, meals and transportation to childhood cancer patients accompanied by a parent or guardian while receiving treatment in Windhoek.

Through the CHICA Fund, financial assistance in excess of N\$250 000 is extended to help children who are on active cancer treatment annually.

The Cancer Association of Namibia thanks the Namibian community for supporting our initiatives, as this allows CAN to positively impact the lives of brave, young cancer fighters.

Members of the public interested in joining this support programme can make donations of nappies or formula milk at the CAN head office in Windhoek (061 237740) or regional branch in Swakopmund (064 461274).



## KEEP SUPPORTING THE FIGHT AGAINST CANCER IN NAMIBIA

Please continue supporting cancer fighters in Namibia. Items available at CAN

WINDHOEK - 061 237740  
SWAKOPMUND - 064 461274



To keep supporting those in need, we encourage and ask, if you can afford to make a donation or purchase items, please contact the team.

CAN just received our AMAZING new "buff" line, that was supposed to be launched in June, but is already available for sale at N\$100.

These are amazing colourful buffs for men and women, and funky designs for kids too!

So, before you go out in public, buy a CAN-buff, support a much-needed cause and let's fight COVID-19 AND Cancer together.

For orders, please contact Renay at 061 237740 or [admin@can.org.na](mailto:admin@can.org.na)





## 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 CAN 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 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.

## 2020 PROJECT PARTNERS



PROUD TO BE PART OF



Namibia Breweries Limited



## LIONS SUPPORT CHILDREN FIGHTING CANCER



The Henties Bay Lions Club donated groceries to the CHICA (Children Fighting Cancer) in Namibia programme of the Cancer Association of Namibia. Children on treatment are accommodated complimentary at the CHICA Interim Home of CAN in Windhoek. Food purchases remain one of the biggest expenses to keep the doors of this project open. The association wholeheartedly thanks the Lions members for their support.

## PUPKEWITZ MEGABUILD AND MARATHON TOOLS KEEP SUPPORTING THE FIGHT AGAINST CANCER



Buy any of the participating Marathon products at any Pupkewitz Megabuild branch, and N\$10 will automatically be donated to the Cancer Association of Namibia.

#support #cancer #donate #can  
#cancerassociation #Namibia #Marathon  
#pupkewitzmegabuild #megabuild

## CHILDREN IN THE WILDERNESS SUPPORTING CHILDREN FIGHTING CANCER



Wilderness Safaris Namibia, through their "Children in the Wilderness" community support programme; donated toys and food to the childhood cancer interim home (CHICA), a project of the Cancer Association of Namibia that supports Namibian children fighting cancer. CAN provides complimentary accommodation to children who travel from outside Windhoek to get treatment in the capital. With a capacity to welcome 16 mother-and-child stays per night, the programme welcomes support of especially cleaning materials and food to keep operations going. Families affected by childhood cancer are invited to contact the Cancer Association of Namibia at 061 237740 or [hope@can.org.na](mailto:hope@can.org.na)

## SECONDHAND STORE



**Thursdays from 09:00 till 12:00 at  
House Acacia 94 John Meinert St.  
Windhoek West**

## HARDAP CAN VOLUNTEERS MAKING A DIFFERENCE IN THE REHOBOTH COMMUNITY



A brilliant initiative by the loving Cancer Committee of Rehoboth, volunteering to help their community!

In addition to N\$5000 donated by the CAN national office to our CAN Hardap Centre voluntary committee in support of this initiative, the local business and private community took hands to help care for cancer patients in their community and contributed food items and more money to buy food items.

The local team will be able to pack more food parcels for vulnerable cancer patients in Rehoboth.

We sincerely thank these amazing volunteering angels of hope, the community and everyone who supports CAN in this project. We are truly so proud to partner with our community to Inspire Hope, Activate Change and Impact Lives.

Persons in the Rehoboth area who wish to donate to the cause of food parcels can contact Yvonne at 0814475121 who is leading this initiative or CAN head office at 061 237 740. Donations can also be delivered to the CAN office at 90 John Meinert St. Windhoek West.



## RÖSSING SUPPORTS CANCER



Thank you to Rössing Uranium for this wonderful initiative!

The monies raised will go a long way in building up the CAN Erongo Centre in Swakopmund!

## COLLEGE OF THE ARTS CREATES CHRISTMAS MEMORIES



The College of the Arts annually hosts the "Christmas Memories Concert" in support of the Cancer Association of Namibia.

The 2019 event raised in excess of N\$18 000 that is earmarked for community health clinics that the organisation presents on regular Tuesdays (men's health) and Thursdays (women's health). This donation enables CAN to screen 183 Namibians (women for cervical cancer together with a clinical breast examination, or men for prostate cancer).

The Cancer Association of Namibia thanks the Pupkewitz Foundation that financially supported the project, while also applauding the lecturers and students of the college who participated in making this event a success.



**STOP** SMOKING  
BEFORE  
**SMOKING**  
**STOPS YOU**

**International NO TOBACCO DAY**  
**Sunday, 31 May 2020**



WO 30

**CANCER ASSOCIATION  
OF NAMIBIA**

**Cancer prevention awareness**  
**[www.can.org.na](http://www.can.org.na)**





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](mailto: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](mailto: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](http://www.can.org.na/z2c).

CANCER ASSOCIATION OF NAMIBIA (Wo30)

TEL: 061 237 740 • FAX: 061 237 741 • EMAIL: [projects2@can.org.na](mailto: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](mailto: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**



