



Challenges for cancer in the Pacific Island countries

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Pacific Island Project/Royal Australasian College of Surgeons/DFAT
July-December 2018

Activity
Summary

- 213 health professionals supported (m – 91; f – 80; unspecified – 42)
- 341 operations conducted (m – 193; f – 145, unspecified – 3)
- 1209 consultations (m – 619; f – 571; unspecified – 19)
- Seven (7) countries: Fiji; Kiribati; Federated States of Micronesia; Samoa; Solomon Islands; Tonga; Vanuatu
- 19 visiting medical teams mobilised
- 3 regional education programmes supported
- 14 specialised areas (anaesthesiology, audiology, colorectal surgery, dermatology, ENT surgery, gastroenterology, neurosurgery, orthopaedic surgery, paediatric surgery, physiotherapy, plastic and reconstructive surgery, psychiatry, urology, nursing)
- 70 volunteers mobilised (m – 38; f – 32)
- 46% of project participants female, 50% male, 4% unspecified



Governance

Pacific Health Ministers

Priorities

Strategies

Regional vs country specific

Policies and framework

Regional centers of excellence



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Workforce

Country specific plans

Regional plans

Fiji National University

WHO/SPC

Specialist Colleges and Societies

Specialisation/Training

Sustainable

Retention



Collecting data for global surgical indicators: a collaborative approach in the Pacific Region

Glenn Douglas Guest,¹ Elizabeth McLeod,¹ William R G Perry,²
Viliami Tangi,³ Joao Pedro,³ Ponifasio Ponifasio,³ Johnny
Hedson,¹ Jemesa Tudravu,³ Douglas Pikacha,³ Eric Vreede,¹
Basil Leodoro,³ Noah Tapaua,³ James Kong,¹ Bwabwa Oten,³
Deacon Teapa,³ Stephanie Korin,¹ Leona Wilson,⁴ Samson
Mesol,³ Kabiri Tuneti,³ John G Meara,⁵ David A Watters

Guest GD, McLeod E, Perry WRG, et al. Collecting data for global surgical indicators: a collaborative approach in the Pacific Region. *BMJ Glob Health* 2017;2:e000376. doi:10.1136/bmjgh-2017-000376



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Services

In-country, Regional, International

Centers of excellence/collaboration

Paediatric oncology and cardiology

Chemotherapy procurement

Planning for Radiotherapy to be available



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Donors

New Zealand Medical Treatment Scheme/MFAT

Pacific Island Project/DFAT

Taiwan

Japan

China

ROMAC

In-country referral schemes



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Research/Data

Prioritise and value data management

Pacific Registry Hub

Inform policy

Develop Career pathways

Technical assistance/WHO/HRC/NHMRC/SPC



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Conclusion

Leadership

Strategic investments PICs, NZ, Australia

(Health and Education)

Long-term commitment with defined outcomes

Sustainability

SHARE THE WEALTH



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Table 1 Description of Lancet Commission global surgical indicators

Global surgical indicator	Description
Indicator 1: access to timely essential surgery	Percentage of the population who can access, within 2 hours, a facility capable of performing the bellwether procedures (caesarean section, laparotomy and open fracture management)
Indicator 2: surgical, anaesthesia and obstetric density	Number of physician proceduralist in surgery, anaesthetics or obstetrics per 100 000 population
Indicator 3: surgical volume	Total number of surgical cases per 100 000 population
Indicator 4: perioperative mortality rate	Deaths occurring after any surgical procedure and before discharge from hospital (%)
Indicator 5: risk of catastrophic expenditure due to need for surgical care	Direct out-of-pocket costs from surgical care exceeding 10% of total income or 40% of remaining income after food and housing are accounted for
Indicator 6: risk of impoverishment due to need for surgical care	Direct out-of-pocket costs from need for surgical care resulting in falling below poverty line of US\$1.25/day.

