

HUMAN RESOURCES FOR TREATING NEW CANCER CASES IN IRAQ

Executive Summary

The purpose of this report is to describe the human resources needed in Iraq to treat new cancer patients. The population of Iraq is approximately 33.70 million (16.92 million men and 16.78 million women) and the estimated number of new cancer cases in Iraq for the year 2012, based on GLOBOCAN data for Iraq as a whole (<http://globocan.iarc.fr/>) was 25666 (11489 in men and 14177 in women) (Table A).

The five most common cancers in Iraq are (1) breast, (2) hematological malignancies (Hodgkin lymphoma, non-Hodgkin lymphoma, multiple myeloma and leukemia), (3) urological (bladder, kidney, prostate and testis), (4) lung and (5) head and neck (lip, oral cavity, nasopharynx, other pharynx, larynx and thyroid).

Table A: The ten most frequently occurring cancers in Iraq for men and women based on 2012 GLOBOCAN data.

Cancer	BOTH SEXES		MEN		WOMEN	
	Incidence	Rank	Incidence	Rank	Incidence	Rank
All cancers excl. non-melanoma skin cancer	25666		11489		14177	
Breast	4542	1			4542	1
Hematological	3788	2	2035	2	1753	2
Urological	3119	3	2362	1	757	5
Lung	2269	4	1639	3	630	8
Head and Neck	2030	5	1132	4	898	4
Brain, nervous system	1323	6	660	5	663	6
Colorectal	1266	7	611	6	655	7
Stomach	936	8	492	7	444	9
Gynecological	923	9			923	3

Liver	678	10	318	8	360	10
Pancreas	460	11	237	9	223	11
Esophagus	190	12	99	10	91	12

Newly diagnosed cancer patients need pathology, surgery, chemotherapy and/or radiation therapy. The number of oncologists needed is based, therefore, on the number of patients requiring pathology, surgery, chemotherapy and radiation therapy (Table B). This number is estimated from the percentage of patients requiring surgery, chemotherapy and/or radiation therapy for the top ten cancers in both men and women.

For developing countries the International Atomic Energy Agency (IAEA) recommends training Radiation/Clinical Oncologists who can prescribe both radiation and chemotherapy for the common solid cancers, instead of separate medical and radiation oncologists. Hematological malignancies are treated primarily by hematologist-oncologists. The number of specialists needed is based upon the number of cancer patients but each city, in order to ensure coverage if one person leaves or goes on vacation, must have at least 2 surgical oncologists, 2 radiation/clinical oncologists, 2 hematologist oncologists, etc.

Table B: Number of Oncologists needed for Iraq's 2 most populous cities based on 2011 population estimates (<http://citypopulation.de/>) and 2012 GLOBOCAN data for new cancer cases.

	Population	New Cancer Cases	Hematologist Oncologists	Surgical Oncologists	Radiation / Clinical Oncologists	Urologic Oncologists	Gynecologic Oncologists	Neuro-Oncologists	Pathologists
Baghdad	6150000	4684	2	5	24	2	2 [‡]	2 [‡]	10
Mosul	1475000	1124	2 [‡]	2	6	2 [‡]	2 [‡]	2 [‡]	3

[‡]At least 2 are needed in each city.

In addition to oncologists, support staff such as onco-pharmacists, pharmacy technicians, oncology nurses and palliative care specialists is also needed. Many cancer patients require hospitalization for diagnosis, treatment and/or complications, therefore an adequate number of oncology beds will be needed. The number of oncology nurses, onco-pharmacists and pharmacy technicians needed is based upon the number of beds occupied daily by cancer patients while the number of palliative care specialists is based on the number of new cancer cases per year (Table C). The oncology nursing staff for each 24-bed oncology unit (operating 24 hours a day, 7 days a week) comprises of one head nurse and a nurse specialist as well as 13 nurses working 8 hour shifts, 5 days per week.

Table C: Number of Oncology Units, Nursing and Pharmacy Staff needed for Iraq's 2 most populous cities based on 2011 population estimates and 2012 GLOBOCAN data for new cancer cases.

	New Cancer	Maximum #	# of 24 bed	Onco-	Onco-Pharmacy	Palliative Care	Oncology Nursing Staff
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	Cases	of beds/day	oncology wards	Pharmacists	Technicians	Specialists	other than Radiation Oncology Nurses
Baghdad	4684	86	4	16	24	10	60
Mosul	1124	21	1	4	6	3	15

Since many cancer patients require radiotherapy, appropriately equipped facilities will be needed along with radiation oncology staff (Tables D and E). Radiation oncology staff includes radiation therapy technicians, medical physicists, Linac engineers and radiation oncology nurses in addition to radiation/clinical oncologists. The minimum radiation therapy equipment requirements are at least one of each: Linac, brachytherapy unit, CT simulator, treatment planning computer and dosimetry/quality assurance package.

Table D: Radiation Therapy Staff needed for Iraq's 2 most populous cities based on 2011 population estimates and 2012 GLOBOCAN data for new cancer cases.

	New Cancer Cases	Radiation / Clinical Oncologists	Radiation Therapy Technicians	Medical Physicists	Linac Engineers	Radiation Oncology Nurses
Baghdad	4684	24	33	11	3	11
Mosul	1124	6	8	3	2 [*]	3

*At least 2 are needed in each city.

Table E: Radiation Therapy Equipment needed for Iraq's 2 most populous cities based on 2011 population estimates and 2012 GLOBOCAN data for new cancer cases.

	New Cancer Cases	Linacs / Co 60 Megavolt Units	# of Brachytherapy units	# CT simulators	# of treatment planning computers	# of dosimetry/QA package
Baghdad	4684	6	3	3	3	3
Mosul	1124	2	1	1	1	1

NOTE: Guidelines from the IAEA of the United Nations were used to calculate the radiation therapy equipment and staff needed in the setting of a developing country. Guidelines from the Oncology Nursing Society were used to calculate the number of nurses needed. Several other specialty societies were also requested to provide guidelines but in most cases there were none, therefore colleagues active in those fields were consulted for estimating the number of staff needed.