

PLATINUM L I F E

115 000 South Africans are
diagnosed with cancer each year*.

*CANSAs Cancer Statistics



The Naked Truth

1 out of 3 people will have to face the biggest killer of our time.¹

Cancer is a life threatening disease that affects everyone: men and women, young and old, rich and poor.

This eBook takes the initiative to inform, educate and empower YOU about the realities that South Africans face today and the steps they can take to protect themselves and those dear to them.



Here are some interesting cancer facts:

BLADDER CANCER

- It is one of the top 5 cancers in South African men.
- The most significant risk factor for getting Bladder Cancer is smoking - your risk is doubled.
- This cancer affects about 1 in every 148 South African males, mostly older than 55.²

KIDNEY CANCER

- Kidney Cancer is the 6th most common in men.³
- Smokers are twice as likely as non-smokers to get Kidney Cancer.
- The rate of new kidney cancers has been rising since the 1990s.⁴

LEUKAEMIA

- This is the most common childhood cancer.
- 25% of all childhood cancers.
- Risk factors include smoking, blood disorders and congenital syndromes.
- Symptoms are non-specific and may resemble flu like symptoms.^{5,6}

LUNG CANCER

- Lung cancer is the second most common cancer and the leading cause of cancer death for men and women.⁷
- Lung Cancer is the 3rd most diagnosed cancer in South Africa according to Discovery and the 2nd most diagnosed cancer according to the South African ranking. Lung Cancer tops the most diagnosed list for men and is the 3rd most prevalent cancer diagnosed for women.
- Lung Cancer is the 4th most costly Cancer in South Africa.^{8,9}

PENILE CANCER:

- Men who were not circumcised at birth may have a higher risk of developing penile cancer.

- Being age 60 or older increases the risk of penile cancer.
- If caught early, there is a 98% change of beating penile cancer.
- Almost all penile cancers begin on the skin of the penis.¹⁰

PROSTATE CANCER

- 1 in 23 South African men will develop prostate cancer in their lifetime.
- On average, 5 South African men will die from prostate cancer every day.
- More than 4 300 South African men are newly diagnosed with prostate cancer each year.
- Symptoms can be non-specific or more severe like blood in the urine, erectile disfunction or painful urination.^{11,12}

SKIN CANCER

- 20 000 people per year in SA are diagnosed with skin cancer. Skin cancer is a growing public health problem in South Africa due to its high ambient ultraviolet radiation environment.
- The estimated total annual cost of treating skin cancers in South Africa were ZAR 92.4 million (2015).¹³
- The cost of skin cancer in South Africa is substantial and improvements to sun-protection awareness and behaviours are likely to avoid skin cancer development.

TESTICULAR CANCER:

- It is a common cancer in men between ages of 15 and 49.
- 1 in 2084 men are affected by testicular cancer. The survival rate for Testicular cancer is good if detected early.
- Swelling or a lump are the first signs to detected Testicular Cancer at an early stage.^{14,15}

Personal Risk Assessment

"I don't have any cancer in my family. Why should I be worried about getting the disease?"

Research has shown that although family history of cancer does count towards your chances of being diagnosed with cancer, it certainly isn't the only contributing factor.



Complete this quiz to see what your risk of being diagnosed with cancer is.

QUESTION	YES	NO
<p>1 ARE YOU A SMOKER? Smoking causes a number of diseases and is linked to a higher risk of developing cancer. It has also been implicated in a higher risk of being diagnosed with the disease. It is the single most preventable risk for cancer.</p>		
<p>2 DO YOU DRINK ALCOHOL? Even having ONE alcoholic drink per day increases your risk of being diagnosed with cancer. Research consistently shows that excessive drinking of alcoholic beverages increases a person's risk of hormone receptive Breast Cancer.</p>		
<p>3 ARE YOU OVERWEIGHT? Overweight and obese men - defined as having a BMI (Body Mass Index) of over 25 - have a higher risk of developing cancer.</p>		
<p>4 DO YOU HAVE ANY CLOSE RELATIVES WHO'VE BEEN DIAGNOSED WITH CANCER? If a man has a first-degree relative—meaning a father, brother, or son—with prostate cancer, his risk of developing prostate cancer is 2 to 3 times higher than the average risk. This risk increases even further with the number of relatives diagnosed with prostate cancer.</p>		
<p>5 DO YOU EXERCISE MODERATELY FOR LESS THAN 4 HOURS PER WEEK? According to research people who exercise between 4 and 7 hours per week at a moderate or intense level have a lower risk of getting cancer. Exercise consumes and controls blood sugar, which controls hormones that can affect how cancer cells grow and behave.</p>		
<p>6 ARE YOU OLDER THAN 50 YEARS? Research shows that each individual's risk of being diagnosed with cancer increases as one gets older.</p>		
<p>7 DO YOU FOLLOW A NON-BALANCED DIET, CONTAINING HIGH AMOUNTS OF SUGAR, PROCESSED FOODS, RED MEATS AND HIGH-CALORIE FOODS? Healthier diets could prevent around 1 in 20 cancers. A diet high in fruits and vegetables, good wholegrains and healthy proteins like fresh fish and chicken is recommended.</p>		

YOUR RISK OF RISK OF BEING DIAGNOSED WITH CANCER INCREASES WITH EVERY "YES"

Can I Afford Cancer?



CAN I AFFORD TO BE TREATED FOR CANCER? HOW WILL I SUPPORT MY FAMILY?

A diagnosis of cancer can be one of the most stressful experiences of life. In addition to the worries over survival and treatment, many patients find that they have additional concerns over the cost of medical treatment. In South Africa, 80% of patients are managed within the government health service, and 20% have medical insurance that means they can be treated in private hospitals. Many people find that they have let medical aid run out, or are not covered in a way they thought they were. If you do have medical aid, there are a number of considerations to remember to check in case you have a cancer diagnosis in your life.

Most importantly remember: you cannot afford NOT to be treated for cancer.

"I HAVEN'T GOT MEDICAL AID!"

There are many excellent public hospitals and superb academic cancer specialists who work in government hospitals. As with all types of illness: knowledge is power, therefore knowing what management you should be expecting will help you navigate through the system.

Websites and other searches on the internet can help you get more information to help you in your journey. There are many organisations that wish to help patients who do not have the resources for travelling to a hospital or managing treatments.

• NAVIGATING MEDICAL AIDS

All medical aids, even hospital plans, have to provide some cancer cover. This will include in-patient care but may also include specialist fees, chemotherapy and cover for radiation and medications. The amount and type of treatments covered tends to depend on the medical aid plan that you are on, and it may require you to register for a cancer scheme after diagnosis. Check what type of treatments you are covered for when you are considering starting or changing medical aids.

Fortunately, medical aids are not allowed to refuse cover for a patient with a pre-existing condition and that includes cancer. Remember to always mention these conditions to your medical aid so that you gain access to appropriate care and do not disqualify yourself.

Check your policy too as many companies encourage good health by funding screening and prevention tests, even to patients without day-to-day benefits.

• CANCER POLICIES

Even if you have medical aid, some of the initial concerns about cancer that patients suffer are not about survival or treatments, they are about whether they will be able to afford their treatments or go into debt. Because of this many insurance companies offer a policy which allows patients to unlock financial resources to cover the gap between what is covered and what is required.

• DISABILITY COVER

Disability cover protects your ability to earn a living. It allows you to retrieve money from your policy when you are unable to work for certain periods of time. This may be due to temporary or permanent disability. The policy may be related to your ability to work at all or your ability to carry out your specific occupation.

• ESTATE PLANNING (MAKING A WILL)

Nobody likes to think of a time when they will not be here, but it is said 'death, taxes and childbirth: there is never a convenient time for any of them!'

Your estate is everything that you own, from a house and car to your jewellery and cell phone. If you do not plan for who will receive them after you die, the government will plan for you and may leave your family and dear ones without the resources they need.

Making a will is a simple exercise and shows how much you love the people around you. It is a good idea to also stipulate who should make decisions for you, if you are too ill to decide for yourself how you would like doctors to treat you.

• SAVING NOW FOR THE FUTURE

Saving money is not easy, but if you are worried about how you can afford to cope if you get ill, now is the time to start. Once you ensure that you have coverage in place for managing your expenses (such as medical aid and disability, cancer or life insurance) have a look at your monthly budget and look for ways to save a small amount into an emergency fund each month. This can act as a financial buffer when you have a significant outlay. This might not even be a medical expense but it will come in useful if you do have an unexpected medical diagnosis.

Budgeting also allows you to work towards paying off debts. Often the greatest of patients is not how to afford future treatment, but how to keep up with past debts during a period where you cannot work.

If you do get into debt or cannot afford treatments, discuss the problems with your doctor. They may have knowledge of charities that can provide financial assistance or work to find a longer but easier solution to payments.¹⁵

RESOURCES:

1. <https://www.cancer.org/treatment/understanding-your-diagnosis/after-diagnosis/who-gets-cancer.html>
2. <https://www.cansa.org.za/infographic-the-big-5-cancers-affecting-men-in-sa/infographic-bladder-cancer-men/>
3. <https://www.cancer.net/cancer-types/kidney-cancer/statistics>
4. <https://www.cancer.org/cancer/kidney-cancer/about/key-statistics.html>
5. <https://www.cancercenter.com/cancer-types/leukemia/risk-factors>
6. https://www.mayoclinic.org/diseases-conditions/leukemia/symptoms-causes/syc-20374373?utm_source=Google&utm_medium=abstract&utm_content=Leukemia&utm_campaign=Knowledge-panel
7. <https://www.cancer.net/cancer-types/lung-cancer-non-small-cell/statistics>
8. <https://www.iol.co.za/personal-finance/my-money/cancer-is-south-africas-biggest-killer-16963389>
9. <https://www.ncbi.nlm.nih.gov/books/NBK534863/>
10. https://www.medicinenet.com/penis_cancer/article.htm#penis_cancer_facts
11. <https://www.mayoclinic.org/diseases-conditions/prostate-cancer/symptoms-causes/syc-20353087>
12. <https://www.medicalnewstoday.com/articles/150086.php>
13. NCBI - <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4818961/>
14. <https://cansa.org.za/files/2020/01/Fact-Sheet-on-Testicular-Cancer-NCR-2014-web-January-2020.pdf>
15. <https://www.mybreast.org.za/breast-health/breast-cancer/can-i-afford-to-be-treated-for-breast-cancer/>
16. <https://www.cansa.org.za/mens-health/>
17. www.cansa.org.za
18. <https://www.assessyourrisk.org>
19. <https://www.cansa.org.za/cancer-statistics/>
20. <https://www.cansa.org.za/south-african-cancer-statistics/>
21. <https://www.cancerresearchuk.org/about-cancer/causes-of-cancer/diet-and-cancer/does-having-a-healthy-diet-reduce-my-risk-of-cancer>
22. <https://www.cancer.net/cancer-types/prostate-cancer/risk-factors-and-prevention>

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