



தமிழ் அகதிகள் நடவடிக்கைக் குழு

**TAMIL REFUGEE ACTION GROUP**

www.trag.org.uk

உடல்நல மேம்பாட்டுத் திட்டம்

**Health Promotion Project**

Brent, Harrow

**Barnet & Ealing**

**1999-2006**

புற்றுநோய் மாநாடு

**SEMINAR ON CANCER**

**12-05-2005**



*King's Fund*

# Net Try

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**TAMIL REFUGEE ACTION GROUP  
(TRAG)**

***Health Promotion Project***

**Brent, Harrow**

**BARNET & EALING**

**SEMINAR ON CANCER**

Thursday 12<sup>th</sup> May 2005 – 10.30 am to 4.00pm SLMatthias Church Hall, Rushgrove Avenue, Colindale, NW9

**AGENDA**

**Chair : Mr.C.Sithamparapillai, Solicitor, Chair, TRAG**

- 10.15 a.m – Registration and Coffee
- 10.30 a.m - Lighting the traditional oil lamp by the **Chair, Mark Ricketts, Chief Superintendent, Metropolitan Police Service, LB of Barnet and Farshid Ariyan, Chair, Barnet Refugee Forum**
- 10.33 a.m - 2 Minutes silence in memory of the people who lost their lives in the war in Sri Lanka and Tsunami
- 10.35 a.m – Welcome speech by the Chair.
- 10.45 a.m – Speech by **Dr.Andrew Burnett, Medical Director Barnet P.C.T**  
'Cancer – Breast Cancer'
- 10.55 a.m - Speech by **Ms Fiona Patterson, Clinical Nurse Specialist**  
'Palliative care of cancer patients: The role of the specialist palliative care nurse'
- 11.05 a.m – Speech by **Miss. Rangah Balasubramaniam, Medical Student & Volunteer TRAG**  
'TRAG's Successful Health Promotion Project'
- 11.15 a.m – Speech by **Prof. Chris Boshoff, Professor of Cancer Medicine, University College London.**  
'New Targeted Therapies for cancer: The Beginning of the End'
- 11.50 a.m - Speech by **Dr.A. Jeyarajah, Consultant Gynaecological Oncologist, St. Bartholomew's Hospital.**  
'Treatment of cancer' – For Females
- 12.25 p.m – Questions and answers
- 12.30p.m - **Welcoming the Chief Guest, Cllr Colum Moloney, The Worshipful the Mayor of the LB of Brent.**
- 12.40 p.m- **Speech by the Chief Guest.**
- 12.50 p.m – Lunch
- 1.30 p.m - Speech by **Mr.M.Vetpillai, Surgeon, Watford Hospital**  
'Causes, signs and symptoms of cancer'- Lung Cancer
- 2.00 p.m– **Welcoming the Guest of Honour. Mr. Robert Evans Member European Parliament.**
- 2.15 p.m – **Speech by the Guest of Honour**
- 2.25 p.m - Speech by **Mr.V.Sivagnanavel, Consultant Orthopaedic Surgeon**  
'Prevention of cancer' – Bone Cancer.
- 3.05 p.m - Questions and Answers
- 3.35 p.m - Evaluation,  
Vote of Thanks by **Mr.S.V.Moorthy, Vice Chair, TRAG**
- 3.45 p.m - Conclusion

## CHAIR'S MESSAGE



Once again I am delighted in sending this message of good wishes for the seminar on cancer, a Health education programme under the auspices of the Health Promotion Project, a service provided by the Tamil Refugee Action Group.

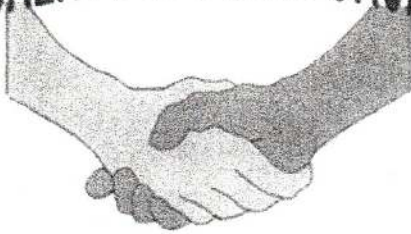
Health Promotion Project was started in June 1999 for a 3 year term for the areas of London Boroughs of Brent and Harrow. In recognition of the high quality of service and value for money, the project was extended in May 2003 for a further 3 years to cover the London Boroughs of Barnet and Ealing.

I had the privilege of participating and chairing all the Health Seminars organised by the Health Promotion Project. I am therefore personally aware how well these seminars had been conducted. It had been well appreciated and acknowledged as most useful by the Tamil Community majority of whom are asylum seekers. There are extremely vulnerable with special health care needs. These seminars have been very popular with large number of people attending and benefiting thereby. Much of the credit goes to Dr.Kathirgamu (Health Promotion Worker) who has worked long hours to make these seminars a great success. I would like to express our deep appreciation, on behalf of the Board of Trustees of TRAG, other members, well wishers and the staff, of the excellent work done by him which no doubt has also helped to lift the image of TRAG beyond the Tamil Community.

In conclusion I wish the Health Promotion Project including the cancer seminar every success.

C.SITHAMPARAPILLAI  
CHAIR  
TAMIL REFUGEE ACTION GROUP

# BRENT REFUGEE FORUM



Suite 18, 4th Floor  
Chancel House Business Centre  
Neasden Lane, London NW10 2TU  
Tel: 020 8214 1434  
Fax: 020 8214 1436



Tamil Refugee Action Group  
2<sup>nd</sup> Floor  
449 – 451 Willesden High Road  
Moran House  
Willesden  
London, NW10 2JJ

21<sup>st</sup> April 2005

**Forward: Cancer Seminar 12<sup>th</sup> May 2005**

Dear Dr Kathir,

I would like to take this opportunity to thank you for inviting me to celebrate with you the seminar on Cancer and your successes to date.

TRAG have been members of the Brent Refugee Forum for eight years and are now one of the most successful and longest serving Refugee Community Organisations in Brent.

The history of TRAG is something to admire, because for over 20 years they have been providing a Health services and supporting the Tamil community and community on the whole by offering Home Visits for vulnerable clients and health advice and information in the form of Health Promotion Leaflets and Booklets; circulated in and around the Borough.

This is not their first Health seminar, but what is noticeable is the quality of the information and resources they have available. All information is backed by Medical Professors, Medical Consultants and Health Professionals, accrediting the information distributed further.

Finally, I would like to congratulate the Tamil Refugee Action Group on all their success that have lead to this seminar and Godspeed for future activities. They are an important contribution to our community and a much needed and appreciated resource to our Borough.

Thank you,

Jefferson Kwamina-Crystal – Chair  
Brent Refugee Forum

## Message from Mr Farshid Ariyan

**Chair, Barnet Refugee Forum**

Chair, Farsophone Association

Vice Chair, Barnet Refugee Service



I am really proud and honoured to be invited for the Seminar on Cancer on 12.05.2005. I am also privileged to lighten the traditional oil lamp together with the Chair of TRAG and the Chief Superintendent of Barnet Police.

The Health Promotion Project has undoubtedly succeeded in promoting awareness amongst not only the Tamil Community but has also extended to other communities to ensure their access to health as well as to recognise the importance of the issue of 'Prevention is better than cure'

I am glad to know that the benefit of this project goes to about 25,000 Tamil people living in these four Boroughs.

The high level Health Seminars participated by the Worshipful Mayors, Members of Parliament, Councillors, Community Leaders, Professors, Medical Consultants, G.P's and Health Professionals shows the extent to which this project has developed.

The subject chosen for this seminar, 'Cancer' is very important as at present there is a steep increase in the total number of newly detected cancer patients. Surely the participants will benefit from the expert advice given by the Cancer experts. I wish TRAG all success in their future activities.

Farshid Ariyan

Chair, Barnet Refugee Forum

*Stop Smoking - Smoking causes cancer - finding*

*Stop Smoking is not at all difficult.*

*I have stopped smoking very many times in my life – Mark Twain*



## **Co-ordinator Reports....**

We gladly declare that this is the 8<sup>th</sup> major significant event in the series of Health Promotion Project activities successfully conducted by TRAG. In addition to this we also conducted a total of thirteen Health talks and Discussions including Workshops in common diseases and health related issues.

The responses over these events both from Tamil community and other ethnic minorities have exceeded our expectations. The co-operation and voluntary help provided by relevant medical personnel to conduct these seminars are very much appreciated. We thank the participants from both groups for their interest shown in these events.

Many Health Promotion materials have been produced by TRAG in Tamil and English. Of which thirteen Tamil leaflets have been included in the directory of Scotland NHS named "Information for all" edition 2005. They are the only Tamil leaflets included in that directory.

When the first phase of Health Promotion Project was completed in the boroughs of Brent and Harrow our planning was to extend it to the boroughs of Barnet and Ealing. The Community Fund (Big Lottery Fund) authorities appreciated the work done and extended their grant for adjoining boroughs. The authorities from King's Fund have also given us a fraction of support to conduct this particular seminar. We thank both funding agencies for their generous support and help.

The reports say that Cancer is on the increase in the UK. Thus, we feel the awareness of cancer should be well created among our community and if possible for other communities as well within the available resources.

In this context this seminar has been arranged under the Health Promotion Project of TRAG to effectively disperse the latest findings on cancer to the communities. Our Health Promotion Worker Dr. Kathir is the one who used all his organising talents to conduct this seminar a success.

Once again, thanks to all who show their interest and support to this event.

S. Karunanandarajah  
Co-ordinator  
TRAG

## 'My Sincere Thanks'

**Dr. Shanmugalingam Kathirgamu**  
Health Promotion Worker



The Tamil Refugee action Group is completing 20 years of service to the Community in a couple of days. The present extended Barnet & Ealing Health Promotion Project is completing 2 years of its activities in a couple of Days. The TRAG's successful Health Promotion Project completing its six years in a couple of months.

Besides some future workshops, Health Talks and discussions in the coming final year, this happens to be the major Health Seminar in cancer in completing this project a success.

I take this opportunity to thank the Worshipful Mayors, Members of Parliament, Councillors, Professors, Medical Consultants, General Practitioners, Health Professionals and other Community Leaders who all Voluntarily and happily participated and gave valuable talks at our workshops, Health Talks & Discussions and at our Health seminars which were held at different locations in the LB of Brent, Harrow, Barnet & Ealing.

In response to our invitation, several G.P's from local and distant Boroughs attended these events held at various locations. Thanks to all of them for their kind co-operation and encouragement given to us for the success of this project

My thanks to the group of dedicated Volunteers, the Co-ordinator and other staff who helped me in building up this project. Also my thanks to the members of our Tamil Community who have

Co-operated with us in carrying out our home visits and health advice, the Health Surveys and Evaluation. Their participation in large numbers at our seminars shows their appreciation and interest for our project.

Finally my special thanks to Mr.C.Sithamparampillai, Chair, TRAG with a record of having actively participated and chaired at all the Health seminars conducted under this project during the past six years and to the Directors of TRAG who have helped and encouraged me in developing this project for the health and well-being of our Tamil Community.



## CANCER

**C**ancer is a disease in which the body cells grow uncontrollably, because their normal regulatory mechanisms have been damaged. Of the many types of cancer, the majority forms solid tumours in specific parts of the body, commonly the skin, breast, lung, bowel etc. If untreated or if not treatable, cancer leads to death.

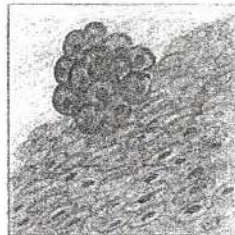
As we know, our body is made up of millions of very minute parts called cells. A single cell is the unit of life of all living organisms. Within each cell is a nucleus containing 23 duplicate pairs of thread like structures called chromosomes which has genes. Genes are made up of DNA ( Deoxyribo Nucleic Acid ) which is the chemical basis of heredity and the carrier of genetic information which children inherit from their parents. Every cell contains genetic information in the form of more than 90,000 pairs of genes that control the activities of cells. The body has a very complex system of growth inducing factors and growth suppressing factors which keep us approximately the same size.

A cell may become cancerous when certain genes that control vital process such as cell division become damaged and the cells undergo a series of changes. The faulty genes may be inherited or caused by carcinogens (cancer causing agents) such as sunlight, tobacco smoke, alcohol, unhealthy food choices, infectious agents such as bacteria and viruses, chemical agents, radiation etc. The sequence of events that leads to cancer is complex and varied.

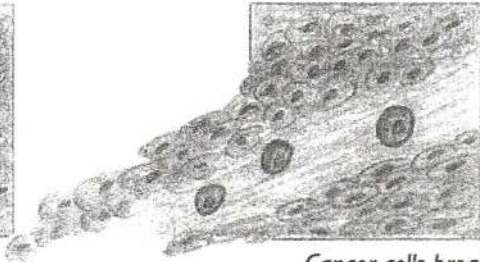
### WHEN SOMETHING GOES WRONG



*Cancer can start from a single abnormal cell.*



*The abnormal cell divides to produce a cluster of abnormal cells – a tumour.*



*Cancer cells break away from the tumour. They travel through the bloodstream to other parts of the body.*

Cells can usually repair their damaged genes. More than one gene must be damaged before cancer develops and the body's immune system often destroys any abnormal cells before they are able to multiply enough to form a cancerous tumour. If not destroyed the rapid disorderly multiplying group of cells form a lump or swelling which is referred to as a tumour. The tumour may then grow and go to damage the surrounding healthy tissues or organs. They deprive normal cells of nourishment or space. Sometimes these cancer cells may break away from the original tumour and spread through the blood stream or the lymphatic system to other parts of the body. Cancer can take as long as 20 years to develop. Early clinical detection is very important. Early clinical detection means that the cancer may be detected when it is localized and has not developed regional or distant spread to nodes or other viscera. It is at this early stage that most cancer patients will have the greatest chance of cure.

Cancers are broadly classified as Carcinomas, Sarcomas , Leukemias and Lymphoma:

**Carcinoma** arises in epithelial tissue which covers the skin and lines body cavities and organs.

**Sarcoma** occurs in connective tissues such as muscles or bone.

**Leukemia** develops in blood forming tissues such as the spleen and bone marrow.

**Lymphoma** forms in the lymphatic system which filters out harmful bacteria, viruses and dead cells

**CANCER IS LARGELY A PREVENTABLE DISEASE IF YOU  
CONSUME A HEALTHY DIET AND ADOPT A HEALTHY LIFE STYLE**

### **Causes of cancer**

- ❖ Hormones, Immune conditions and inherited alterations in the genetic material of a cell can all play a part in the cancer development. Only 5 to 10 percent of all cancers can be explained by inheriting a cancer gene.
- ❖ Environmental factors, particularly diet and life style have a significant influence on cancer development. Diet is likely to account for more than 40% of all cancers.
- ❖ People who consume a poor diet , low in vegetables and fruits and high in fat have a high risk of developing cancer. Our diet affects our daily health and also it affects our long term risk of developing cancer. Vegetarians are less prone to bowel, prostate and breast cancer compared to meat eaters.
- ❖ There is a link between high salt diet and gastric( Stomach ) cancer. Studies have consistently shown a link between high salt intake and Gastric cancer. However many of us continue to consume almost three times the daily recommended intake.
- ❖ Cancers are caused by our bodies or part of them being exposed to certain substances over long periods of time.
- ❖ Smoking is the biggest single cause of cancer in the world and it commonly cause Lung cancer.
- ❖ Chewing tobacco commonly cause mouth cancer.
- ❖ Excessive continuous alcohol consumption commonly cause mouth, oesophagus and stomach cancer. Alcohol has been known to be related to cancer for many years.
- ❖ Cancer is strongly linked to overweight and obesity, particularly in post – menopausal women causing endometrial cancer, breast cancer etc. Obesity promotes cancer.
- ❖ People who are constantly exposed to asbestos can develop Lung cancer.
- ❖ People who are constantly exposed to several other chemicals such as arsenic, nickel, chromatic, coal, coal tar products, mustard gas etc have a high risk in developing cancer. Carbonated drinks may raise the risk of getting oesophageal cancer.

- ❖ People who are constantly exposed to excessive sunlight can develop skin cancer.
- ❖ Viruses which live inside cells also can cause cancer Eg. Cervical cancer, cancer of the liver etc.

The causes can be classified as follows:

Diet - 35%	Occupational factors - 4%
Tobacco - 30%	Alcohol - 3%
Sunlight - 10%	Radiation - 1%
Virus - 7%	Others - 10%

### **Prevention of cancer (Stopping cancer before it starts)**

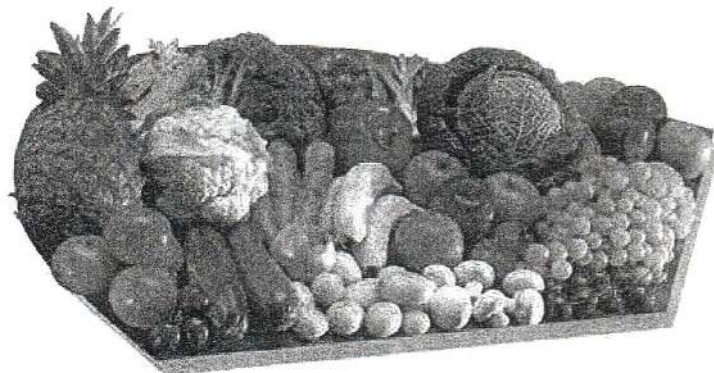
Cancer is largely a preventable disease. Cancer risk can be reduced through diet and life style choices from early age.

#### **Primary Prevention**

- ❖ This is an attempt to modify factors that promote or protect against carcinogenesis. Examples include dietary modification, smoking cessation, reducing sun exposure, reduction of carcinogens in the work place, prophylactic surgery and the use of chemo preventive drugs.

#### **Secondary Prevention**

- ❖ This is the early identification and treatment of pre malignant or early malignant disease. Examples include population screening, surveillance of high risk groups and genetic susceptibility testing.
- ❖ Choose a diet rich in a variety of plant based foods. Eat plenty of Vegetables and Fruits. Eat minimum of 5-7 portions of fruits and vegetables each day. Eating up your greens can help to reduce cancer. Vegetables such as broccoli, cauliflower, Brussels sprouts, cabbage, spinach, Leeks etc are thought to be able to destroy tumour cells. Vegetables and fruits contain essential nutrients and other important substances that can help to prevent cancer process from starting or halts its progress once it has begun.



- ❖ Maintain a healthy weight and be physically active.
- ❖ Drink alcohol in moderation (Under 3 units per day for men and 2units for women).

- ❖ Select foods low in fat (particularly those of animal origin) and salt.
- ❖ Prepare and store food safely. Use refrigeration and other appropriate methods to preserve perishable foods.
- ❖ Stop smoking as smoking is the biggest simple cause of cancer in the world.  
Tobacco can cause cancer whether it is smoked, chewed or consumed in other ways. No place for tobacco in a healthy lifestyle.
- ❖ Minimise exposure to strong sunlight. Use sun screens, Long sleeve shirts, caps
- ❖ Avoid long term Hormone Replacement Therapy
- ❖ Avoid chemical agents and radiation. Avoid carbonated drinks as it may raise the risk of cancer.
- ❖ Instead of red meat choose fish and poultry.
- ❖ Practise safe sex. Some form of viruses can cause cancer of the cervix.
- ❖ Know the early signs of cancer and go for screening.

### **Common Signs and symptoms of cancer**

- |   |   |
|---|---|
| ❖ A lump which is often firm and painless in or beneath the skin. | ❖ Difficulty with swallowing.                           |
| ❖ Change in the appearance of a mole.                             | ❖ Severe recurrent headaches.                           |
| ❖ A non healing wound.  | ❖ Nasal Bleeding with purulent discharge                |
| ❖ Blood in urine or sputum.                                       | ❖ Persistent Cough.                                     |
| ❖ Changes in bowel habits   | ❖ Unexplained weight loss.                              |
| ❖ A discharge containing blood from bowel or vagina.              | ❖ Alteration in Eating habit                            |
| ❖ Persistent abdominal pain.                                      | ❖ Recurrent fevers                                      |
| ❖ Hoarseness or changes in the voice, loss of speech              | ❖ Repeated infections which do not clear with treatment |

### **Common Types of Cancer**

There are many types of cancer over 200 in all. The most commonest types are,

#### **Lung Cancer**

Main causes: Smoking, Chemical inhalation such as pesticides and herbicides; Exposure to Asbestos.

Common signs and symptoms: Persistent cough or Hoarseness; Change in the cough which you had it for long time; Being short of breath and chest pain; Coughing up blood; A chest infection that does not get better.

**Smoking causes cancer, heart disease and stroke. It also causes chronic lung diseases such as bronchitis (infection of the lungs) and emphysema (lasting damage to the lungs). Half of all regular smokers will die from their habit.**

## **Bowel cancer (Colo- Rectal Cancer)**

This is the third common cancer in U.K. Bowel cancer happens when the cells that line the bowel change over a period of time and grow in an abnormal way.

Main causes: A diet that is low in vegetable, fruits and fibres, but include lot of red and processed meat may increase the risk of developing bowel cancer; A sedentary life style is another risk factor; Inflammatory bowel diseases, ulcerative colitis and Crohns Disease also may lead to cancer.

Common signs and symptoms: Bleeding from Colon or Rectum; A change in the bowel habit; Blood / Mucous in the stools; Alternate diarrhoea and constipation; Abdominal pain that comes and goes in waves; Lump or swelling in the abdomen.

*Eating less overall, eating more fruit and vegetables and reducing the amount of fat, salt and sugar in what we eat every day will help to reduce the chances of developing a number of diseases including cancer.*

## **Breast Cancer**

Most common cancer in females affecting one in ten women at sometimes in their lives. Cells in your breast begin to grow abnormally often for unknown reasons. The cells divide rapidly than normal cells and a lump is formed. It may spread through your breast in to other parts of the body.

Main causes: Unfortunately very little is known about the causes of breast cancer and research in to this continues.

- ↳ Is breast cancer hereditary?. In most cases no. Only a very small number of women have a family history of breast cancer.
- ↳ Taking family planning pills with high levels of oestrogen for more than 8 years may slightly increase breast cancer risk in young women.
- ↳ Taking Hormone Replacement Therapy for a long period, more than 2 years may increase the risk of getting cancer.
- ↳ Increase in weight and obesity will increase cancer risk. Post-menopausal women who are obese have an increased risk of developing breast cancer. Obesity raises the level of oestrogen in the body.
- ↳ First child birth after age 35, having no children are high risk factors.

Common signs and symptoms:

- ↳ A lump or thickening in the breast. Often the lump is painless.
- ↳ A spontaneous clear or bloody discharge from the nipple.
- ↳ Retraction or indentation of the nipple.
- ↳ Change in the size or contours of your breast.

- ↪ Any flattening or indentation of the skin over the breast.
- ↪ Redness or pitting of the skin over the breast, like the skin of an orange.

Prevention: Breast awareness, Regular screening, ultrasound test are the ways by which breast cancer can be detected early.

### **Cancer of the stomach**

Main causes:

- ↪ Consumption of a diet high in salt and salted foods.
- ↪ Foods low in vegetable, fruits and fibres increases the risk.
- ↪ Alcoholism
- ↪ Family history of cancer.

Common signs and symptoms:

- ↪ Persistent indigestion / heart burn.
- ↪ Loss of appetite.
- ↪ Unexplained weight loss.
- ↪ Difficulty in swallowing.
- ↪ Stomach pain, Swollen feeling in the stomach after eating.
- ↪ Nausea or Vomiting.
- ↪ Blood in faeces / faeces coloured black.
- ↪ Unexplained tiredness.

### **Mouth Cancer**

Mouth cancer can develop in any part of the mouth including the tongue, gums, lining of the mouth and lips.

Main causes:

- ↪ Smoking tobacco, Chewing tobacco
- ↪ Regularly drinking more than safe levels of alcohol.

Common signs and symptoms:

- ↪ A sore or ulcer anywhere in the mouth that does not heal and hoarseness.
- ↪ A white or red patch in the mouth that will not go away.
- ↪ A lump or thickening on the lip / mouth / throat.
- ↪ Unexplained bleeding, pain, tenderness or numbness in the mouth or lips.
- ↪ A persistent swollen gland in the neck.
- ↪ Difficulty or pain in chewing, swallowing or speaking.
- ↪ Coughing up of blood or blood stained sputum.
- ↪ Persistent Ear ache.
- ↪ Unexplained weight loss.

## **Skin cancer**

It is one of the most common cancer in U.K. Skin cancer is caused by ultra violet radiation from the sun. The greater your exposure, the higher your risk . There are two main types. The malignant melanoma and non melanoma skin cancer.

Main cause: Continuous exposure to excessive sunlight or other ultraviolet radiation.

Common signs and symptoms:

- ↳ An existing mole or dark patch is getting larger or a new one is growing.
- ↳ A mole has a ragged outline.
- ↳ A mole has a mixture of different shades of brown and black.

## **Cancer of Prostate**

This is the second most commonly diagnosed cancer. Only men have a prostate gland. The urethra a tube from bladder to the penis passes through this gland which lies just below the bladder. Its main job is to make some of the fluid of semen. Semen carries sperm and is the liquid that men ejaculate on orgasm. When the prostate enlarge the urethra get pressed and there is difficulty in passing urine.

Common signs and symptoms:

- ↳ A frequent need to urinate especially at night.
- ↳ A need to rush to the toilet, so that you may even wet yourself sometimes.
- ↳ Difficulty in starting to pass urine.
- ↳ Straining or taking a long time to finish.
- ↳ A weak flow.
- ↳ A feeling that your bladder has not emptied properly.
- ↳ Pain on passing urine.
- ↳ Pain on ejaculation.
- ↳ Pain in the genitals.

## **Testicular Cancer**

Cancer of the testicles is rare, but is the most common cancer in men aged 15-45.

Warning Signs:

- ↳ A hard lump on the front or side of a testicle.
- ↳ Swelling or Enlargement of a testicle.
- ↳ An increase in firmness of a testicle.
- ↳ Pain or discomfort in a testicle or in the scrotum.
- ↳ An unusual difference between one testicle and the other.



Inaugural Celebration: Barnet & Ealing, 9th August 2003 at Southall



5th Year Health Promotion Project Celebration & Diabetes Seminar at Ealing Town Hall, 14th February 2004



A Section of Crowd at Diabetes Seminar



# **Tamil Refugee Action Group**

**TRAG**

**2nd Floor, 449-451 High Road**

**Willesden, London NW10 2JJ**

**Tel: 020 8459 9070**

**Fax: 020 8459 9071**

**Email: [trag\\_office@tiscali.co.uk](mailto:trag_office@tiscali.co.uk)**

**Web: [www.trag.org.uk](http://www.trag.org.uk)**

**Charity No: 1035413**

**Branch Office:**

**221 Forest Road, Walthamstow E17 6HE**

**Tel:020 8527 4471**

## **Cervical and uterine cancers**

This affects mostly the cervix or neck of the womb. This is a disease which tends to affect elderly patients who have passed the menopause. Scientists have identified a virus (HPV- human Papillomavirus) which they believe may have some role in the development of cervical cancer.

Risk Factors: Smoking, Women with HIV, Women taking oestrogen only hormone; Replacement therapies, overweight or obese women.

Common signs and symptoms:

- ↳ Menstrual bleeding may be heavier and last longer.
- ↳ Abnormal bleeding, particularly after the menopause.
- ↳ Any sort of unusual vaginal discharge.
- ↳ Pain in the pelvic area.
- ↳ Painful or difficult urination.

## **Pancreatic Cancer**

Pancreatic cancer affects approximately 6,000 people in the U.K every year and is one of the ten most commonly diagnosed cancer.

Common signs and symptoms: The early symptoms of pancreatic cancer are usually non specific and are often ignored by the patient and doctor. These include epigastric bloating, flatulence, general malaise, diarrhoea, vomiting and constipation. As the disease progress patient present with painless jaundice and weight loss. Abdominal pain is the most frequently encountered late symptoms.

## **Diagnosis of cancer**

- ❖ Routine Screening – Eg. Breast Screening, Cervical smear tests etc
- ❖ Imaging tests such as X rays, Ultra sound, Scanning, C.T Scanning.
- ❖ By biopsy to confirm diagnosis.

## **Treatment of cancer**

The chances of a cancer being curable are highest if it is detected by screening at a sufficiently early stage before it causes symptoms. The three main techniques used to treat cancer are Surgery, Chemotherapy and Radiotherapy.

- ❖ Surgery: Surgical removal of a tumour is the main treatment for most common solid tumours at an early stage.
- ❖ Chemotherapy: Treatment with anti cancer drugs. Anti cancer drugs are used to kill cancerous cells.
- ❖ Radio therapy: During radiotherapy cancer cells are destroyed using high intensity radiation.

## **Palliative Care**

When active treatment is no longer effective, it is still possible to tackle problems which advanced cancer may cause. Palliative care is about preserving quality of life for as long as possible overcoming the ill effects of cancer. This is providing relief

from distressing symptoms like pain, diarrhoea, breathlessness etc. Also, offering general help such as home helps, providing information on welfare benefits rights etc.

Palliative care is provided by N.H.S hospital units, hospices and charitable community organisations like cancer care society, cancer black care etc.

### **Do you know?**

- One in three of us is likely to be affected by cancer at some point during our lifetime.
- About 120,000 die each year in U.K due to cancer
- One person dies from Lung cancer every 15 minutes in U.K
- In U.K smoking causes one in three of all cancer deaths.
- There are about 400 different chemicals in cigarette smoke and it causes cancer.
- Every year more than 31,000 people are diagnosed with bowel cancer in the U.K
- About 28,000 people are affected by breast cancer / year in U.K every year.
- About 10,000 people per year are diagnosed as having stomach cancer in U.K
- Every year about 8,500 men die of Prostate cancer in U.K
- About 5,500 new cases of mouth and throat cancers are reported in the U.K each year.
- In U.K every year more than 7,000 people are diagnosed with malignant melanoma(Skin Cancer) and about 1700 die from it.
- Each and every day about 740 people in the U.K are told they have cancer.

#### **Tamil Refugee Action Group**

2<sup>nd</sup> Floor, 449/452 High Road  
Willesden NW10 2JJ  
Tel: 020 8459 9070  
Fax: 020 8459 9071  
Email: [trag\\_office@tiscali.co.uk](mailto:trag_office@tiscali.co.uk)  
Web: [www.trag.org.uk](http://www.trag.org.uk)  
Charity No: 1035413  
**Branch Office:**  
221 Forest Road, Walthamstow  
E17 6HE  
Tel: 020 8527 4471

**Graphic Design and Typesetting**  
by T. Than Tun – MODA Volunteer  
London Metropolitan University  
[theinthantun@gmail.com](mailto:theinthantun@gmail.com)

## புற்றுநோய்

எங்கள் தேகம் பல கோடிக்கணக்கான மிகவும் நுண்ணிய கலங்களினால் (Cells) ஆக்கப்பட்டிருக்கின்றது. இவைகள் அனைத்தும் தேகத்தின் கட்டுப்பாட்டின் கீழ் வளர்கின்றன. சிலவேளைகளில் இக்கலங்கள் பல காரணங்களால் மாற்றமடைந்து தேகத்தின் கட்டுப்பாட்டின்றி மிகவும் வேகமாக வளர்ந்து, பெருகிக் கட்டிகளாக மாறி, அருகாமையில் உள்ள உறுப்புக்களையும் தாக்குகின்றது. கட்டிகளில் இருந்து சிறு பாகங்களாக உடைந்த புற்றுநோய்க் கலங்கள், இரத்தம், நிணநீர்மண்டலம் ஊடாக தேகத்தின் பல பாகங்களுக்கும் பரவ வாய்ப்புண்டு.

தேகத்தில் உள்ள ஒவ்வொரு கலங்களும், அதன் மத்தியில் உள்ள உட்கருவின் (Nucleus) கட்டுப்பாட்டில் இயங்குகின்றது. ஆனால் சில சந்தர்ப்பங்களில் பலவிதமான வெளித்தாக்கங்களினால் உதாரணமாக சிகரட் புகை, மதுபானம், கடுமீ வெய்யில் தூடு, ஆரோக்கியமில்லாத உணவுவகைகளினால் உட்கருவில் உள்ள பரம்பரை அலகுகளில் (Genes) சில மாற்றங்கள் ஏற்படுவதால், அந்தக் கலங்கள் கட்டுப்பாட்டின்றி மிகவும் வேகமாக வளர்ந்து பெருகின்றன. மாறுபட்ட கலங்களை இயற்கையாக உள்ள தேகத்தின் நோய் எதிர்ப்பு சக்தி (Immunity) அனேகமாகத் தாக்கி அளித்து விடும். இப்படி அளிக்க முடியாத நிலையில்தான் புற்றுநோய் ஆரம்பமாகின்றது. நோய் பரவமுன் மிகவும் ஆரம்பத்தில் கண்டு பிடித்தால் நோயைக் குணமாக்க முடியும்.

### புற்றுநோய் ஏற்படுவதற்கான காரணங்கள்.

- உட்கருப்புக்களின் தாக்கத்தினாலும், பரம்பரை அலகின் இயல்புகளாலும் புற்றுநோய் ஏற்பட வாய்ப்புக்கள் அதிகம் உண்டு.
- சுற்றாடல் காரணிகள் (புகையிலைப்புகை, மதுபானம், ஆரோக்கியமற்ற உணவுகள், கடுமீ வெய்யில் காய்தல்) முக்கியமாக ஆரோக்கியமற்ற உணவுவகையின் பாவனை புற்றுநோய் ஏற்படுவதை ஊக்குவிக்கும்.
- நிறையக் காய்கறி பழவகை இல்லாததும் கொழுப்பு மாமிசம் கூட்டியதுமான உணவுவகை உண்ணும் பழக்கம் புற்று நோய் ஏற்படுவதை ஊக்குவிக்கும்.
- உப்பு அதிகமாக உள்ள ஆகாரத்திற்கும் இரைப்பைப் புற்றுநோய்க்கும் சம்பந்தமுண்டு. உப்பின் பாவனையை நன்றாகக் குறைப்பது நன்று.
- எமது தேகத்தையோ தேகத்தின் ஒரு பாகத்தையோ பல காலம் சில வெளிக்காரணிகள் தாக்குவதால் புற்றுநோய் ஏற்படுகின்றது. உதாரணமாக அதிக அளவு புகைப்பிடிப்பதனால் சுவாசப்பைப் புற்றுநோய் ஏற்படுதல். புகையிலை சப்பி மெல்லுவதால் வாய்ப்புற்றுநோய் ஏற்படுதல்.
- தொடர்ச்சியாக பலகாலம் அதிக மதுபானம் பாவிப்பதால் அனேகமாக வாய், களம் (Oesophagus) இரைப்பைப் புற்றுநோய் ஏற்படுகின்றது.
- தொடர்ச்சியாக பலகாலம் அஸ்பெஸ்ரோஸ் (Asbestos) பொருள்களுடன் சம்பந்தப்பட்டிருந்தால் உதாரணம் அஸ்பெஸ்ரோஸ் தொழில்சீசாவையில் வேலை செய்வதால் சுவாசப்பைப் புற்றுநோய் ஏற்பட இடம் உண்டு.
- சில இரசாயனப் பொருட்களுடன் தொடர்ச்சியாக சம்பந்தப்பட்டிருந்தால் -- உதாரணமாக ஆசனிக் (Arsenic) நிலக்கரி, தாள் - புற்றுநோய் ஏற்பட வாய்ப்புக்கள் உண்டு.
- கடுமீ தூய வெய்யில் தொடர்ச்சியாக உடம்பைக் காயவிட்டால் தோல்ப் புற்றுநோய் ஏற்பட அதிக வாய்ப்புகள் உண்டு.

- கலங்களுள் உயிர் வாழும் சில வயிர்ஸ் ( Virus) கிருமிகளால் கெற்ப்பை வாசல் ( Cervix) மற்றும் ஈரல் புற்றுநோய் ஏற்படுகின்றது.
- வாயுவுள்ள மென்பானங்கள் (Carbonated Drinks) அதிக அளவு பாவித்தால் களப் புற்றுநோய் ஏற்பட வாய்ப்புகள் உண்டு.

## புற்றுநோய் ஏற்படுவதைத் தடுப்பது எப்படி? அதாவது வருமுன் காப்பது எப்படி?

புற்றுநோய் ஒரு கொடிய நோயாக இருந்தாலும் அதைத் தவிர்க்க முடியும். இளம் வயது தொடக்கம் ஆரோக்கிய உணவுகள் உண்பதாலும், ஆரோக்கியமான வாழ்க்கை முறையைக் கடைப்பிடிப்பதாலும் புற்றுநோய் ஏற்படுவதைத் தவிர்க்க முடியும்.

1. முக்கியமாக நாங்கள் தாவர உணவுகளை அதிக அளவு உண்ணப் பழகிக்கொள்ள வேண்டும். ஒரு நாளைக்குக் குறைந்தது 5-7 பாகம் உடன் காய்கறி வகைகளை உண்ணவேண்டும். புறோக்கோலி ( Broccoli ), கோலிபிளவர் ( Cauliflower), புறசல்ஸ் ஸ்பிரௌட்ஸ் ( Brussels sprouts ), முட்டைக்கோவா ( Cabbage ), ஸ்பின்னாச் ( Spinach ) லீக்ஸ் ( Leeks ), ராஸ்பெரி ( Raspberry ), பிளாக்பெரி ( Blackberry ) பீட்ரூட் ( Beetroot ), தக்காளி ( Tomatoes ), அம்மண்ட் ஆகிய காய்கறிகளில் புற்றுநோய்க் கலங்களை அளிக்கவல்ல சக்தியிருப்பதாகச் சொல்லப்படுகின்றது.
2. நன்றாகத் தேகாப்பியாசம் செய்து, ஆரோக்கியமான எடையைப் பேணவும்.
3. நியாயமான குடிப்பளக்கத்தைப் பேணவும் ( சிறிதளவு மதுபானம் அருந்துதல் , ஒரு நாளைக்கு 3 அலகிற்கு உட்பட )
4. கொழுப்பு, உப்புக்குறைந்த உணவுகளைத் தேர்ந்து எடுக்கவும்.
5. உணவுகளை நல்லமுறையில் செய்து, நல்லமுறையில் சேமித்து வைக்கவும்.
6. புகைப்பதை நிறுத்தவும்.
7. வெய்யிலில் அதிகமாகக் காய்வதைத் தவிர்த்துக் கொள்ள வேண்டும். கை நீளச் சேட், தொப்பி ஆகியவற்றை அணிய வேண்டும்.
8. மாதவிடாய் நின்றபின் பாவிக்கும் ( H.R.T ) மருந்துகளை நீண்டகாலம் ( தொடர்ச்சியாக 2 ஆண்டுகளுக்கு மேல்) பாவிப்பதைத் தவிர்க்கவும்.
8. இரசாயன மாற்றத்தை உண்டாக்கக் கூடிய பொருட்களையும் கதிர்வீச்சால் ( Radiation) பாதிக்கப்பட்ட பொருட்களையும் தவிர்க்கவும்.
10. ஆடு, மாடு இறைச்சியைத் தவிர்த்து, மீன், கோழி இறைச்சியைக் கூடுதலாகப் பாவிக்கவும்.
11. வாயுவுள்ள மென்பானங்களைத் ( Carbonated Drinks ) தவிர்க்கவும்.
12. கதிர்வீச்சைத் தவிர்க்கவும்.

## புற்றுநோய்க்குரிய பொதுவான அறிகுறிகள்

- தோலினுள் அல்லது தோலின் கீழ் ஒரு திடமான அசையாத நோவில்லாத கட்டி.
- ஒரு கட்டியின் தோற்றத்தில் மாற்றங்கள் ஏற்படுவது.
- ஆறாத ஒரு புண்.
- சிறு நீரோடு இரத்தம் போவது அல்லது சளியில் இரத்தம் கலந்து இருப்பது.
- சுகமாக மலம் போவதில் மாற்றங்கள் ஏற்படுவது.
- இரத்தம் கலந்த மலம் அல்லது பெண் உறுப்பின் வாசலின் ஊடாக இரத்தம் கசிதல்.
- தொடர்ச்சியான வயிற்றுநோ.
- கரகரப்பான குரல் அல்லது குரலில் மாற்றங்கள்.
- உணவு விழுங்குதலில் கஸ்டம்.
- விட்டு,விட்டு வரும் தவையிடி.
- தொடர்ச்சியான இருமல்.
- காரணமில்லாத எடை குறைவு.
- ஆகாரம் உண்ணும் பழக்கத்தில் மாற்றங்கள்.
- இடை விட்டுக்காய்ச்சல்.
- சிகிச்சையினால் பூண குணமடையாமல் திரும்பவும் நோய் விரிவடைதல்.

## பொதுவான புற்று நோய்கள்

### நரையீரல் புற்றுநோய்

பொதுவான காரணங்கள்: புகைத்தல் இரசாயனப்பொருட்களை உட்கவாசித்தல், அஸ்பெஸ்ட்ரோஸ் தூசியை உட்கவாசித்தல்

பொதுவான அறிகுறிகள்:

- § தொடர்ச்சியான இருமல் அல்லது கரகரப்பான குரல்.
- § பலகாலம் இருந்த இருமலில் ஓர் மாற்றம்
- § மூச்சுவிடுவதில் கஸ்டம்.
- § சளியுடன் இரத்தம் போதல்.
- § சிகிச்சை செய்தும் பல காலம் குணமடையாமல் இருக்கும் சுவாசப்பை நோய்.

### குடல் புற்று நோய்

பிரித்தானியாவில் இரண்டாவது பொதுவான புற்றுநோய்.

பொதுவான காரணங்கள்: சிகப்பு இறைச்சி, கொழுப்பு வகை கூட உள்ளதும் காய்கறி, பழவகை, நார் உணவுகள் குறைந்ததுமான ஒரு உணவைப் பல காலம் உண்பதால் புற்று

நோய் வருவதற்குக் கூடிய வாய்ப்புக்கள் உண்டு.  
Crohn's Disease, குடல்ப்புண் போன்ற வீக்கம் உண்டாக்கக் கூடிய  
குடல் நோய்கள் இருப்பதாலும் ஏற்படலாம்.

பொதுவான அறிகுறிகள்:

- பெரும் குடல் மலக்குடலில் இருந்து இரத்தம் போதல்.
- சுகமாக மலம் போவதில் ஏற்படும் மாற்றங்கள்.
- மலத்தில் இரத்தம் கலந்து இருத்தல்.
- மாறி, மாறி, ஏற்படும் மலச்சிக்கலும் வயிற்றோட்டமும்.
- வந்து வந்து போகும் வயிற்று நோ, வயிற்றில் கட்டி அல்லது வீக்கம்.

இரைப்பைப் புற்றுநோய்

முக்கியமான காரணங்கள்: உணவுகளில் உப்புக்கூடச் சேர்த்துப் பழகிக்கொள்வதாலும், உப்பு  
உள்ள உணவுகளை அதிக அளவு பாவிப்பதாலும்.  
காய் கறி பழவகை நார்ச் சத்துக் குறைந்த உணவுகளை அதிகமாக  
உண்டு பழகுவதனாலும்.  
அதிக அளவு மதுபானம் பாவித்தல்.  
பரம்பரை வருத்தமாக புற்றுநோய் உள்ள குடும்பம்.

பொதுவான அறிகுறிகள்:

- நிரந்தரமான சமீபாட்டுக் குறைவும், வயிற்று எரிவும்.
- பசிக்குறைவு.
- காரணமில்லாத பசியின்மை.
- விழுங்குவதில் கஸ்டம்.
- வயிற்றுநோ.
- சாப்பாட்டிற்குப் பின் வாயிற்றுப் பொருமல்.
- சத்தி.
- மலத்தில் இரத்தம் அல்லது கறுப்பு நிறமான மலம்.
- விளக்கம் கொடுக்கமுடியாத சோர்வுத்தன்மை.

வாய்ப்புற்று நோய்

வாய்க்குள் எப்பாகத்திலும், அதாவது நாக்கு, முரசு, உதடுகளில் புற்றுநோய் ஏற்பட வாய்ப்புக்கள்  
உண்டு.

முக்கியமான காரணங்கள்: புகைத்தல் புகை இலை மெல்லுதல்  
அதிக அளவு மதுபானம் பாவித்தல்.

பொதுவான அறிகுறிகள்:

- வாயினுள் ஆறாத புண், கொப்புளம் இருத்தல்.
- நிரந்தரமாகவிருக்கும் வெள்ளை நிறமான அல்லது சிவந்த  
படருதல்
- குரல் அடைப்பு.
- சோண்டில், வாயினுள் தொண்டையில் ஏற்படும் கட்டி.
- நியாயப்படுத்த முடியாத இரத்தக் கசிவு.
- வாயினுள் உதடுகளில் நோ உணர்ச்சியின்மை.
- தொடர்ச்சியாக கழுத்தில் வீங்கும் நிணநீர் முடிச்சுக்கள்

- மெல்லுவதில் விழுங்குவதில் கதைப்பதில் கஸ்டம் அல்லது நோ ஏற்படுதல்.
- இருமும் போது இரத்தக்கறை பட்ட சளி, அல்லது இரத்தம் வெளியேறுதல்.
- தொடர்ச்சியான காது வலி.
- நியாயப்படுத்தமுடியாத எடைக்குறைவு.

#### தோல்ப் புற்று நோய்

பிரித்தானியாவில் ஒரு பொதுவான புற்றுநோய். சூரிய ஒளியின் கதிர்வீச்சினால் ஏற்படுகின்றது. சூரிய ஒளியில் எடுத்து தேகம் எவ்வளவு நேரடியாகச் சம்பந்தப்படச் செய்கின்றோமோ அவ்வளவு எமக்குத் தோல் புற்று நோய் ஏற்பட கூடிய வாய்ப்புக்கள் உண்டு.

பொதுவான அறிகுறிகள்: தோலில் ஏற்படும் ஒருவிதமான பல நிறமுள்ள படர்ந்து கொண்டுவரும் களலை.

#### புரோஸ்டேட் புற்றுநோய் ( Prostate cancer )

இது ஆண்களுக்கு ஏற்படும் புற்றுநோய். சிறுநீரகப்பையின் கீழ் இருக்கும் புரோஸ்டேட் புற்றுநோயினால் வீங்கும் போது அதன் ஊடாக வெளிவரும் சிறுநீர்க்குழாய் சுருங்குவதனால் பிரச்சனைகள் ஏற்படுகின்றது.

பொதுவான அறிகுறிகள்:

- அடிக்கடி சிறு நீர் கழித்தல் அனேகமாக இரவில்.
- திடீரென மலசலகூடம் போகவேண்டிவருவதும், உடும்பு நனைவதும்.
- சிறுநீர்கழிக்க ஆரம்பத்தில் கஸ்டம்.
- சிறுநீர் கழித்து முடியப் பிரயாசைப்படுதல் நீண்டநேரம் எடுத்தல் .

#### மார்பு புற்று நோய்

இது பெண்களுக்கு ஏற்படும் ஒரு பொதுவான புற்று நோய்.

பொதுவான காரணங்கள்: பரம்பரை வியாதியாக ஏற்படலாம், உட்கரம்புக்களின் தாக்கத்தினால் ஏற்படலாம், மாதவிடாய் குறைந்தவயதில் ஆரம்பித்தவர்களுக்கும், கூடிய வயதுமட்டும் மாதவிடாய் ஏற்படுபவர்களுக்கும், பிள்ளைகள் இல்லாதவர்களுக்கும் நோய் ஏற்பட வாய்ப்புக்கள் உண்டு.

பொதுவான அறிகுறிகள்:

- மார்பில் கட்டிகள் நோவோடு அல்லது நோவில்லாமலும், தெரிந்தும் தெரியாமலும் இருக்கும்.
- மார்பு தடித்தல் அல்லது வீக்கமாக இருத்தல்.
- ஒரு மார்பு மற்ற மார்பிலிருந்து உருவத்திலும் பருமனிலும் வேறுபடுதல்.
- முலைக் காம்பில் நீர்க்கசிவு அல்லது இரத்தம் கசிவு.
- முலைக் காம்பு இழுபட்டோ அல்லது வெளியே தள்ளியோ இருப்பது.
- முலைக்காம்பைச் சுற்றிச் சொறி இருப்பது.
- தோலின் மேற்புறத்தில் வட்டம் வட்டமாக வித்தியாசம் இருப்பதும் புண் ஏற்படுவதும்.
- மார்பின் மேற்புறம் தோலுக்குக் கீழ் உள்ள இரத்தக் குழாய்கள்



( Vein ) மிகவும் தோற்றமுள்ளதாக இருப்பது.

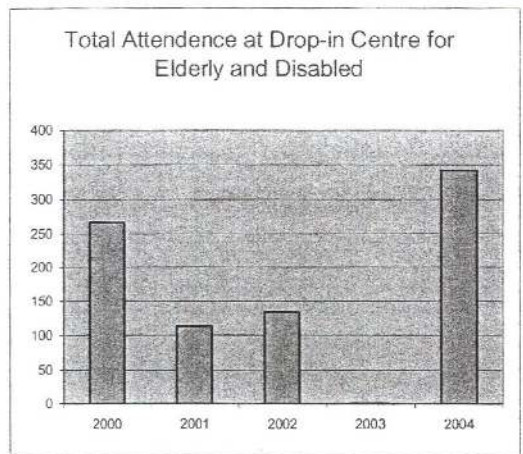
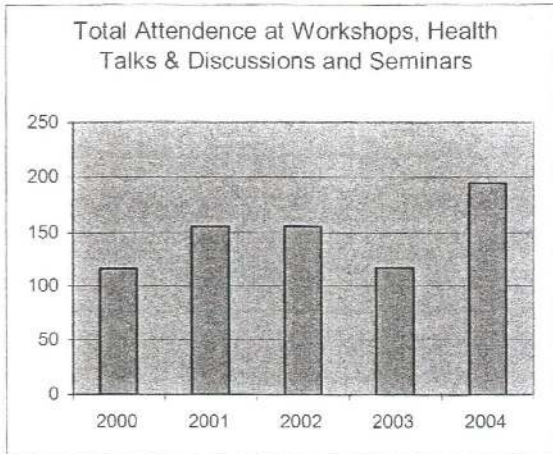
- கமக்கட்டு (Armpit) உள் கட்டி ஏற்படுவது.

மார்பு புற்று நோய் ஏற்படும் வாய்ப்புகளைக் குறைப்பது எப்படி?

- மார்பகம் எக்சிநிளிங் செய்தல்.
- மார்பில் முன்பு கூறிய மாற்றங்கள் தென்பட்டால் வைத்தியரின் ஆலோசனையைப் பெறுதல்.
- நீங்களே உங்களின் மார்பைப் பரிசோதனை செய்யத் தெரிந்து கொள்ளல் வேண்டும்.
- உடம்பின் எடையைக் குறைப்பது மிகவும் நல்லது.
- கிரமமாகத் தேகாப்பியாசம் செய்வதும் ஆரோக்கியமான ஆகாரத்தை உண்ணப் பழகிக் கொள்வதும்.

**“CANCER  
IS  
CURABLE”**

**IF DETECTED EARLY**



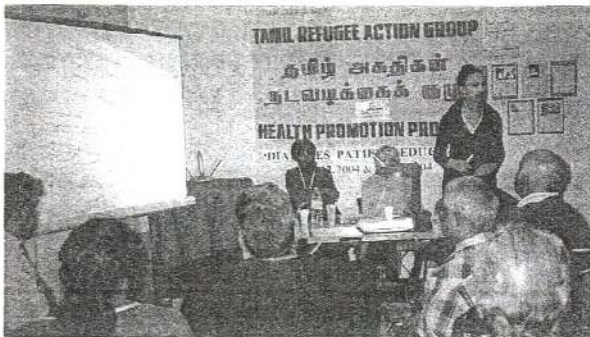
**Diabetes Workshop by Brent PCT, 8<sup>th</sup> December 2004**



**5-a-day Healthy Eating Workshop 4<sup>th</sup> August 2005**



**PALS Workshop by Brent PCT, 9<sup>th</sup> February 2005**



**Diabetes Workshop by Brent PCT, 8<sup>th</sup> December 2005**



**Prof. Trisha Greenhalgh OBE**

### **Drop in Centre for Elderly and Disabled**

The Drop in Centre has been functioning at TRAG for the past several years as a pilot Project. Due to lack of accommodation and funding we could not develop this centre. One of the tasks in the extended Health Promotion Project is to develop this Centre. Launch of this event took place on 21<sup>st</sup> June 2004. Several Elderly and Disabled people attended this event. At present the centre is fully developed with more Elders and Disabled attending the centre. Special programmes are conducted to alleviate the isolation and the social exclusion of many of the Tamil Elderly who are unable to socialise with the members of their Community.



**Drop-in Centre**

### **Tamil Youth Deaf Club**

The Tamil Youth Deaf Club is held on the first Wednesday of each month. The isolation for Tamil Deaf persons is acute and TRAG has been concerned with this problem. It happens to be the only Tamil Youth Deaf Club in London. It has been estimated that there are more than Forty Tamil deaf people living in London. Of which, more than 15 people regularly participating in the drop in sessions. TRAG has its Sign language volunteer interpreter who is a specialist both in Tamil and English sign language with many years of experience.



**Tamil Youth's Deaf Club**



**Health Promotion Volunteers**



**Drop-in Centre Activities**



**Elders at the Drop-in Centre**

**List of Health Seminars held up to date**

- 12.02.2000 – Brent & Harrow Health Promotion Project  
**Inaugural Celebration & Health Seminar** at Willesden.
- 14.02.2001 – Seminar on **Diabetes** at Willesden.
- 12.05.2001 – Seminar on **Smoking Alcohol & Drugs** at Willesden.
- 23.02.2002 – Seminar on **Sexually Transmitted Diseases, HIV&AIDS** at Alperton.
- 14.09.2002 – Seminar on **Coronary Heart Disease** at Harrow.
- 09.08.2003 – Extended Barnet & Ealing Health Promotion Project  
**Inaugural Celebration & Health Seminar** at Southall.
- 14.02.2004 – Seminar on **Diabetes** at Ealing.
- In addition to the above, a total of 13 Workshops and Health Talks & discussions were conducted with the participation of G.P's and Health Professionals at different locations.

## **Profile of Chair, Special Guests and speakers**

**Mr.C.Sithamparapillai**. LL.B, LLM ( Lond)

Diploma in Air & Space Law (Lond) Inst. of World affairs, Solicitor, England and Wales, Attorney -at-Law, Sri Lanka. Solicitor, New South Wales (Australia). Chair Tamil Refugee Action Group for the past nine years. Chair Refugee Arrivals Project for six years, consisting of more than 18 refugee organisations. Chair / President of about 10 organisations at different times which span over a period of 18 years.

**Mark Rodney Tristram Ricketts**, Borough Commander Barnet Borough. Joined the Metropolitan Police Service in 1976 and after initial training was posted to Wembley where he was made a D.C. In 1984 he was promoted to P.S. In 1989 he was made Acting Inspector at Wood Green. In 1990 he was fully promoted to Inspector. In 1999 he was promoted to Chief Inspector. In March 2001 he was promoted to Superintendent. In February 2004, he was promoted to Chief Superintendent.

**Mr.Farshid Arivan**, Chair Barnet Refugee Forum, Farsophone Association and Vice Chair , Barnet Refugee Service. Moved to U.K from Iran when he was very young. Later went back to Iran after the revolution in Iran. Escaped again to Turkey as political Refugee where he worked for UNHCR. Then moved to Sweden and lived there for 10 years and finally came back to U.K. He has so far worked as a Teacher, Youth worker, Legal advisor & Legal representative, A Charity builder or a Community Refugee worker- Manager and Co-ordinator and has acted as Poet, Actor and Writer.

**Dr.Andrew Burnett** Director for Health Improvement / Medical Director Barnet P.C.T

**Ms.Fiona Patterson**, Clinical Nurse Specialist

She is from the Community Specialist Palliative Care Team of North London Hospice N12

**Miss.Rangah Balasubramaniam**, Medical Student, St.Georges Hospital Medical School. A service user, Medical student and thereafter an active Health Promotion Volunteer of TRAG. An announcer at the International Tamil Broadcasting Corporation ( I.B.C). Also presents TRAG supported Health Promotion Programmes at I.B.C. She is also a Musical Artist- A player of Carnatic Classical Drum called, 'Miruthangam'

**Prof. Chris Boshoff** MBChB MRCP PhD Professor of Cancer Medicine, Cancer Research UK Viral Oncology Group, Wolfson Institute for Biomedical Research, University College London.

Trained in Medical Oncology at the Royal Free, Royal London and Royal Marsden Hospitals between 1993 and 1998. Did a PhD in Viral Oncology at the institute of Cancer Research in the Laboratories of Robin Weiss (1995-1998). From 1999 a Senior Lecturer at University College London (UCL) and in 2001 appointed Professor of Cancer medicine at UCL

Director, Cancer Research U.K. Viral Oncology Group (1998-), Chairman, Wellcome Trust Functional Genomics Initiative on Stem Cells (2002-)

Prizes & Awards:

1995-1996: Mercury Phoenix Trust Grant

1996-1998: CRC Clinical Research Fellowship

1998 Dozor visiting Professorship, BenGurion University, Israel

1998 Mc Elwain Prize in Oncology

1998-2004 Glaxo Wellcome Prize Fellowship

2003/2004 Fleming Prize in Medicine

2004 Entente Cordiale Cancer Prize ( award at 10 Downing Street)

Clinical Research: Helping to establish the new Head and neck cancer centre at UCL / UCH. Chief investigator ( U.K) for a number of targeted cancer therapy trials.

Laboratory Research: His research on AIDS - related cancers. Discovery of a major putative tumour suppressor gene ( LIMDI)

Recent Invited Talks ( Selected): February 2004- International Centre for Genetic Engineering and Biotechnology, Italy. IHFM International Forum Opening Lecture, Holland. April 2004 - Netherlands Pathology Association, American Association for Cancer Research. New Orleans. August 2004 – Cornell University Cancer Centre NYC. October 2004 – Institute of Human Virology, Baltimore, MD. November 2004- Head and Neck Cancer Forum, NYC

**Dr.Arjun R.Jevarajah**, M.A, MBBS MRCOG CCST RCOG Consultant Gynaecological Oncologist, St.Bartolomew's Hospital, Havering Hospitals NHS Trust, Newham Hospital NHS Trust. Educated at Cambridge University and King's College, University of London.

1987/91- Four year Residency Training Programme in Obstetrics & Gynaecology, Beth Israel Medical Centre, New York City. 1991/92- Senior House Officer – Combined Obstetrics & Gynecology Farnborough Hospital, Kent. 1992 / 93- Registrar Westminster/ Charing Cross Hospitals. 1993/94 - Registrar Basingstoke District Hospital. 1994 / 96-Research Fellow Ovarian Cancer Screening Unit / Gynaecological Oncology/ Senior Registrar St.Bartholomew's Hospital.1996/97- Fellow in Gynaecological Oncology, St.Bart. Hospital. 1997 – Elective Charing Cross Hospital, St.Marks Hospital. 1997/ 98 - Fellow in Gynaecological Oncology, The Royal Marsden Hospital.

Publications and Presentations: A total of 21 papers have been published and presented about 20 Cancer related talks. Also he has obtained prizes for his best presentations.

**Cllr. Colum Moloney, The Worshipful the Mavor of the LB of Brent.** The new Mayor of Brent assuming duties from today. Earlier he was the Deputy Mayor. This is the first Public event the new mayor is attending.

**Dr.M.Vetpillai** MBBS,FRCS ( Edin) FRCS ( Eng) - Surgeon, Watford Hospital.

In Sri Lanka 1980 / 82 worked as Surgeon Base Hospital Point Pedro. 1983 / 85 worked as Senior lecturer in General Surgery, University of Jaffna and Honorary Consultant Surgeon at the teaching hospital Jaffna. From 1986 working as Associate specialist in accident and emergency medicine at Watford Hospital.

**Mr.Robert Evans.** Member European Parliament

Robert Evans MEP was elected to represent the London Region in the European Parliament in 1999. Robert had previously been the MEP for the London North West

Constituency, made up of the London Boroughs of Brent, Harrow and Hillingdon from 1994 /1999.

Robert is the European Parliament Labour Party's lead member of Citizens Rights, Justice and Home Affairs Committee, the Romanian delegation and the South Asia delegation.

Born in Ashford, Middlesex in 1956, Robert was educated at local schools before gaining a Bed and MA from the London University. He then became a teacher and at the time of his election to the European Parliament, he was head of Crane Junior School in Hounslow.

Robert is also a Governor of Rabbsfarm Primary School in Yiewsley, a member of the Court of Brunel University, the Vice-President of the League Against Cruel Sports and the European Advisor to the National Union of Teachers.

In his limited spare time, Robert spends time with his family and enjoys skiing, playing cricket and hockey, visiting the theatre or cinema and spending what time is left with the lawnmower

**Mr.V.Sivagnanavel** F.R.C.S.,Eng., F.R.C.S.,Ed.(orth) Consultant Orthopaedic Surgeon

1971/ 77,worked as Resident Surgeon General Hospital.Jaffna ( Sri Lanka) 1977 / 79, Training in Orthopaedics in the U.K. 1979 / 85, Consultant Orthopaedic Surgeon, General Hospital Jaffna.

1985/ 97, Consultant Orthopaedic Surgeon, Bishop Auckland NHS Trust Durham, U.K. 1997/2002, Consultant Orthopaedic Surgeon, Homerton NHS Trust, London

**Mr.S.V.Moorthy.** Diploma in Public Finance and Management ( Cey). Chartered Secretary (Eng)

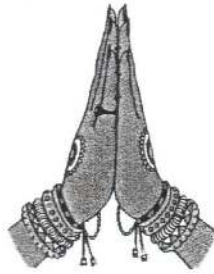
Deputy Chairman TR-TEC. Deputy Chairman TRAG. Active member of Voluntary Committees of Waltham Forest Borough.

## OTHER SERVICES PROVIDED BY 'TRAG'

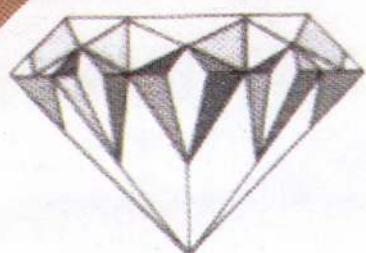
- Asylum and Immigration
- Housing & Welfare Benefits
- Access to Education and Training
- Routes to Employment
- General Welfare and Social Improvement
- Welfare of Women and Children

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**Fax: 020 8903 4887**



**SARAVANAA BHAVAN**  
INDIAN VEGETARIAN RESTAURANT

# The long awaited, Now at Wembley.

Saravanaa Bhavan is now in U.K. with its team to offer their Indian vegetarian delicacies at Wembley.

Enjoy your favorite food with your family at the restaurant, which provides quick and specialized table side service with our unique and world famous, secret recipe or, you want to just hangout with family and friends at home or outside?

*Pick it up or we deliver.* You can enjoy the dining experience wherever you want.

Banquet facilities offering full service for about a 100 members is available at Wembley with Bar, Dance Floor, Music and Multi cuisine Indian food.

Our Gujarati cuisine is ready to serve you all your favourite dishes. You now can enjoy our delicious Indian Sweets & Savouries with fresh fruit juices as well.



**SARAVANAA BHAVAN**  
INDIAN VEGETARIAN RESTAURANT

531-533 HIGH ROAD, WEMBLEY MIDDLESEX HA0 2DJ  
UNITED KINGDOM.

TEL: 020 8900 0777 FAX: 020 8795 3777  
[www.saravanabhavan.com](http://www.saravanabhavan.com)



*Taste the difference!*

## WORLDWIDE CHAIN OF OUR RESTAURANT

### India

Saravanaa Bhavan has 25 outlets in and around the city of Chennai and Tamilnadu. 3 outlets in New Delhi the capital of India.

### Far East

Kuala Lumpur, Singapore.

### Middle East

Abu Dhabi, Dubai, Sharjah, Bahrain, Muscat.

### Canada

Toronto

### USA

New York, New Jersey, Los Angeles, Sunnyvale.

### United Kingdom

London (East Ham, Wembley.)

Marketed by

**Indian Home Food  
AND BEVERAGES LIMITED**



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