

Editor's Desk



Dr. A. Muruganathan
Chief Editor

CANCER CARE PIONEER INSTEAD OF ICON

In 1886 on the 30th of July, a girl was born in a middle class family in a state called "Pudukottai". She was named Muthulakshmi. One hardly realized that she was God's creation who would rise in this world to fight cancer.

Muthulakshmi went on to become the first woman in India to graduate in medicine in 1912. She along with two Europeans founded the Women's India Association (WIA) in 1918. In 1927, she became the first woman in the world to preside over a legislative body. She was an active member in the freedom struggle.

In 1922, Dr. Muthulakshmi Reddy detected cancer in her sister's rectum. From that day, she stayed by her bedside with agony till she passed away a year later. This incident sparked of her involvement in cancer and she proposed to build a cancer hospital in Madras. She formed a Cancer Relief Fund in 1949 and with the support of the WIA, she established the cancer hospital in 1954 in a small hut.

She made sure her son, Dr. S. Krishnamurthi, after completing his medicine in the US stay back in India and serve the cause of poor cancer patients. The rest is now seen in the form of one of the best state-of-art cancer hospitals in the world today.

She was an eminent medical practitioner, social reformer and legislator. She is also the founder of the Adyar Cancer Institute in 1954

Dr. Muthulakshmi Reddy was also responsible for several other social reforms. She passed a resolution to set up separate hospitals for women and children and the government also accepted her proposal to open up a children's section in maternity hospitals. She initiated measures for the betterment of medical facilities for slum dwellers and was actively involved in the construction of women's toilets.

Dr. Reddy has several firsts under her belt, other than the ones already mentioned—she was the first woman House Surgeon in the Government Maternity and Ophthalmic Hospital, the first woman legislator in British India, the first Chairperson of the State Social Welfare Advisory Board and the first Alderwoman of the Madras Corporation Avvai Home.

She was awarded the Padma Bhushan in 1956 by the Government of India in recognition of her service. It cannot be denied that her work changed many lives and paved the way for the appointment of Indian women in positions of authority.



The Medical **Bulletin**

The Adyar Cancer Institute is currently a world-renowned institution and offers treatment to approximately 80,000 cancer patients a year.

On this day let us follow these points.

Key takeaways on emotional cancer care:

- ***Address emotional distress in the oncology care pathway*** to improve patient experience and cancer care outcomes
- ***Use innovative approaches*** such as digital processes with intelligent systems, context analysis and machine learning to early detect affective states and identify anxiety and emotional distress
- ***Advance care delivery by implementing integrated interventions*** to mitigate distress along the cancer pathway and improve clinical outcomes

The **COVID-19 pandemic** has led to many problems in the healthcare sector – for providers and patients alike. **Access to care** has become more difficult since the start of this pandemic and especially cancer patients are disproportionately affected by this. **Screening programs** were sometimes paused, or not sought out at all due to a fear of contracting COVID-19 in the first place. And for existing patients it often meant that **cancer treatments** were paused or postponed. During most of the pandemic, **oncology** facilities experienced a sharp decline in outpatient visits.

Due to these delays, there is already an increase in **demand for cancer services and oncology appointments**. In the process, a huge increase in patient volume is expected in the coming months, so cancer programs must begin now planning for the coming backlog.

- **prepare clinical operations** to accommodate an increase in patient demand while ensuring patient and staff safety Develop or maintain strict safety protocols to ensure the safety of patients
- **Prepare the clinical and nonclinical workforce** to respond to increases in demand
- **Update the cancer care facilities** to meet current social distancing requirements, while at the same time accommodating additional patient volumes
- Thoughtfully **resume clinical research efforts**
- **Enhance communication with patients**, allaying their fears while also educating them about the risks inherent with delaying treatment
- **Deploy financial management systems** to maximize revenue

Dr. A. Muruganathan
Chief Editorial