

FREQUENTLY ASKED QUESTIONS

S/NO	Question	Answers
1.	What is cancer?	Cancer is a disease in which body cells become abnormal, grow uncontrollably, and may spread to other organs, thereby affecting their functions.
2.	What causes cancer?	There is no particular cause, but there is an interaction of many risk factors that increase an individual's chances of developing cancer.
3.	What is a risk factor?	A risk factor is something that increases a person's chance of developing cancer.
4.	What are some of the cancer risk factors?	Some of the risk factors include but are not limited to the following: • Genetic factors; • Lifestyle factors such as tobacco and alcohol use, diet, and physical inactivity; • Certain types of infections; • Environmental exposure to some types of chemicals and radiation.
5.	How does cancer spread within the body?	Cancer may spread when some cancer cells from one part of the body, enter the bloodstream or lymphatic system and get carried to a different part of the body where they continue developing.
6.	How can cancer be prevented?	There are no clearly defined ways of preventing cancer but the following can reduce chances of developing cancer: • Eat a healthy diet • Exercise regularly • Avoid use of tobacco • Avoid use of alcohol • Avoid unnecessary exposure to radiation, industrial and environmental toxins • Protect oneself from the sun or use sunscreen • Get vaccinated against Human Papilloma Virus (HPV) and Hepatitis B • Avoid risky sexual behaviours for example unprotected sex • Get regular medical care and check up
7.	Is there a cancer vaccine?	There are no vaccines for cancers; however, there are vaccines for some viruses such as Human Papilloma Virus (HPV) and Hepatitis B that are known to cause cancer.

8.	What is the cost of cancer treatment and care in Kenya?	The cost of cancer treatment is influenced by various factors such as: • Type of cancer, • Type of treatment modality required, • Stage of the cancer, • Frequency of treatment required • Inpatient/ outpatient care • Health Care Service providers (Public/ Private/Mission hospitals) Note: It is advisable to consult a health care provider at the point of service delivery for cost information.
9.	What are the options for financing cancer management?	The government through the National Hospital Insurance Fund (NHIF) provides a cancer treatment package. To benefit, one needs to enrol and keep the membership updated. For more information on the NHIF cancer package, kindly visit the nearest NHIF office. There are other financing options such as private insurance, among others.
10.	What are some of the most common types of cancer in Kenya?	The following are the common 5 cancers in Kenya as per Globocan data, 2020: • Breast cancer • Cervical cancer • Prostate cancer • Oesophageal (food-pipe) cancer • Colorectal cancer
11.	Can children get cancer?	Yes, children can get cancer. Parents and caregivers are advised to observe their children (0-19years) for any abnormal behavioural or body changes, and seek medical advice immediately.
12.	What are the available treatment options for cancer in Kenya?	The most common treatment options available in Kenya are • Surgery: Physical removal of cancerous tissue and organs. • Radiotherapy: Use of high energy radiation to kill cancer cells and shrink tumours.

		• Chemotherapy: Use of medicines that stop the growth of cancer cells. However, there are other available options depending on one's condition and the characteristics of the cancer. These include: • Hormonal therapy: Use of medicines to slow or to stop hormones that make cancer to grow. The medicines can also be used to control hormonal levels in the patient. • Immunotherapy: Cancer treatment that uses medicines that stimulate or suppress the immune system to help the body fight cancer. Note: for further information consult your Health Care Provider
13.	What is palliative care?	This is care that aims to improve the quality of life for both cancer patients and their families. Support services are collectively known as palliative care and are available for cancer patients and their families. They include: • Counselling • Loss and grief management • Nutritional support • Financial management • Side-effects management • Family dynamics • Care giver support These are offered from the point of cancer diagnosis throughout the patient's journey and beyond.
14.	What are Clinical trials?	Clinical trials are studies in which people volunteer to test new drugs, interventions or other treatments not necessarily in the context of cancer prevention and care spectrum. In the context of cancer treatment, clinical trials may be used to learn whether a new treatment works better than the treatments used currently.
15.	Is cancer treatment worse than cancer?	Cancer treatment has side effects that are unique to every patient. This is part of the treatment programme and the health care provider can provide information on how to better manage these side effects at home and in

		the hospital. Support groups also help in sharing of information on how to cope with these side effects. Individuals are at liberty to seek as much information as they wish to, understand the cancer diagnosis and the goal of treatment. It is important to be informed about possible side effects of treatment and potential outcomes of the treatment. This process needs to be guided by a health care provider as the family and the patient decide. Remember each patient is unique as an individual within a unique setup in different circumstances, and so their information needs should be tailored to their situation and circumstances.
16.	Why do people with the same type of cancer receive different treatments?	This depends on many factors such as: • The stages of the cancer • The age of the patient • Pre-existing health conditions • Other clinical considerations and patients' characteristics and conditions
17.	Can you get cancer from an infected person?	No. Cancer is a non-communicable disease.
18.	Who can get cancer?	Anyone can get cancer.
19.	Can cancer be cured?	Yes. When discovered early and treatment is initiated promptly. Many patients have survived cancer. If cancer is discovered later or treatment is delayed, the cancer is managed and put under control.
20.	What is a remission period?	Remission is the period when the cancer is responding to treatment and is under control.
21.	What are the stages of Cancer?	Stage 0: At this stage there are abnormal cells, which, if left untreated, may develop into cancer. Stage 0 cancers are often curable. Stage I: At this stage there is a small tumour that has neither grown nor spread to nearby tissues. It is sometimes called early-stage cancer. Stages II and III: During these stages, the cancers or tumours have grown and begin to spread to surrounding tissues or the lymph nodes.

		Stage IV: Cancer in this stage has spread to many parts of the body. This stage is also known as metastatic or advanced cancer
22.	Is nutrition important for cancer patients?	Yes, just like for all patients and human beings, nutrition is important for cancer patients and their families. By keeping strong and nourished through proper nutrition, you will remain healthy for your cancer treatment. Families need to encourage patients to have nutrition that helps restore the digestive health, prevent malnutrition, and satisfy dietary requirements during treatment.
23.	Is it possible to continue working/ learning/ while on treatment?	Yes, many patients can maintain a productive lifestyle during treatment. It is important that patients do not take up excessive work load.
24.	Can I manage cancer pain?	For a tumour that causes pain, removing or destroying all or part of the tumour with chemotherapy or radiation can help. Pain control often starts with medicine. Many drugs are used to treat pain which the patient and their doctor determine and alter as pain level changes.
25.	What is screening?	Screening helps find health problems before symptoms appear.
26.	What cancers can be screened?	Some of the cancer can be screened. These include; • Breast cancer • Cervical cancer • Colorectal cancer • Lung cancer • Oral cancer • Prostate cancer-individualized screening approach. Mass screening for prostate cancer not recommended • Patients presenting with the following lower urinary tract symptoms should be screened for prostate cancer; • Urge to urinate often, especially at night • Difficulty in starting or stopping the urine flow • Inability to urinate • Weak, decreased or interrupted urine stream • A sense of incompletely emptying the bladder • Burning or pain during urination (Dysuria) • Blood in the urine or semen

		• Post-micturition dribbling • Note: Early detection for Some childhood cancers such as cancer of the eye is possible				
27.	What is alternative medicine?	These are medications, practices, and products that are used instead of conventional care given by health care workers. It is advisable to seek advice from a certified health care provider.				
28.	What is complementary medicine?	These are medications, practices, and products used along with conventional medicine given by health care workers. It is advisable to seek advice from a certified health care provider.				
29.	What policy interventions are in place to manage cancer in Kenya?	There is the establishment of National Cancer Institute – Kenya that provides policy advisory on all matters of cancer prevention and control. The National Health Insurance Fund (NHIF) provides a package for financing cancer management; Most cancer prevention, screening, diagnosis, treatment and control services are decentralized and currently available at the community level. Capacity strengthening at county level is a conscious strategy that government of Kenya has prioritized. Public education to increase awareness on the risk factors for cancer, cancer prevention and care remains a top priority for the government. Regulation of the to ensure quality care remains a key strategy in place.				
30.	What is cancer stigma?	This is the negative attitude directed to a person living with cancer or their families. Stigma leads to discrimination				
31.	How can stigmatization be reduced?	Regular sensitization on cancer Getting regular support from family and friends.				
32.	Where can I get services on cancer prevention and care?	One can get information and services at various health care facilities as follows: <table><tr><th>Level of Care</th><th>Services provided</th></tr><tr><td>Level 1: Community Health Unit (community health workers)</td><td>Health education on cancer prevention</td></tr></table>	Level of Care	Services provided	Level 1: Community Health Unit (community health workers)	Health education on cancer prevention
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		Level 2-3 :(Dispensaries & Health Centres)) Level 4-6 (Referral facilities)	Health education, Screening, Early detection of cancer Health education, Screening, Early detection; Treatment of cancer
CERVICAL CANCER			
33.	What is cervical cancer?	This is cancer that develops in the cervix. The cervix is located between the vagina and the womb.	
34.	What causes cervical cancer?	There is no clear cause but there are risk factors that increase a person's chances of developing cervical cancer. Cervical Cancer is linked to Human Papillomavirus Virus (HPV) which is a sexually transmitted viral infection. HPV may cause cancer in some women; however, if detected early, precancerous lesions caused by HPV can be treated successfully before they develop into cancerous cells. It is important to for all women over 30 years to get screened for cervical cancer.	
35.	Can cervical cancer be prevented?	The risk of developing cervical cancer can be reduced by • HPV vaccination that is available to all girls aged 10-14 years. The vaccine is available in all the public health facilities in Kenya. • Cervical Cancer Screening • Avoid risky sexual behaviour such as multiple sexual partners, early sexual debut, unprotected sex	
36.	What are the signs or symptoms of cervical cancer?	Cervical cancer presents with one or several of the following signs and symptoms: • Vaginal discharge (sometimes foul smelling) • Irregular vaginal bleeding - between monthly periods or after a pelvic exam • Post-menopausal bleeding • Bleeding after sex, • Heavy vaginal bleeding or discharge (more than usual) • Urinary frequency & urgency • Back ache • Lower abdominal pain	

		• Pain during sex or urination • Weight loss • Inability to pass urine due to obstruction of the ureters • Inability to control flow of urine or faecal matter (Urinary and faecal incontinence) • Swelling of the lower limbs • Difficulty in breathing due to cancer spread to the lungs Investigations by a doctor will confirm if one presenting with the above signs has cancer of the cervix. Promptly seek medical assistance if those signs are there. Some of these signs appear in the later stage of the disease.
PROSTATE CANCER		
37.	What is prostate cancer?	This is a cancer that affects the prostate gland which is common in men 40 years and above.
38.	What causes prostate cancer?	Some of the risk factors that increase the chances of developing prostate cancer are: • Race: It is more common in Africans • Diet: Inadequate intake of micronutrients like Zinc, Selenium, Vitamin E • Hormonal: High testosterone levels. • Infections e.g. chronic prostatitis (inflammation of the prostate) and Sexually Transmitted Infections • Family history - Genetic factors • Age - Men over 40 years are more at risk
39.	What are the signs of prostate cancer?	Prostate cancer presents with one or several of the following signs and symptoms: 1. Urination obstruction symptoms such as ○ Hesitancy to start urine flow ○ Intermittent urinary stream ○ Decreased force of urine stream ○ Examination shows growth into the urethra or bladder neck 2. Blood in urine (Hematuria) 3. Oedema of the lower extremities/swelling of the feet 4. Pelvic and perineal discomfort

40.	Can prostate cancer be prevented?	Chances of developing prostate cancer can be minimized through modification of the modifiable risk factors for developing cancer. These risk factors include but are not limited to the following: • Lifestyle factors such as tobacco and alcohol use, diet, and physical inactivity; • Certain types of infections; • Environmental exposure to some types of chemicals and radiation • Individualized screening for prostate cancer.
CHILDHOOD CANCERS		
41.	Do children get cancer?	Although rare, cancers in persons below 18 years do occur.
42.	What causes childhood cancers?	The cause of childhood cancer is not well understood. However, some of the childhood cancers are associated with radiation, genetic factors, viral infections e.g Epstein-Barr, Hepatitis B, Human Herpes and HIV
43.	What are the most common childhood cancers?	The most common childhood cancers are: • Leukaemia (Cancer of the blood) • Lymphomas e.g Burkitts lymphoma • Tumours of the central nervous system • Kidney tumours • Retinoblastoma
44.	How can one identify a child who has cancer?	The early signs and symptoms of childhood cancers are non-specific. One can use this simple acronym "CHILD CANCER" to detect early general signs and symptoms C- Continued, unexplained weight loss H- Headaches often with early morning vomiting I- Increased swelling or persistent pain in bones, joints, back, or legs L- Lump or mass, especially in the abdomen, neck, chest, pelvis, or armpits D- Development of excessive bruising, bleeding, or rash C- Constant infections A- A whitish colour behind the pupil N- Nausea that persists or vomiting without nausea C- Constant tiredness or noticeable paleness E- Eye or vision changes that occur suddenly and persist R- Recurrent or persistent fevers of unknown origin.
BREAST CANCER		

45.	What is Breast cancer?	Breast cancer is a disease in which cells in the breast grow uncontrollably, then form a malignant tumour that can invade the surrounding tissues. They can also spread to other parts of the body, usually through the lymph system to form a secondary (metastatic) tumour
46.	What causes Breast cancer	Some of the risk factors that increase the chances of developing breast cancer in women are: • Family history of breast cancer • Beginning your periods at a younger age • Beginning your menopause at an older age
47.	How can breast cancer prevented?	1. Lifestyle changes can prevent breast cancer, including: • Eating a healthy diet • Exercising regularly • Maintaining a healthy body weight • Breastfeeding • Avoiding smoking • Avoiding harmful consumption of alcohol 2. Annual mammography screening among women from 40 years to 74 years and ultrasound screening for women below 40 years is recommended • Knowledge of what is normal in your breast is important to maintain good breast health • Discuss breast health and awareness with your healthcare provider • Report any abnormality noted in your breast • Breast-self-examination and clinical breast examination are complementary but do not substitute mammography as screening tool • Asymptomatic women above 40 years should do mammography screening annually • Clinical Breast Examination (CBE) should be considered as part of a physical examination and used as an opportunity to discuss and educate the woman on breast health. • Ultrasound is not recommended for routine screening but may be used to complement mammography in patients with increased breast density. 3. Performing monthly Breast Self-Examination (BSE) can increase breast awareness and help to detect breast

		changes early. Women are encouraged to be aware and to report changes in their breasts, such as nipple discharge, rash on nipples, inversion, dimpling or new mass in the breast or axilla.
48.	What is a mammogram?	A mammogram is an X-ray of the breast. Mammograms are commonly used to screen for breast cancer. If an abnormality is detected on a screening mammogram, your doctor may recommend a diagnostic mammogram to further evaluate that abnormality. Breast ultrasound.
OESOPHAGUS (food pipe) CANCER		
49.	What is Oesophageal cancer?	Is the cancer of the tube that runs from the throat to the stomach
50.	What causes Oesophageal cancer?	Exposure to the following risk factors may increase your chances of developing oesophageal cancer. • Smoking tobacco, • Drinking alcohol, • Overweight • Family history • Bile reflux • Carbon exposure e.g. from firewood and industrial sources • Age: Oesophageal cancer is most often diagnosed in people over age 50. • Oesophageal cancer is more common in men than women.
51.	What are the screening modalities for Oesophageal cancer?	Screening for oesophageal cancer is through endoscopy.
52.	Who should be screened for oesophageal cancer?	1. Individuals with first degree relatives with oesophageal cancer should be screened 10 years prior to index age of diagnosis of the first degree relative or at age 40 whichever is earlier 2. Asymptomatic individuals living in high risk areas should get a one-time screening endoscopy at age 40 years. 3. Patients treated for head and neck cancer squamous cell carcinoma should be screened annually for ten years. 4. Patients who have had caustic acid ingestion should be screened 10years from the injury via endoscopy

53.	Can Oesophageal Cancer be prevented?	One can reduce the risk of getting oesophageal cancer by quit smoking and avoiding alcohol. Consult a doctor if you experience persistent heartburn, which may be a sign of gastro-Oesophageal reflux disease (GERD). Consider regular screening for conditions that can lead to oesophageal cancer.
54.	What are the symptoms of Oesophageal cancer?	Some of the most common symptoms of Oesophageal cancer include: • Difficulty swallowing • Chest pain or discomfort, such as pressure or a burning sensation • Weight loss and lack of appetite (often related to difficulty swallowing) • Hoarseness • Persistent cough Many of these symptoms are also associated with other medical conditions, so having any of them does not necessarily mean that you have Oesophageal cancer. If you experience any of these symptoms, talk to your doctor.
	Colorectal cancer	
55.	What is colorectal cancer?	Colorectal cancer develops in the colon or the rectum. These cancers are also referred to as colon cancer or rectal cancer, depending on where it develops.
56.	What causes Colorectal cancer?	Certain risk factors are linked to the disease, including unhealthy diet, tobacco and alcohol use. People with a family history of colorectal cancer have a higher risk of developing the disease.
57.	Can colorectal cancer be prevented?	Chances of developing colorectal cancer can be minimized though screening for persons aged 45 years and above through faecal occult blood testing and colonoscopy as guided by the health care provider.
58.	What are the symptoms of colorectal cancer?	Some of the symptoms of colorectal cancer include: • Change in stool habits (difficulty passing stool or frequent diarrhoea) • Blood stained stool or bleeding from the rectum • Black stool • Constant feeling of wanting to pass stool • Frequent pain and feeling of fullness in the abdomen



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