Center offers islanders help in fighting cancer

By Christie Swanson

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FAYETTEVILLE -- A small contingent of doctors and cancer survivors from the Marshall Islands visited Arkansas last month to create a cancer survivorship plan that will be part of the islands' National Comprehensive Cancer Control Program.

Nia Aitaoto, the co-director of Fayetteville's newly opened Center for Pacific Islander Health, coordinated visits between the Marshallese and some of the state's leading cancer service providers, including the Winthrop P. Rockefeller Cancer Institute in Little Rock and Hope Cancer Resources in Springdale. The group held a public discussion at the University of Arkansas for Medical Sciences' campus in Northwest Arkansas.

The visit could add resources for the Marshallese population in Northwest Arkansas, which the medical school estimates is between 10,000 and 14,000. The population of the Marshall Islands is about 55,000.

Dr. Thomas Schulz, the director of the internal medicine residency program at UAMS' Fayetteville campus, said the meetings were the first step in building a long-term relationship between UAMS and Marshall Islands health care providers.

"I also hope that we can help them obtain sorely needed funds and equipment to not only optimally care for these survivors, but to improve access to care for screening with the goal of prevention in mind," he wrote in an email.

Brian Holt, president and chief executive officer of Hope Cancer Resources, said the visitors learned about Hope's services, and he learned about their needs.

"Having Nia here will help open some doors," he said. "We will help however we can."

Carmen Chong Gum, consulate general in Arkansas for the Republic of the Marshall Islands, said nine of the 24 deaths of Marshallese residents in Northwest Arkansas last year were caused by cancer.

"Help the consulate to educate more people," she said. "We need to talk more."

Recent history

Cancer kills about 33 people on the Marshall Islands each year, while doctors diagnose about 60 new cases annually.

The Marshall Islands has the world's highest rate of cervical cancer at 79.7 cases per 100,000 women. The rate among American women is 18.6 per 100,000.

The National Cancer Institute funded a 2004 study on cancer in the Marshall Islands. It concluded that a main reason for the islands' high cancer rates is radioactive fallout from the U.S. testing of nuclear bombs there between 1946 and 1962.

The U.S. took over administrative control of the Marshall Islands after World War II and signed a Compact of Free Association in 1983, before the island nation gained independence in 1986.
compact allows Marshallese to work and study in the U.S. without a visa, but they aren’t citizens and don’t qualify for government programs such as Medicaid.

The 2004 study called for additional training, equipment and programs on the islands. Cancer rates have changed little since that report, but Aitaoto said this time is different.

“They didn’t have the resources to fully implement it,” she said of the 2004 study. “If you can’t get a mammography machine and the training for it, it throws off everything you want to do for breast cancer.”

Dr. Helentina Garstang, a physician at the Republic of the Marshall Islands Ministry of Health and director of the Marshall Islands’ Cancer Council of the Pacific Islands committee, said island doctors received a new mammogram machine last year, and a female technician learned how to operate it. Breast cancer is the third most common cancer on the islands, but only 7.8 percent of women received a mammogram in 2013.

Aitaoto said the current effort to fight cancer is creating a realistic plan with resources in place to implement it.

“Now we have the Center for Pacific Islander Health, we have UAMS, we have collaborators and researchers and doctors and evaluators and people who want to work together and who understand that we’re all in this together,” she said.

Island challenges

Part of the problem on the Marshall Islands is the scope of the area doctors must cover.

The nation includes two parallel island chains spread over 750,000 square miles midway between Hawaii and Australia. The chains are about 125 miles apart and extend about 800 miles northwest to southeast.

The Marshall Islands is about 14 times the size of Arkansas. Traveling across the nation from top to bottom would be like going from Fayetteville to Denver.

About 30 percent of the population lives on the outer islands.

Garstang said the islands have 20 doctors. Health assistants, comparable to physician assistants in the U.S., see patients on many islands.

The Marshall Islands health system also has a $100,000 annual limit for coverage. Most patients have to stop treatment once the money is gone, Garstang said.

Maureen Milne ran into this problem. The 26-year-old Marshallese woman was diagnosed with chronic leukemia four years ago during a screening before she entered college.

She said her money ran out, and she’s no longer able to get the medication she needs. She can’t afford to travel to Hawaii or the Philippines to see an oncologist.

She was able to discuss her health issues with Schulz while in Arkansas and is taking back some tips to help improve her health.

Schulz said the islands have no oncologists, and he may be the one who travels there.

“I am fortunate to have been invited to share ideas of how I think I can help, which include devising surveillance plans specific to what is available on the islands and for me to visit the islands regularly to see survivors in the clinic as an oncologist,” he said.

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