

## **Non-profit partnership «Equal Right to Life» Implementation of social programs in health care**

1. Inter-regional project of social significance for prevention and early detection of cancer “Cancer Wanted”
  - 1.1 Informational and educational project for prevention of cancer “Cancer Wanted School”
  - 1.2 Program for early detection of cancer “Cancer Wanted: The days of early diagnosis”
2. Educational events for professionals of regional specialized health facilities conducted at Russian and foreign leading cancer centers (N.N. Blokhin Russian Cancer Research Center of RAMS, P.A. Herzen Moscow Institute of Oncology, N.N. Petrov Research Institute, Russian Medical Academy for Postgraduate Education) – trainings, seminars, and workshops.
3. The project for implementation of the federal register of patients with cancer and hematologic malignancies in the Russian Federation
4. Patients’ Schools: Information and educational activities for cancer patients, their families and the general public (Patients’ Schools) with participation of experts from specialized health facilities, representatives of health care authorities, psychologists, legal advisers and representatives of non-government organizations

### **1. Inter-regional project of social significance for prevention and early detection of cancer “Cancer Wanted”**

Morbidity and mortality from malignant neoplasms in the Russian Federation is a serious problem, urgent measures are needed to eliminate them, aimed at improving the quality of prevention, diagnosis and treatment of cancer. More than 2.6 million people are registered as patients in oncology facilities of the Russian Federation and experts estimate that this number will increase to 3 million patients in next 10 years. There are urgent problems in

the country such as late diagnosis, use of obsolete treatment regimens, lack of necessary equipment and absence of modern anticancer drugs in clinics. Against this background it is particularly important to inform the public timely about risk factors of cancer development, opportunities for prevention, early detection and innovative treatment in accordance with international standards; all that is one of priority areas of reducing cancer incidence.

What is typical for all regions of the Russian Federation is the lack of involvement of people in regular medical examinations, health-improving activities, as well as prevalence of unhealthy diet, alcohol abuse and smoking. However, according to sociological research, society is not informed about the possibilities of modern diagnosis and treatment of cancer and is considering a diagnosis of cancer as a death sentence. Access to information about the possibility of early detection of disease and conduct of quality innovative therapies for many people is limited and because of this a regularly scheduled examination for the appointment of adequate therapy generates fear and anxiety. The most socially significant oncological pathologies include lung cancer, breast cancer, skin cancer, cervical cancer, prostate cancer, cancer of the colon and rectum, stomach cancer.

### **Lung cancer**

According to the World Health Organization, about half of those who begin smoking in young age and continue to smoke during their lifetime will die from diseases related to smoking, of which one half will die in middle age and the rest half in the elderly age. In Russia, as everywhere in the world, lung cancer contributes most to the morbidity and mortality structure among the male population. There is a large body of compelling evidence that smoking is the cause of 80-95% of lung cancer cases.

### **Breast cancer**

In developed countries, breast cancer in women is the most common malignant tumor. In Russia breast cancer contributes most to the oncological morbidity and mortality structure, in addition, the proportion of patients with stage III-IV disease is approximately 40% because of low medical culture of population first of all, as well the lack of “cancer vigilance” and insufficient screening coverage. Breast cancer can occur in younger women, although predominantly it occurs in nulliparous women and in women who were not nursing mothers, most often at the aged of 45 to 55 years.

## **Skin cancer**

Among the causes of skin cancer the carcinogenic effect of UV sunlight and thermal effects play undoubtedly important role. Children and teens are at much greater risk than adults, because it increases the risk of melanoma and other skin cancers later in life. To reduce this risk, experts developed recommendations to avoid adverse effects of solar radiation. In the prevention of malignant tumors of skin special attention is of high importance, which should be paid by clinicians, primarily dermatologists (and in some cases of oncologists, surgeons and other doctors) to detect pre-cancerous changes and background skin conditions, because timely treatment of them can completely eliminate the disease process and prevent malignant transformation.

## **Colon and rectum cancer**

Risk factors that cause colorectal cancer are familial and hereditary diseases, inflammatory diseases of the colon and rectum, unhealthy diet, including foods with excess content of animal fat and not enough fiber. Alcohol abuse and smoking, physical inactivity and excess weight also contribute to causes of colorectal cancer.

## **Stomach cancer**

In diet of most of the citizens of the Russian Federation vitamins and animal proteins are in deficiency, there is low content of vegetable fiber, with the apparent excess of the consumed animal fats and carbohydrates. Summarizing different information on the relationship between diet and stomach cancer, it should be noted that stomach cancer is connected with consumption of food with low content of animal proteins, fats, but with too much vegetable starch and salt; contribution of insufficient consumption of fresh green grocery and minor nutrients is also important. The risk group is comprised of people with precancerous diseases of the stomach, which include: chronic atrophic gastritis with intestinal metaplasia associated with HP infection, pernicious anemia, adenomatous polyps of stomach, stomach ulcer, hypertrophic gastropathy (Menetrier's disease), Barrett's esophagus.

## **Cervic cancer**

Despite the potential for early diagnosis about 12 thousand new cases of cervical cancer are revealed in Russia annually. Moreover, 40% of patients are diagnosed with disease in late stages (III-IV). In addition to the metabolic and hormonal factors, etiologic role of human papillomavirus (HPV) is now proven in the development of dysplasia and cervical cancer, the infection is often connected with early sexual debute and non-use of barrier contraception due to low awareness of teenagers and young adults about the possible consequences such actions.

The project implementation will increase the cancer vigilance among healthy citizens, the population screening coverage, as well as the detection rate of malignant tumors at early stages; the organizers set a task to inform not only patients, but also the general public about the possibilities of innovative cancer diagnostics and treatment, as well as form the basis for demand of necessary treatment in case of disease.

### **1.1 Information and education outreach project for prevention of cancer: the Cancer Wanted School**

The project activities are planned for a number of regions of the Russian Federation according to the schedule: in assembly and conference halls at small and medium-sized enterprises, houses of culture, concert halls and other. Age groups - 15 years old and older.

#### **The project format of Cancer Wanted Schools**

- Distribution of literature
- Popular presentation of the basic principles of prevention, diagnosis and therapy of oncological diseases;
- Presentations of project participants with regard to main issues of diagnosis, drug provision and medical care insurance, etc.
- Demonstration of documentary film "White on Black".

**Scenario of the event:**

- Introduction by organizers - 20 min.
- Demonstration of video content - 10-15 minutes.
- Lecture with varying leadership and participation of a physician / psychologist, depending on the stated topic of the event (with presentations) - 35 min.

<p>1. What is Cancer? Myths and Realities. Risk of disease - for whom it is particularly high? Is there a genetic predisposition to cancer? How to be fully armed against disease and charlatanism?</p>	<p>Physician plays the leading role. Questions to psychologist.</p>
<p>2. History, present and future of oncology. The main types of cancer treatments today. Innovative therapy - what is it?</p>	<p>Physician plays the leading role.</p>
<p>3. Physicians' and citizens' "cancer vigilance": what should be known and what to ask general practitioner about if you have any suspicions.</p>	<p>Cancer specialist and general practitioner play the leading role. Questions to psychologist.</p>
<p>4. Diagnosis of cancer before and after diagnosis. Diagnosis of particular diseases and in particular risk groups. What is the more specific diagnosis?</p>	<p>Cancer specialist and general practitioner play the leading role. Questions to psychologist.</p>

<p>5. State and cancer patient. Today's legal issues of receiving free medical care. Main drug provision programs. Medical insurance and drug provision tomorrow - what to expect and what to demand? The position.</p>	<p>Legal adviser plays the leading role. Questions to physician, representative of the health authorities, psychologist.</p>
<p>6. What to do if your loved one is ill? How to support at all stages of the disease and possible recurrence.</p>	<p>Psychologist plays the leading role. Questions to physician.</p>

- Coffee Break. Distribution of promotional materials of “Movement Against Cancer” near the stand - 20 min.
- The communicative unit - 45 min.  
Questions and answers  
“Patients’ stories” of struggle and success.
- Briefing for media held by of organizers – 45 min.

### **1.2 The program of early diagnosis of cancer “Cancer Wanted: The days of early diagnosis”**

One of the major and complex problems facing the non-profit partnership “Equal Right to Life” is the assistance in carrying out preventive measures and screening and early diagnosis of cancer. In most developed countries, these problems are solved within the framework of national programs and strategies to control cancer. State leaders and heads of governments often accept the responsibility for effective functioning of national oncological services. Mass screening for cervical cancer in Iceland and Finland have reduced the mortality from this disease by 80% and 50%, accordingly. In the United States and “old” EU countries mortality from breast cancer decreased significantly after the introduction of mammographic screening programs of women aged 50-70 years. In order to develop similar programs in the country, the non-profit partnership «Equal Right to Life» and the interregional public movement “Movement Against Cancer”, with the participation of leading Russian oncologists developed and initiated the implementation of the program “Onco-Dozor: Days of early diagnosis.”

Organizers of the program have the following objectives:

- Providing opportunities for free medical examinations and consultations;
- Attracting public attention to the early diagnosis of oncological diseases and their treatment;
- Raising public awareness about the problem of oncological diseases;
- Attraction of public attention to the importance of early diagnosis of cancer;
- Improving the health culture of the population and the introduction an essential habit of passing regular examinations (screening).

**Tentative schedule of interaction between NP “Equal Right to Life”  
and medical institution participating in the project**

- Brief Description of Project: conducting medical examinations of the healthy population for early detection of cancer (breast, skin, oral and cervical cancer), with the participation of specialists of medical institutions
- The list of specialists:
  1. Gynecologist - 2 specialists.
  2. Oncologist
  3. Radiologist
  4. X-ray technician
  5. Cytologist
  6. Laboratory assistant
- Procedures:
  1. Mammography (mobile mammography unit)
  2. Cytological examination of the cervix
  
- Informing the public about the event: mailing invitations, organizing an appointment for examinations
- Information campaign after the event: organization of round tables, press conference, informing the population through mass media (TV, radio, print media, at the website [www.onco-dozor.ru](http://www.onco-dozor.ru) )

## **2. Educational events for professionals of specialized regional health care institutions at Russian and foreign leading cancer centers - training, workshops and master classes**

The program is designed to improve skills of oncologists working in medical institution specializing in oncology in order to deepen the theoretical knowledge and improve practical skills in a specific area of specialized cancer care. One of advantages of this program is shortening the path of innovations and technologies from the world's leading research centers into the practice of cancer care (regional medical institutions do not always have possibility to receive information promptly and put into clinical practice new methods of treatment of malignant neoplasms).

Goals and objectives of the educational activities carried out in accordance with the Government of the Russian Federation of June 26, 1995 No.610 (as amended by the Russian Government Regulations of 10.03.2000 No.213, of 23.12.2002 No.919 and of 31.03.2003 No.175) on educational establishments for postgraduate professional education (training) of specialists.

The main objectives and requirements imposed in the course of events, include the following:

- ✓ the ability with necessary qualification to use the theoretical knowledge and practical skills for conducting organizational and practical work on the diagnosis and treatment of cancer patients in the inpatient and outpatient departments of medical institutions;
- ✓ the main goal is gaining new theoretical knowledge by professionals, improvement of professional skills necessary for a medical oncologist for provision of highly qualified care in accordance with his position and profile of the institution.

On the first day of a training cycle basic knowledge and skills are assessed; during the training period monitoring of knowledge is carried out in a form of round tables, and at the end of the cycle participants pass a final test.

Upon completion of the educational activity participants are awarded a certificate of training.

Educational activities include both theoretical (Appendix 1) and practical parts. The first one includes attending by trainees of lectures and seminars conducted by leading experts of the State Institution "N.N. Blokhin Russian Cancer Research Center" (RCRC) and the State Educational Institution of Postgraduate Education "Russian Medical Academy of Postgraduate Education" (RMAPO) according to the plan approved by the organizers of the event (RCRC, RMAPO, NP "Equal Right to Life"); organizational and administrative support is provided by NP "Equal Right to Life". The practical part involves training at workplaces of the RCRC departments (see Appendix 2) in accordance with trainee's individual educational plan and work plans of departments. Activities are also planned at P.A. Gerzen Moscow Institute of Oncology and N.N.Petrov Research Institute.

In accordance with the approved schedule the following groups of training participants are arranged:

- ✓ chemotherapy
- ✓ oncosurgery
- ✓ diagnostic radiology and radiation therapy
- ✓ pediatric oncology
- ✓ oncohaematology

At the end of educational trainings the final test is provided for assessment of theoretical knowledge and practical skills.

### **Thematic plan of lectures**

#### **"State-of-the-art methods of diagnosis and treatment of malignant tumours"**

1. Malignant tumors of skin
2. The possibilities of drug therapy of ovarian cancer
3. The possibilities of drug therapy of cervical cancer
4. GIST
5. The possibilities of drug therapy of cancer of the uterus
6. Malignant lymphoma
7. Gastrointestinal non-Hodgkin lymphomas
8. Prognostic factors and principles of endocrine therapy of breast cancer
9. Lymphadenopathy

10. The principles of treatment of central breast cancer
11. Drug therapy of squamous cell carcinoma of head and neck
12. Drug therapy of advanced prostate cancer
13. Treatment of breast cancer
14. Febrile neutropenia (prevention, treatment)
15. Anemia in cancer patients
16. Targeted therapy of kidney cancer
17. Nutritional therapy of cancer patients
18. Colon Cancer
19. Clinical analysis of cancer cases

**The list of units of the State Institution “N.N. Blokhin Russian Cancer Research Center of Russian Academy of Medical Sciences” for training at workplaces**

1. Polyclinic (outpatient department of diagnostics and treatment)
2. Admission department
3. Department of diagnostic radiology and X-ray surgery methods of diagnostics and treatment
4. Department of X-ray diagnostics
5. Department of X-ray surgery methods of diagnosis and treatment
6. Roentgen endoscopy department
7. Ultrasonic diagnostics department
8. Radionuclide diagnostics department
9. Radiation oncology department, department of radiology
10. Radiosurgery department
11. Topometry and clinical dosimetry department
12. Anesthesiology and resuscitation department
13. Emergency and intensive care department No. 1
14. Emergency and intensive care department No. 2
15. Bone marrow transplantation and intensive chemotherapy department
16. Emergency and intensive care department No. 5
17. Thoracic department

18. Surgical Department (No. 6) of abdominal oncology
19. Onconeurology department
20. General oncology department
21. Tumors of musculoskeletal system department
22. Vertebral surgery department
23. Reconstructive and vascular surgery department
24. Surgical department No. 2 (diagnosis of tumors)
25. Surgical department No. 3 (oncological proctology)
26. Department of surgery of head and neck tumors
27. Department of breast cancer surgery
28. Department of liver and pancreas cancer surgery
29. Department of gynaecologic cancer surgery
30. Department of tumor biotherapy
31. Department of surgery of upper respiratory and digestive tract tumors
32. Urology department
33. Gynecology department
34. Endoscopy department
35. Laboratory of clinical immunology of tumors
36. Laboratory of hematopoietic immunology
37. Clinicodiagnostic laboratory
38. Laboratory of microbiological diagnosis and treatment of infections in oncology
39. Clinical biochemistry laboratory
40. Express laboratory
41. Department of blood transfusion with bone marrow bank
42. Clinical oncogenetics laboratory
43. Department of pathoanatomy of human tumors
44. Department of morbid anatomy
45. Histochemistry and electron microscopy laboratory
46. Clinical cytology laboratory
47. Molecular Pathology laboratory
48. Department of chemotherapy and combined treatment of malignant tumors
49. Chemotherapy department

## Training curriculum

Unit and discipline	Hours	Form of training	
		Lectures	Practical exercises
<b>1. Clinical Training</b>	<b>70</b>	<b>24</b>	<b>46</b>
1.1 General issues	8	4	4
1.1.1 General oncology	4	2	2
1.1.2. General principles of diagnostics and treatment of malignant tumours	4	2	2
1.2 Special oncology	62	20	42
1.2.1. Head and neck tumors	6	2	4
1.2.2. Tumors of the skin and musculoskeletal tumors	6	2	4
1.2.3. Tumors of chest	10	2	8
1.2.4. Tumors of the gastrointestinal tract	10	2	8
1.2.5. Oncogynaecology	6	2	4
1.2.6. Oncourology	6	2	4
1.2.7. Breast tumors	6	2	4
1.2.8. Oncohaematology	6	2	4
1.2.9. Chemotherapy tumors	6	4	2
<b>2. Final seminar and credit</b>	<b>2</b>	<b>2</b>	—
<b>Total</b>	<b>72</b>	<b>26</b>	<b>46</b>

### Schedule for 2010

Course	Duration	Month
Oncosurgery	72 hours	April
Chemotherapy and oncohaematology	72 hours	May
Chemotherapy	72 hours	September
Oncosurgery	72 hours	October
Oncohaematology	72 hours	October
Chemotherapy	72 hours	November

### 3. Project on implementation of federal register of patients with cancer and hematologic malignancies

In the framework of agreement on information cooperation with the Federal Service on Surveillance in Healthcare and Social Development and NP “Equal Right to Life” in cooperation with interregional public “Movement against cancer” is working to establish the register of patients with breast cancer. Creation of such a registry would help to provide the most complete and accurate picture of medical care provided to each patient based on the maximum possible data that reflect individual characteristics of malignancy, the scope and quality of the treatment, demand on anticancer drugs from patients, medical institutions, regions and son on, as well as the possibility of instant updating of information contained in the register that will allow adequately assess each patient’s status at any time and at all levels.

First of all creating a project will solve the issues related to standardization, unification and updating of data on patients diagnosed with cancer and hematological diseases at all stages of diagnosis and treatment of these diseases. Within the program framework information will be collected and analyzed about each patient with the purpose to improve

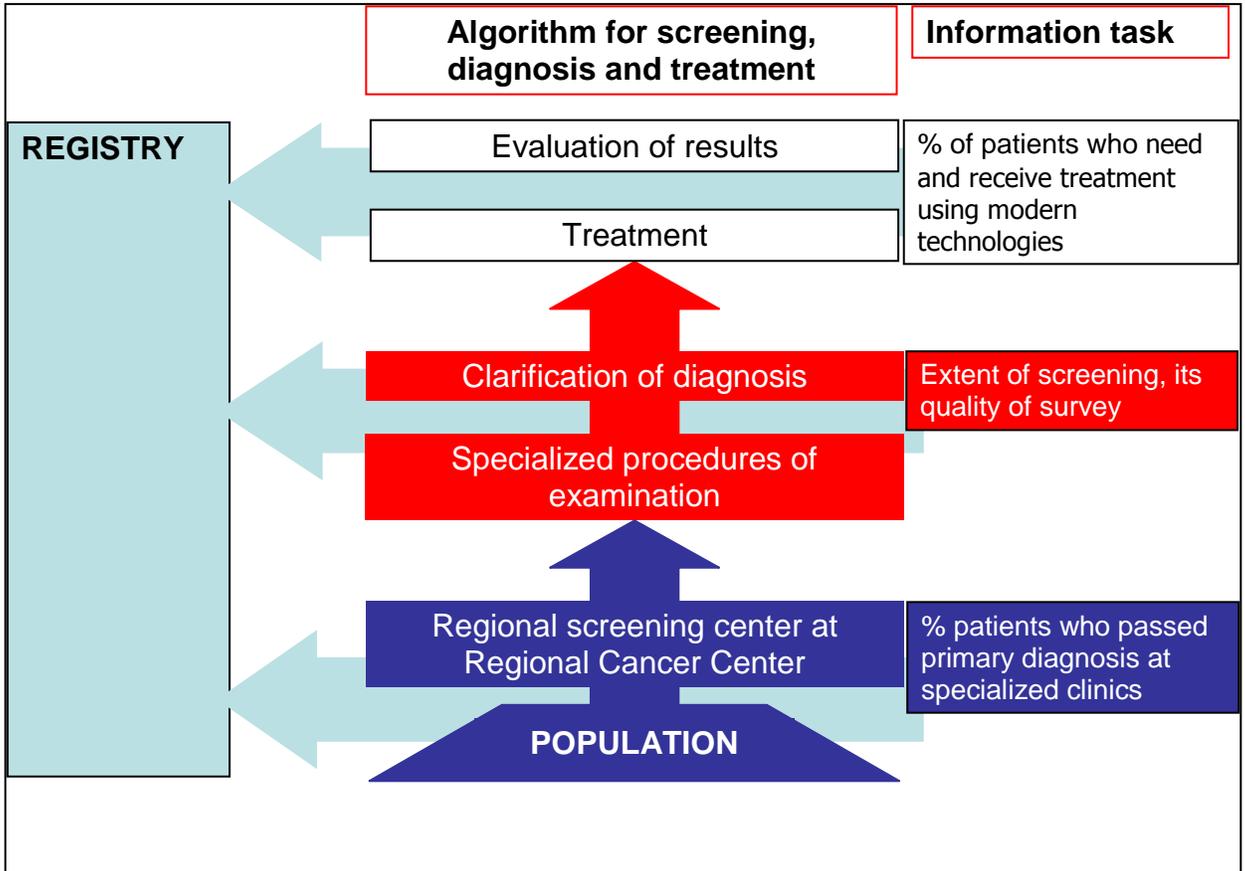
effectiveness of care in the future. The project will assess the degree of integration of specialized cancer diagnosis in the primary health care system and the degree of quality and availability of modern techniques of primary diagnosis of cancer; the availability will be evaluated of modern cancer treatment methods for patients with established diagnosis and proven indications for use of innovative technology of cancer treatment.

The data recorded in the Register, will allow comparing compliance of examination and treatment of patients with regional and international standards. The information on treatment will make possible to assess correctness of use of modern treatment methods, as well as assist in adequate budget planning. The results obtained in the course of implementing the Register will provide an opportunity to assess current state of cancer care, to forecast the needs of regions in diagnostic equipment and medicines and to determine the need for training of doctors and nurses.

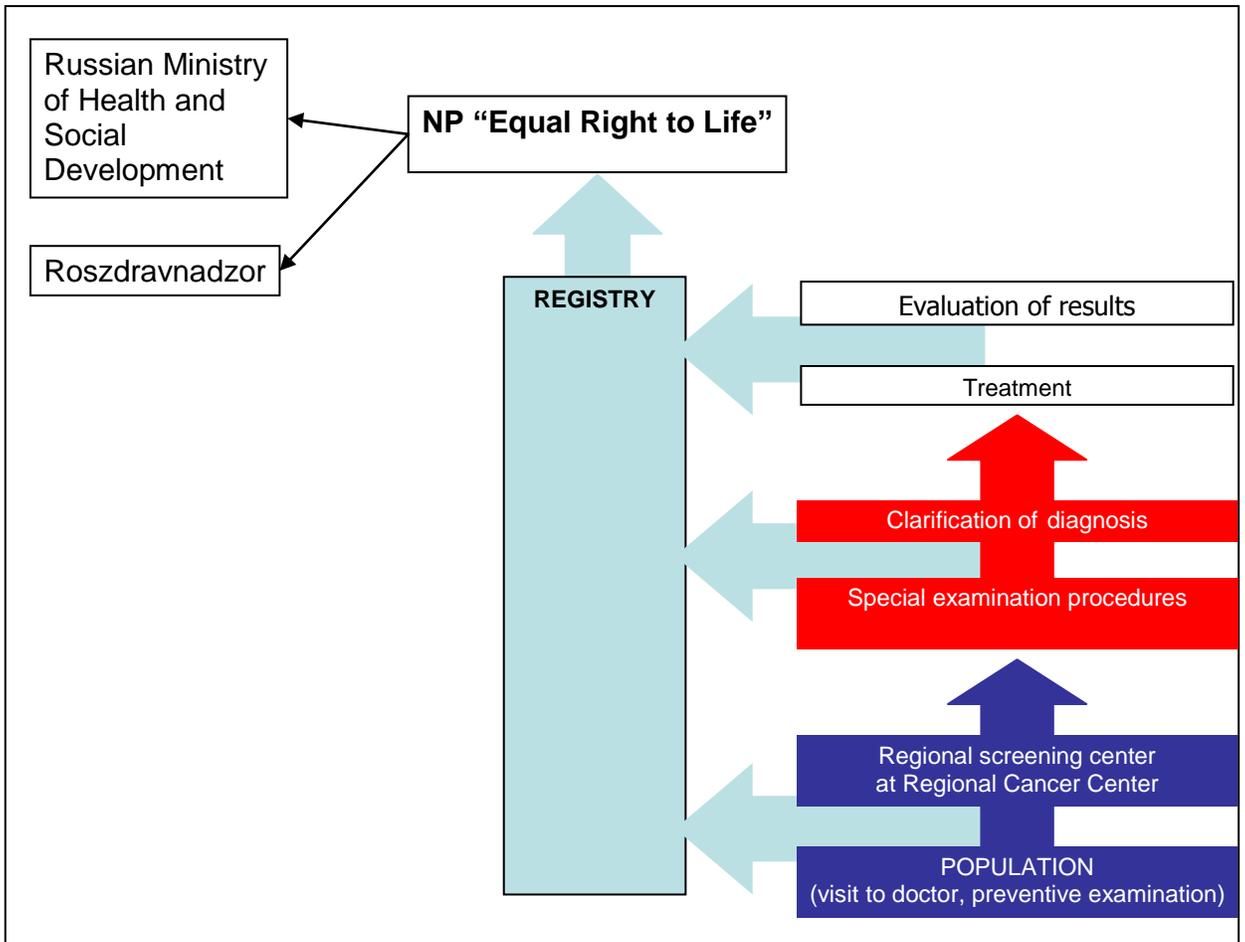
The Register will serve as a source of epidemiological and statistical data, which are also required for adequate planning and allocation of budget and planning of research.

The program aims to implement a number of tasks:

1. Improvement of diagnosis and treatment of cancer.
2. Identifying patients who have a primary diagnosis of cancer in non-specialized medical institutions.
3. Assessing the level and quality of diagnostic examinations that determine individual characteristics of the tumor and allow choosing adequate strategy and tactics of treatment.
4. Determination of opportunities for improving cancer therapy by identifying patients with proven diagnosis and specific individual characteristics of tumor, who do not receive necessary treatment.



**FLOW CHART OF INFORMATION**  
level - REGION



### **Equipping NP “Equal Right to Life”:**

With the purpose of organizing a uniform register of patient data a database server, an application server and a Web-server are at the disposal of NP “Equal Right to Life”, and several workplaces were organized.

### **Equipping regional screening centers:**

For access to the database deployed on the server of NP “Equal Right to Life” a computer is needed with access to the network, data security equipment and software protection key.

### **Equipping other participating organizations:**

For access to the database deployed on the server of NP “Equal Right to Life” a computer is needed with access to the network, data security equipment and software protection key.

**The software used in the project:**

The software is built on cutting edge technologies and presents a distributed system consisting of several components:

- Software of regional screening centers;
- Software of the central base located at NP “Equal Right to Life”;
- Software of participating organization.



Министерство здравоохранения и  
социального развития  
Российской Федерации

**ФЕДЕРАЛЬНАЯ СЛУЖБА  
ПО НАДЗОРУ В СФЕРЕ  
ЗДРАВООХРАЩЕНИЯ И  
СОЦИАЛЬНОГО РАЗВИТИЯ  
(РОСЗДРАВНАДЗОР)**

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д.з. 06. 2008. № 010-312/08

На № \_\_\_\_\_ от \_\_\_\_\_

— о содействии в формировании  
регистра пациентов —

Руководителям органов  
управления здравоохранения  
субъектов Российской Федерации

Руководителям Федеральных и  
региональных специализированных  
онкологических лечебно-  
профилактических учреждений

В рамках соглашения об информационном сотрудничестве с Федеральной службой по надзору в сфере здравоохранения и социального развития. Некоммерческое партнерство «Равное право на жизнь» и Межрегиональное общественное движение «Движение против рака» проводят работу по формированию регистра пациентов со злокачественными новообразованиями молочной железы в регионах Российской Федерации.

Создание такого регистра необходимо для повышения качества определения потребности в лекарственных средствах и улучшения лекарственного обеспечения.

В связи с этим, Федеральная служба по надзору в сфере здравоохранения и социального развития просит руководителей органов управления здравоохранения субъектов Российской Федерации и специализированных лечебно-профилактических учреждений в субъектах Российской Федерации оказывать содействие Некоммерческому партнерству «Равное право на жизнь» и Межрегиональному общественному движению «Движение против рака» в формировании регистра пациентов со злокачественными новообразованиями молочной железы.

С целью соблюдения прав пациентов и сохранения конфиденциальности персональных и медицинских данных сбор информации будет осуществляться в рамках специальных соглашений между Некоммерческим партнерством «Равное право на жизнь» и специализированных лечебно-профилактических учреждений.

Уточнения, при необходимости, персональных данных регистра будут проводиться активистами Межрегионального общественного движения «Движение против рака» с письменного согласия пациентов.

Руководитель

Н.В.Куртьев

2008.06.06.10:00

Ministry of Health and Social Development of the  
Russian Federation  
Federal Service for the Supervision of Public Health  
and Social Development (Roszdravnadzor)  
109074 Moscow, Slavyanskaya Square, 4, build.1  
date: 23.06.2008 No. 014-343/08

Addressed to:  
Heads of health care authorities of  
administrative territories of the Russian Federations

Heads of federal and regional specialized  
oncological health care institutions

“On assistance in formation of patient registry”

In the framework of agreement on information cooperation Federal Service for the Supervision of Public Health and Social Development Non-profit partnership “Equal Right to Life” and interregional public movement “Movement Against Cancer” carry out work on the formation of the register of patients with breast cancer in the Russian Federation.

Creating such a register is necessary to improve the quality of determination of demand in drugs and of drug provision.

In connection with this Federal Service for the Supervision of Public Health and Social Development asks Heads of health care authorities of administrative territories of the Russian Federations and Heads of federal and regional specialized oncological health care institutions to assist NP “Equal Right to Life” and IPM “Movement Against Cancer” in formation of patient registry with malignant tumours of breast.

To ensure observance of patients' rights and confidentiality of personal and medical data, collection of information will be carried out under special arrangements between NP “Equal Right to Life” and specialized health care institutions.

When necessary, clarification of personal data in the register will be carried out by activists of IRM “Movement Against Cancer” with the written consent of patients.

Head of Roszdravnadzor

N.V. Yurgel

**1. Patients' School: Information and educational activities for cancer patients, their families and the general public (schools patients) with participation of experts of specialized health facilities, representatives of health authorities, psychologists, legal advisers, representatives of NGOs**

Participants of the "Patients' School" events have the opportunity to learn from practitioners, well-known experts about peculiarities of malignant tumors and to get acquainted with advanced methods of treatment, including the newest drugs. During sessions legal advisers help patients understand their rights to guaranteed health care. No less important unit of the Patients' School is participation of a psychologist who tells patients and their families how to hold on, withstand and fight with disease. During Patients' School relatives and friends may ask questions to specialists and receive competent answers.

**Goals and Tasks:**

- Inform patients and their families about:
  - modern methods of cancer treatment
  - methods of diagnosis of cancer, used for the establishment of primary diagnosis and during treatment
  - principles of treatment
  - procedures for the preparation to diagnostic and therapeutic procedures, performing them and subsequent actions
  - how to behave and what to do in case of side effects of chemotherapy
  - legal aspects of obtaining disability, free health care, interaction with employers, institutions of social welfare, etc.
  - correct attitude to alternative methods of treatment
1. Identify the most common medical concerns of patients and their relatives, the answers to which will be given by leading experts
  2. Identify legal problems and legal issues associated with obtaining free medicines, medical care, and other problems, which the legal team of NP "Equal Right to Life" can help to solve

3. To identify potential activists who could take part in activities
4. Receive collective appeals to the leadership of regions and federal officials

**Draft curriculum:**

Class	Topic	Comment
1.	<ul style="list-style-type: none"> <li>• What is Patients' School</li> <li>• What is CANCER</li> <li>• State and cancer patient</li> </ul>	
2.	<ul style="list-style-type: none"> <li>• Diagnosis in oncology – examination for diagnosis and during treatment</li> <li>• History of oncology</li> <li>• CANCER - myths and realities</li> </ul>	
3.	<ul style="list-style-type: none"> <li>• Surgical treatment - why it is needed, what to do before, during and after surgery</li> <li>• Disability - verdict or necessity?</li> <li>• Legal issues of receiving free medical care</li> </ul>	
4.	<ul style="list-style-type: none"> <li>• Chemotherapy – new technologies, capabilities, side-effects</li> <li>• What to do if there are side effects of treatment</li> <li>• Legal issues of receiving free medical care</li> </ul>	
5.	<ul style="list-style-type: none"> <li>• RELAPSE - what to do?</li> <li>• Alternative treatments – myths and realities</li> <li>• Legal issues of receiving free medical care</li> </ul>	
6.	<ul style="list-style-type: none"> <li>• Radiation therapy - how it is actually work</li> <li>• Rehabilitation after treatment</li> <li>• Legal issues of receiving free medical care</li> </ul>	
7.	<ul style="list-style-type: none"> <li>• Family - what to do if your loved one is ill</li> <li>• Diagnostic methods - what is best for prevention and early detection of disease and recurrence</li> <li>• Legal issues of receiving free medical care</li> </ul>	
8.	<ul style="list-style-type: none"> <li>• Breast cancer - diagnosis, treatment and</li> </ul>	

	rehabilitation <ul style="list-style-type: none"> <li>• Legal issues of receiving free medical care</li> </ul>	
9.	<ul style="list-style-type: none"> <li>• Stomach cancer - prevention, early diagnosis and treatment</li> <li>• What to do if there are side effects of treatment</li> <li>• Legal issues of receiving free medical care</li> </ul>	
10.	<ul style="list-style-type: none"> <li>• Lung cancer</li> <li>• Legal issues of receiving free medical care</li> </ul>	
11.	<ul style="list-style-type: none"> <li>• Pancreatic cancer</li> <li>• Legal issues of receiving free medical care</li> </ul>	
12.	<ul style="list-style-type: none"> <li>• Colorectal cancer</li> <li>• Legal issues of receiving free medical care</li> </ul>	
13.	<ul style="list-style-type: none"> <li>• Molecular diagnostics and individual characteristics of tumour - modern facilities, the need for choosing correct treatment</li> <li>• Legal issues of receiving free medical care</li> </ul>	