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Review



Why Cancer/Terminal III Diagnosis Unsuccessful in India: A Qualitative Analysis

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Abstract

The underlying aim of the study is to investigate the underlying reasons behinds the rapid growths of cancer populations and the cancer mortality rates in the present India. The study emphasis mainly on the cancerous factors, the underlying barriers behind the unfruitfulness of the terminal diagnosis, and the propose solutions or preventive measures in traditional ways.

The current study is an analytical study on the collected data and reports of the following reliable sources:

- The Population-Based Cancer Registries Data' of the Central and State Governments.
- The Data from National Cancer Registry and Regional Cancer Centers,
- National Family Health Survey of India (NFHS-3), NICPR-National Institute of Cancer Prevention and Research, ICMR-Indian Council of Medical Research, Indo-Asia News Service (IANS), and Zee Media Bureau. The study also utilized the available journals database, along with WHO database. The researcher also accesses to the government's data and hospitals documents on cancer statistics and their reports.

The modern turns out to be a cancer hub and the world largest contributor to cancer mortality rates. The numbers of cancer effected people increases every year, while the government had minimal inputs towards the preventive measures against cancer/terminal illness.

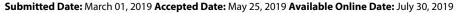
Keywords: Awareness, cancer, diagnosis, mortality rates, terminal Illness

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ooking at the current cancer statistics, it is visible that Indian as a whole fought against the cold-blooded killer 'terminal illness' in the most unsuccessful way. The failures of the health care systems of the country in its terminal diagnosis resulted in making the larger groups of the cancer patients facing the worst ill experiences one had ever gone through in life. India is the world largest contributor to cancer mortality with around 5.00.000 deaths per year, mainly due to people unawareness of the cancer and its symptoms diagnosis policy. However, no proper preventives measures or actions had not been taken up by the government, though the country is densely populated with terminal illness. Moreover, 80% of the cancer populations in India lives in

rural undeveloped areas with low economic status, who were not able to afford for their cancer diagnosis and on the other hand, higher diagnosis fees in India. Thus, undergoes painful terminal ill experiences and live a life of suffering hell without accesses to any hospitals or clinical diagnosis. The Indian Council of Medical Research, New Delhi, predicted that the numbers of terminal deaths in the country would increases significantly in the coming years. Stating by 2020 around 17.00.000 Indian would be diagnosing this cool-blooded killer and its related deadly disease. Moreover, the percentages of cancer patients would likely to be increases by 20% in India, if the government did not take up any immediate quality preventive measures against this cool-blooded killer.

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India in the Battle of Terminal III Illness: The Present Scenario's

In the definitions of World Health Organization (WHO), cancer or terminal illness is the uncontrolled growth of deadly cells with unstoppable spreads, which destroys every portion of human body organ one after another. Once the deadly cells increase and affected the patient's startlosing the functioning of his/her body sites that usually leads to a paralyses condition. These deadly cancer cells expanded through invading the surrounding tissues and spreads to other parts of the body by metastasis leading to 8.2 million global deaths a year at present. In which India becomes the world top contributor to cancer mortality rates with around 5.56.400 terminal deaths per year.[1] The modern India turn out to be a cancer hub with 2.5 million cancer-affected people, which would be expected toincrease by 50% in 2020, ifno immediate action plan had been done by the governmental and non-governmental agencies. At present a premature death through noncommunicable diseases is the leading causes of deaths in India like cardiovascular ailments, chronic respiratory problems, and diabetes.[2] The cervical and stomach cancer symptoms populations in the Indian state of Mizoram alone is equal with the total numbers of cancer affected populations of Japan and is the highest cancer populated region in the world.[3]

The Zee Media Bureau Report, among the 8.8 million global deaths, in which India is consider as the world largest contributor to cancer mortality rates. [4] In another finding, around 505.428 to 5.00.000 cancer patients in India died per year. The main reason for the high cancer mortality rates in India is mainly due to people unawareness of the treatment procedures of cancer and its symptoms. This being the reason the cancer affected people consulting their Oncologists mostly when they are in the terminal stages, which is in the fourth stage' of cancer symptoms that is impossible to cure. [5] Thus, around 80% of the deaths from cancer's cannot be prevents in India today. However, consulting their clinicians in the second stages of cancer diagnosis patients could possibly have at least 60%, for cure, while the interventions of cancer diagnosis in its third stages the cure possible rates reduces to 30%, but with the possibility of stage four of cancer within a short time. However, there are no chances for survivor when it comes to the stage four of cancer that gives a maximum life spends of 5-7 years. Basing on the latest findings of NICPR report, Breast Cancer and Cervix Uteri is the two most common Cancer killers among Indian women, while Lip/Oral Cavity and Lung Cancer becomes the two most common killers among Indian men, killing around 253.521 Indians every year. [6] The last 20 years were the periods where cancer mortality rates has seen rapidly increasing in the country, while the numbers of cancer incidence has been decreasing in many western countries. Out of all the cancer mortalities, the cervical cancer remains the leading cause of deaths among Indian men and women follow by Breast cancer mortality. ^[7] The following tableshows the five most common deadly cancer symptoms, its causes, and the numbers of terminal deaths in a year in India as a whole (Table 1).

Looking at the current cancer statistics, it is visible that Indiaas a whole is fighting with the cold-blooded killer "Terminal Illness" in the most unsuccessful way.India at present is in critical conditions with rapid increasing rates of one-lakh cancer populationsper year and minimal cancer care center. There are around only 300 regional cancer care centers, which is not enough even to treat the one thirds of the cancer populations in the country. Moreover, India today has only 1000 oncologists, which is in the ratio of 1:2000 (one oncologist per two thousand cancer patients). This constituted the underlying reason why modern India turned into a cancer hub. The fighting with cancer will continues as the numbers of affected people raises up every year. [8, 9] The following statistic is formed to explain in detail about the current cancer status in India (Table 2).

India at present one woman dies of Cervical Cancer every 8 minutes and for every newly diagnosis with breast cancer one out of two women dies in India. Moreover, around 2.500 died per day due to the cancerous factors like tobacco and bitternut. While smoking, which is the most common practices in India cause 1 in 5 death amongst men and 1 in 20 death amongst women that constituted around 9.30.000 deaths in 2010. In which the most

Table 1. The common types of cancers and the numbers of death in a yearly basis $^{(4-6)}$

SI. No.	Cancer symptoms	Numbers of death per year	Main causes
1.	Gall bladder	230.000	Unhealthy lifestyle,
	cancer		genetic, poor prevention
2.	Breast cancer	5522.000	Unhealthy lifestyle,
			genetic, alcohol
3.	Head & Neck	575.000	Alcohol, tobacco,
	cancer		cigarettes
4.	Throat cancer	1.15.200	Poor nutrition, smoking,
			alcohol, genetic syndromes
5.	Lung cancer	22.900	Smoking, tobacco
6.	Oral cancer	245.800	Smoking, tobacco,
7.	Cervical cancer	67.477	Alcohol, HPV, sunlight, weak immune system HPV, birth control pills, smoking, unhealthy sex

Table 2. Current Cancer Statistic in India. Adapted from NICPR statistical report on August 23, 2018									
No. of Cancer Affected	Yearly Cancer Registration	No. of Deaths In a Year	Common Age's of Death 39-60 Years	Women	Men	Percentage (%)			
2.5 Million	7 Lakh	5,56,400	3.95.400	1.95.300	2.00.100	71			

productive age period could be highlights in the ages between 30-60 years, which need a special consideration and these ages grouped need to be targeted the most.^[6]

Why Cancer/Terminal Diagnosis Unsuccessful in India Today?

The main cause of cancer is through the internal factors (inherited mutations, hormones, and immunes conditions) and external/environment factors (tobacco, insufficient diet, unhealthy food, organism, and chemical with radiations). Among all these components for the causes of cancer and its deadly symptoms, there is a closed link between unhealthy food and insufficient diets with cancer disease as observed by many experts. [2] Unhealthy lifestyles with alcohol and smoking are the second most common cancerous factors leading to chronic disease, cardiovascular, lung, kidney, throat, esophagus, and breast cancer. The third common factor for the causes of cancer is visible in excessive consumptions of red meats and salted fish leading to heart and breast cancer.[10] At present as per the National Tobacco Control Programmed, the tobacco related cancer illness like Heart Attack, Lung Diseases, and Stroke etc. were the common types of cancer in the country. The uses of tobacco cause 100% poor oral health with 90% of mouth cancer, 80% of lung cancer, 50% of all human cancers, 70% of lung diseases, and 60% of heart attacks.[11] The above mention cancerous factors were the most common practices in the Indian Sub-Continent at present, leading to the rapid growth of cancer populations in the country.

Another reason for India being the top cancer populated in the country is mainly due to people unawareness of cancerous components, its preventive measures, and the treatment policy. Due to the lack of awareness, majority of the cancer effected patients detected their cancer symptoms only when the physical pain becomes unbearable, which is in the terminal stages (third or fourth stages) that is impossible to cure. Late detection of cancer symptoms and late cancer diagnosis becomes the underlying reasons for the 80% of the cancer population failing to cure in India today. However, early detections of the symptoms in its first stage there is 80% chances to cure. On the other hand, undergoing cancer diagnosis in the second stages could possibly have 60%, chances for cure, and in the third stage the cure possibility rates reduce to 30%, but with the possibility of stage four of cancer within a short period of time. However, in the fourth stage, which is the terminal stage there is no chances to cure, rather to live with the painful symptoms for maximum life spends of 5-7 years.[9]

The general causes of stomach and cervical cancer symptoms is due to the excessive drinking of alcohol, cigarette smoking, and chewing bitternuts. While, lung and oral cancer that hugely affectthelndian men and women populations, is mainly due to the excessive uses of tobacco, smoking, hookah, and the consumption of local made alcohol. Another prevailing cancer symptom in India today is the nasopharyngeal cancer, which is a malignant cells disease form in the tissues of the nasopharynx. The nasopharyngeal cancer (NPC) is the rarest type of cancer around the world; accept in the South East Asia, North Africa, and Arctic. The NPC is claims to be a Chinese origin, which is largely affecting the North

East Indian states of Nagaland, Manipur, Mizoram, and to some extend to Meghalaya. The state of Nagaland has the highest age adjusted with 19.5/100.000, followed by the state of Manipur. The nasopharyngeal cancer is mainly causing by excessive eating of meat, fish, salted fish, uses of firewood in the house and other environmental related factors like the eating of bitternuts (Kuwa or Komkuwa) with or without tobacco products. Mostly the women populations were mainly affectingwith nasopharyngeal cancer comparing to men. Moreover, within 15-20 years the nasopharyngeal affected women populations will be increasing, if the uses of tobacco, bitternuts, and the uses of firewood in cooking are not being under-controlled.^[3, 10] The table below will clearly show the various factors that are responsible for the causes of cancer as a whole (Table 3).

Apart from food habits, the population explosion, rapid industrialization, and genetics, which include mutations, hormonal and lack of immunity are also responsible for the rapid growth of terminal illness in India as a whole. Ifproper awareness had not given mainly to the rural undeveloped areas of the country, there is a possibility of increasing cancer populations to 19% in the next five years. In which women have more chances of affected with cancers than men in India, as per the findings of many. Moreover, the mortality rate of cancers in India is visible higher among the illiterate people groupin the rural areas of the country than the educated, and the maximum deaths in India are mainly due to poor prevention strategies and no proper diagnosis as a whole. [13]

Table 3. The cancerous factors in India as a whole

Factors for the causes of cancer and it's deadly symptoms

- 1. Tobacco products
- 2. Excessive alcohol uses
- 3. Insufficient diets
- 4. Excessive cholesterols
- 5. Physical inactivity
- 6. Ultraviolet radiation
- 7. Virus & Bacteria's
- 8. Ionizing radiation/waves or particles
- 9. Uses of pesticides in cultivations
- 10. Excessive medical drugs
- 11. Solvents or unhealthy liquids components
- 12. Fibers or any mineral substances
- 13. Fine particles, dust & contaminants environment
- 14. Dioxins highly toxic components
- 15. Polycyclic aromatic hydrocarbon PAHs
- 16. Metals or coated with metals diesel exhaust particles
- 17. Toxin from fungi
- 18. Smoking & Hookahs'
- 19. Vinyl chloride and benzedrine
- 20. Excessive meat's
- 21. Unhealthy drinking water
- 22. Chewing of bitternuts
- 23. Junk food

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According to the latest NICRP reports, 122.844 women are diagnoses with cervical cancer every year out of which 67.477 women died from cervical cancer per year. In a population of 432.2 million women in India at present, those women who are at the age of 15 and above and or between 15-40 years are at risk of developing cervical cancer.[14] The health scientists on the other hand, were not able to identify the processes of how the risk factors like genetic, hormonal, and environment factors works together to cause normal cells to become cancerous tumor for the cancer symptoms.[10] Thus, cancer becomes the leading causes of deaths in India, with 2.5 million cancer populations, with 1 million cancer patients added every single year. It could be predicting that the numbers of cancer patients by 2025 would be increases by fivefold in India. The rapid increasing rates of cancer in the country are mainly due to lifestyle risk factors like uses of tobacco, alcohol, low fiber in diet, increasing body weight, minimal physical activities, and the reproductive risk factors regarding age at first pregnancy, and higher numbers of children breastfeeding's. Out of many cancer mortalities, the two leading deaths are from cervical cancer (HPV)-Hepatitis C (liver), and Gastric H Pylori (stomach).[15]

The Propose Solutions and Preventive Measures

Terminal death is the top causes of Death in India, in theyear 2000 India was in Seventh position among the world cancer populated country. However, due to the rapid increasing of cancer populations from 2006-2018, India successfully stood as the highest contributor to world terminal fertility rates, in which the numbers of effected populations iscurrently visible increasing with 100.000 per year. In recent research finding, only 5-10% the cancer is from genetics, in which the other 90-95% of the cancer and its related deadly diseases are from hormonal and environment factors. [16] Which means, the 90% of the cancer and its related diseases can be prevented effectively through proper medical interventions in its early stages and hygienic lifestyle. Moreover, another 10% genetic cancerous symptoms can also be prevented through early detection and immediate diagnosis. In short, cancer of any types is curable if detected in its early stages and through proper diagnosis. The followings are the qualitative preventive measures in order to control the rapid growths of cancer in the country: [2, 10, 16]

- 1. Regular medical checked-up, though being in a healthy condition, negligees of regular medical checked-up is visible as the underlying reason for the rapid growths of cancer in the countryfor the past ten years.
- Educating people with proper awareness strategies, offer effective public health concerned in the schools and organizing a social meeting for spreading cancer awareness. Especially in the rural areas of the country.
- 3. Early detection of the symptom and early medical intervention, because when it comes to third and fourth stages there is no possibility for cure.
- 4. Public awareness on active physical activities, exercise at least for 30 minutes per day, the healthier a person is, the cells in the body can effectively fight against the invader virus and bacteria. Regular exercise prevents oneself from colon and

breast cancer too.

- 5. Minimizing the uses of alcohol products, smoking, tobacco, and chewing of bitternut products, which will minimize the risk of having lung, kidney, throat, esophagus, and breast cancer. It is better to develop a moderate way of consuming with 2-3 glass of alcohol products per day, which will keep oneself away from heart attacked.
- Immunization against hepatitis B virus to the infants of one to sixth months old without failed. Neglecting medical treatment in hepatitis B & C can causes chronic illness and liver cancer.
- Developing healthy and safe sexual practices to avoid cancer genesis, unhealthy sexual practices can give birth to cancerous cells.
- 8. Avoiding obesities, as being grossly fat or overweight have negative effects on health and the makes cells less effective.
- 9. Developing healthy diets, a healthy diet has scientifically proven with numerous health benefits and reducing the risk from chronic diseases.
- 10. Reducing occupational and environmental exposures, as excessive exposures to chemical and its related heavy metals produces ill health. It also effected for the future offspring and produces toxicity.
- 11. Avoiding excessive consumption of red meats, salt and long preserved food. High consumptions of red meat, salt and preserved food leads to diabetes, breast cancer, and obesity.
- 12. Developing the habits of eating fruits regularly, most fruits are less in calories, sodium, and fats. Fruits are the sources of essential nutrients like potassium, dietary fibers, vitamin C, and foliate (folic acid), which prevents deficiency, birth defect, and helps a person to growth with healthy blood pressure.
- 13. In order to have fair skins some avoid exposing to sunlight, wearing protective clothing during 10 am-4 pm, in which the excessive uses of sunscreen cream need to be avoid. Avoiding of exposing to sun or UV resulted in many women diagnoses with skin cancer. On the other hand, excessive exposing to sunlight or UV ray is also dangerous, especially for those having genetic cancerous symptoms.
- 14. Immediate medical intervention on virus and bacterial infections, otherwise the bacteria diseases virus cells usually hide inside the cells and turning out to be a terminal virus.

Moreover, the rapid increasing of industrializations and urbanizations are visible as the two factors leading to new lifestyle of many Indians, which resulting in increasing the cancer affected populations in the country. Concerning the current polluted environment, the burden of cancer incidences will gradually keep on increasing, as majorities of the Indians were not aware of cancerous preventive measures. The only ways to prevent the Indian men and women from the rapid growth of cancer and its deadly symptoms is to detect the symptoms at the early stages with immediate medical interventions. It is also important to prevent the water and the environment from polluted by industries and chemicals. However, it can only be possible only if the men

and women in the rural areas were being educated on cancer awareness like preventive measures, and overall treatment policies, which needs multiple efforts from the government agencies and other non-governmental agencies. Through such awareness programs, men and women should realize the risk factor and to identify the symptom through screening by physical examination or by self-cancerous symptom examination, in which if the rick substances where found than certain carcinogenic substances need to be reduces or eliminated. Moreover, there are over 85.000 synthetic chemicals that were easily available in the market of the country today like cosmetic items to flame-retardants, plasticizers in water bottles to pesticides in fruits and vegetables' etc. [13, ^{16]} In the findings of the researcher, 80% of the cancer patients in the country were associated with environment factors like exposes to contaminants, unhealthy lifestyle, food, and exposing to ionizing radiations. In the urban areas, the cleaning of contaminated drainages without any proper preventive measures, polluting the river to the maximum with many forms of chemical and eating those fishes from the river produces several cancerous symptoms. The using the polluted water from the factories or industries for agricultural farming also produces several cancerous components leading in rapid increasing of cancer populations through consuming theses agricultural products. Thus, maintaining healthy environment, healthy lifestyle, healthy food, proper diets, daily exercise, staying away from tobacco, and smoking, with decreasing alcohol consumptions can decreases the rates of cancer-affected populations. Moreover, in the rural villages the practice of using of those water which were uses in deeping hot metal or iron in the blacksmithfor washing hand and leg need to be avoided, as it contains the component that is cancerous.

Cancer Treatment Policy and Terminal Diagnosis

The WHO (2017) stated that, the cancer patients need immediate access to the modern equipments like; 3D Conformal Radiation Therapy, Intensely Modulated and Therapy (IMRT), Image Guided Radiation (IGRT). the VMAT and Rapid Arc- Volumetric Modulated Arc Therapy (VMAT), Low Dose Rate Brachyntherapy (LDR), High Dose Rate Brachyntherapy (HRD), Deep Inspiration Breath Hold (using the goggles or snorkel technique), and Stereotactic Radiation Therapy.[17] However, it is sad to say that, due to the unavailabilities of the above mention modern cancer treatment equipments, cancer patients in India could not undergo such treatments. Failing the interventions of modern equipments in terminal diagnosis, resulted in uneffective diagnosis in many cases. The quality treatment plan and policy are the core components for successful cancer metastasis diagnosis, which is also visible ineffective to the minimal. The main emphasis of a cancer diagnosis is to cure the symptom of the patient or to prolong the lives' of the patient through ensuring quality of life.[1] However, the greatest challenges in the Indian cancer diagnosis is the ensuring of the patient quality of life, which is not visible in the clinical practices of the country as a whole. Unnecessary prolonging of the patient lives with an aim to increases the numbers of days spend in the hospital ward for more bills. The patient's value and dignity were unconcern the most by the clinicians' and the patient undergoing treatment against their will/choices need to be rectifying immediately in the health care systems of the country as a whole.

The early detection and immediate treatment intervention are the two most effective way of cancer diagnosis to control the cancer metastasis and to deliver total cure. As per the above findings, the medical intervention in stages one and two has higher possibilities rates to cure, which has around 80% cure possibilities as per the finding. While detecting the cancer symptom and consulting the oncologists in stage three is visible in curtail conditions, having higher impossibility rates as the cancer metastasis accelerates in higher speeds from one body part to another. However, if the stage three patient being diagnosis by special medical team in a well to do clinical setting, it has around 60% possibility chances to cure. But does not guarantee a complete free from cancerous cells, as there is a possibility of being in terminal stage after three to five months. The reason being the cancer cells have the possibility of hiding under another cells that is hard to detect, resulting in leading one's life a disability-adjusted life years (DALY). Nevertheless, the detection of the cancer symptoms in the fourth stage have no possible way to cure by any means, which is term as the 'terminal stage' that is 100% impossible to cure in any clinical practices. Thus, resulting in leaving the patient with disability-adjusted life for five to seven years until the inevitable death strikes him/her.

These 5-7 years period of terminal experience is the most crucial moment for every terminal patients, which is also considers as the worst moment in a terminal experience with heartful of emotional sufferings and mindful of mental disharmony that needs special considerations to the most. The acknowledgment of the psycho-emotional symptoms alongside the treatments of physical pain is very essential in any terminal diagnosis in the clinical practices. However, at present India turns out to be the worst place to die or a place not to die. The reasons being the undergoing cancer/terminal diagnosis core emphasis is on the physical pain treatment alone, leaving the psycho-emotional pain and suffering untreated. The psychological suffering and mental disharmony are the bi-products of the terminal illness undergoes by every terminal patients were considered the symptoms that need to be treated in the clinical practices in India. Thus, failing to acknowledge and leaving the psycho-emotional symptoms untreated resulted in worsening the patient's conditions. The psycho-emotional and mental well-being is the for successful treatment of the patient physical pain symptoms. (Suantak & Sisodia, 2018). Well being of the whole body requires a psycho-emotional and mental well-being to the most; a psychological well-being can give positive responses to physical pain treatment to the maximum.

In India as a whole, the clinicians tend to forgot that even when cure is not possible in terminal diagnosis, there is a possibility of delivering healing as an alternative to cure. However, only through a person centered meaning making psychotherapy in the clinical practices. The psychological self-reflective and life review therapeutic approach in terminal diagnosis can make one-self aware that he/she is still in the condition of limitless achievements. Which will in turn helps the patient to recreate his/her life

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goals, and set new life goal that could be achievable, also able to make beautiful memories with his/her loved ones that delivers the quality of life in terminal experience. Above all, it will make dying as normal as birth, which will deliver peaceful and meaningful death (Suantak & Sisodia, 2018). Thus, in terminal diagnosis, healing can be deliver as an alternative to cure, even when total cure is impossible in the clinical practices. However, sadly, in the clinical practices of India as a whole, the clinicians alone are the core medical team in the cancer/terminal diagnosis, in the absences of professional clinical psychologists and clinical social workers. The terminal diagnosis requires a multidisciplinary team to deliver quality of life and quality end-of-life care. The clinicians were responsible for treated the physical pain symptoms and its related, while the clinical psychologists and clinical social workers were responsible for the patient psycho-emotional suffering and mental disharmony treatments, which the trained medical doctors or nurses cannot handles in the clinical practices.

Conclusion

Recently, Prime Minister Narendra Modi inaugurate "Ayushman Bharat Health Scheme" on September 23, 2018, which would be effective by 25 December 2018 in Ranchi with a primary aims to provide free health care to those underprivileged living in the ryral areas, who are access not to any health care thus far. It means there are Indian who does not received any medical facilities thus far, which remain as the most challenging and root causes to maximum cancer/terminal illness in the country. As per the findings, 5.5, 00, 000 Indian died of cancer every single day and the government with the least concerned on the awareness programe and in establishing regional cancer care centers. This being the underlying reasons India successfully becomes the largest contributor to cancer mortality rate. Another reason for the rapid increasing mainly rates of cancer and its mortality rates is mainly due to people unawareness on the causes of cancerous factors, treatment policy, unhealthy lifestyles, and unhealthy food consumptions with no proper preventive measure interventions. Majority of the cancer patient in rural regions failed to maintain their diets, while proper dietary is the core to successful diagnosis. Moreover, eliminating the usages of tobacco, cigarettes and chewing of bitternuts can successfully reduces the rates of oral lip, breast, mouth, cervical, head and neck, and the nasopharyngeal (NPC) cancer into at least 40-50% as per the researcher findings. Another urgent need is to develop social awareness on the causes of cancer, and treatment policies by educating the people mainly those leaving in the rural areas of the country. Gearing up for health awareness and strengthening the health care team at the community level by addressing the cancer preventive measures will effectively reduces the growing cancer populations.

Hygienic living with healthy food awareness also the urgent requirement to fight against the deadly diseases, with the appointed staff, conducting seminar in each village at least once in a year. Training more oncologists in the country would also be an effective ways to successfully fight against the ongoing cancer mortality in the country. However, as of now the ratio of oncolo-

gists and cancer patients in the country is 1:2.000, and that is next to impossible for an oncologist treating 2.000 patients in a day. The Centre for Cancer Epidemiology in the rural areas of the country is at present minimal and majority of the cancer care centres are not functioning properly, which is the major challenges for the government to take immidiate initial action. It is a high time for India to take up the necessary actions against cancer mortality as the rates of mortality increased year after years with 70-90% per 100.000 populations, which constituted around 2.500.000 (2.5 millions) with 800.000 new cases every year and 5.50.000 deaths in a year. Moreover, in the battle of terminal illness fighting back and defending people is the only option that India had. For the love of humanity, let the terminal diagnosis acknowledge the psycho-emotional suffering and mental disharmony of the patient alongside the physical pain symptoms to deliver the whole person treatment in the clinical practices.

Disclosures

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