

1. Project title
Support for Strengthening Medical Treatment Ability of Childhood Cancer in Developing Country
2. Country name
Socialist Republic of Viet Nam, Republic of Indonesia and other developing countries
3. Background
Eighty percents of childhood cancer patients are children in the developing countries. There are many problems such as delay of discoveries, misdiagnoses, lack of offer of treatment and treatment abandonment. The childhood cancer is still incurable disease in the developing countries. It is supposed to be 4,000 childhood cancer new patients in Vietnam each year. But there were approximately 1000 children in a year who had treated in Vietnam such as Hue central hospital, Ho Chi Minh Children's Hospital 1, Ho Chi Minh Children's Hospital 2 and National children hospital. Many childhood cancer patients were supposed to remain untreated, not diagnosed. And there were small numbers of specialists of pediatric cancer in Vietnam. The situation is same in many developing countries. From 2015 we have managed this project and supported medical treatment ability of the childhood cancer in Vietnam. We had become to know that many health care providers were eager to get some opportunities to learn about childhood cancer treatment.
4. Objective
To support for strengthening medical treatment ability of the childhood cancer in the pediatrics, pediatric surgery, radiotherapy, anesthesia, pathology and supportive care of leading hospitals about pediatric cancer treatment in Vietnam (Hue Central Hospital and Ho Chi Minh Children's Hospital 1, Ho Chi Minh Children's Hospital 2 and National Children Hospital), Indonesia, Myanmar, Mongolia and other developing countries. And we want to arrange a situation for making a consulting system based on internet infrastructure that is made by eSite Co.Ltd..
5. Program outline
<p>1. To support for strengthening medical treatment ability of the childhood cancer, we will make the local support in a few hospitals in Viet Nam and Indonesia. We will send a few Japanese professionals of childhood cancer.</p> <p>2. To have the medical training in Japan, a few trainees from Viet Nam and Indonesia or/and other developing countries will visit and study at NCGM and the other cooperation hospitals in Japan.</p> <p>3. We will set an arrangement for making a consulting system based on internet infrastructure.</p>
6. Implementation structure
6-1. Japanese side
National Center For global Health And Medicine(NCGM) Pediatrics, NCGM international medical cooperation Bureau, Japanese cooperation agencies, for examples; National Center for child health and development, Nihon University Itabashi hospital, Osaka city general hospital, Hyogo Prefectural Cancer Center, Kobe Children's Hospital, Kyoto prefectural university of medicine, Juntendo University and others. eSite Healthcare company Ltd.
6-2. Counterpart country side
Viet Nam: National Hue Central Hospital, Ho Chi Minh Children's Hospital 1, Ho Chi Minh Children's Hospital 2, Hanoi Children's Hospital and others. Indonesia : Gadjah Mada University Hospital. Myanmar : Yangon Children's Hospital, and other main hospitals of childhood cancer in other developing countries.

7. Indicator	
7-1. Output	<ul style="list-style-type: none"> · Trainees from developing countries (physician) ;6 trainees from 2 countries. · Teaching at the local site ; Dispatch of Japanese experts; 12 specialists total in 2 countries. · To newly start consulting system; in 1 sites in Indonesia.
7-2. Outcome	<ul style="list-style-type: none"> · Number of physicians who can practice skills acquired ; 6 doctors in this year. · Number of patients with childhood solid cancer undergoing medical treatment; in Hue Central Hospital ;10 patients in the first year, 20 in the 2nd year, 30 in the 3rd year. In Ho Chi Minh Children's Hospital: To start the chemotherapy for children with cancer. · Consultation number using consult system; 1 year 10 cases 2 institutions, 2nd years 20 cases 4 institutions, 3rd years 50 cases 6 institutions.
7-3. Impact	<ul style="list-style-type: none"> · Reduction of the mortality of leukemia and solid cancer in children · Formation of an international pediatric cancer treatment group · Initiation of international clinical trials for childhood cancer
8. Main activities	
8-1. Training in 2019	
1)	Send medical professionals to Vietnam and Indonesia, 1 week, 3 times a year to support for Strengthening Medical Treatment Ability of Childhood Cancer. Including follow up for trainee.
2)	Medical training in Japan: 6 trainees from Viet Nam and Indonesia visiting and studying at NCGM and cooperation hospitals in 4 weeks.
3)	Arrangement for making a consulting system based on internet infrastructure made by eSite Co. Ltd..
4)	Making contents for education of childhood cancer by using consulted cases through the consulting system.