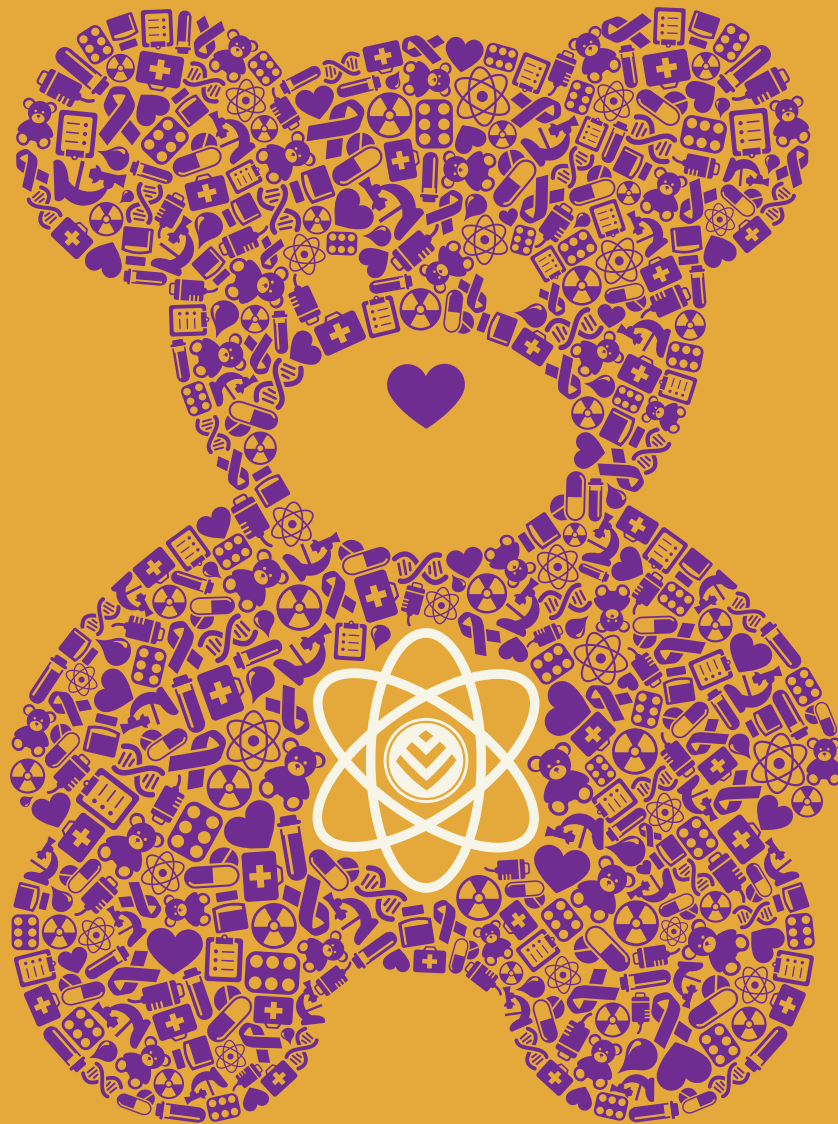


+ DISCOVERY HEALTH MATTERS

Childhood
cancer





Discovery Health Matters

Discovery Health Matters is a layman's guide to important, but often misunderstood topics in healthcare. The information contained in this document is for informational purposes only, and should not be used to replace professional medical advice, or be used to diagnose or treat a medical condition.



What is childhood cancer?

The majority of children's cancers are different to adult cancers and they respond differently to treatment. The associated risk factors for developing cancer are also different.

Children's cancers are rare, in South Africa only one in 600 children under the age of 15 gets cancer each year. The cure rates for children's cancers are higher than those for adults: About 70% (or 7 in 10) of all children can be cured.

Cancer is when cells grow out of control; it starts when a healthy cell turns into an abnormal cell and then multiplies. These abnormal cells grow very fast and crowd out healthy cells. Instead of dying off and being replaced like normal cells, cancer cells live longer. As they multiply, they damage normal cells and can move into different parts of the body. Some cancers affect only a specific area, while other types spread far from where they started.

The most common children's cancers are found in developing cells, such as blood and bone marrow (leukaemia), the immune system (lymphoma), and the brain and nervous system (brain tumour and neuroblastoma), kidneys, skeletal tissues (sarcomas) and eyes (retinoblastoma).



Treatment options

There are three main types of treatment for children's cancers: chemotherapy (oral or intravenous medicines), radiation therapy (x-rays), and surgery. Cancer treatment can be given either as one type or as a combination of the various forms of treatment.

Before deciding on which treatment is best for your child, your doctor will consider these factors, amongst others:

1. The type of cancer
2. The stage of the cancer
3. How fast it is growing
4. Whether it has spread to other parts of your body and if so, where and how far it has spread
5. Your child's age, symptoms and general health.



Treatment options (continued)

Chemotherapy

Chemotherapy (also called chemo) uses medicines that travel in the blood stream destroying or slowing the growth of cancer cells. Chemo can also be given before and after surgery and radiotherapy and it can also be given to reduce the symptoms caused by cancer.

Because chemotherapy attacks normal cells as well as cancer cells, most children react in some way to this form of treatment. But, normal cells repair themselves and most side effects disappear once treatment comes to an end. Children may continue going to school, playing with friends and enjoying outings between treatments, but they should avoid sick children and adults.

Chemotherapy side effects include anaemia, low white blood cell count, low platelet count, mouth ulcers, diarrhoea, constipation, nausea and vomiting, and hair loss.

Radiation

With radiation (also called radiotherapy), energy beams are targeted at the cancerous cells, to control growth and damage the cells resulting in the death of the cancerous cell. Radiation acts only in that specific area. Some of the healthy cells nearby may also be killed by radiation. Radiation can be used on its own, before surgery to shrink a lump, and / or after surgery to make sure all the cancer cells are gone.

Treatment is generally painless but can gradually cause some minor discomfort and can be frightening, especially for children.

It is important to discuss any possible side effects with your child's doctor.

Prior to starting radiotherapy, children will have a few visits with the radiation unit to plan their treatment. This may be simple or detailed and the level of complexity depends on the type of cancer and its location. After starting treatment, your child will see the doctor regularly to check his/her progress.

Surgery

Surgery can be used to help diagnose some cancers. Where possible, whole tumours can be removed. Surgery may still be done even if the cancer has spread to other parts of the body. Surgery can cure children of cancer if there is no spread of the disease to other organs or places in the body. Sometimes radiation or chemotherapy is used before surgery to shrink the size of the tumour, and after surgery to ensure all the cancer cells have been killed.



How medical aids typically cover the treatment of childhood cancer

Cancer is one of the conditions covered under the Prescribed Minimum Benefits (PMB). The Prescribed Minimum Benefit list is a set of conditions that all medical schemes, by law, must provide a basic level of cover for. This basic level of cover includes the diagnosis, treatment and costs of ongoing care. The aim of the Prescribed Minimum Benefits is to ensure that no matter what medical scheme or plan you're on, your basic needs will be taken care of. Schemes cannot charge you a co-payment or levy on a Prescribed Minimum Benefit provided you follow specific rules. Find out from your medical aid how your treatment can be paid in full.



Unique **benefits** offered by **Discovery Health** **Medical Scheme**

Discovery Health Medical Scheme has a dedicated oncology benefit through the Oncology Programme. Depending on which plan you've chosen, the Scheme covers the first R200 000 or R400 000 of your child's approved cancer treatment over a 12-month rolling cycle in full, up to the Discovery Health Rate. Cover is unlimited once your child's treatment costs go over this amount, but you'll need to pay 20% of the costs of all further treatment from your pocket. This amount could be more if your child's treatment cost is higher than the Discovery Health rate (that is, if you use a healthcare provider not in the Discovery Health network who charges more than the Discovery Health approved rate). This applies to all plans except KeyCare, where only approved Prescribed Minimum Benefit level treatment is covered in full up to the Discovery Health Rate.

Treatments included in the 12-month rand amount are:

- Chemotherapy and radiotherapy
- Technical planning scans
- Consultations with your child's cancer specialist
- Fees charged by accredited facilities
- Specific blood tests related to your child's condition
- Materials that are used in the administration of your child's treatment, for example drips and needles
- Medicine to treat pain, nausea and mild depression as well as other medicine used to treat the side effects of the cancer treatment (except schedule 0, 1 and 2 medicines)
- Stoma products
- Oxygen
- Radiology requested by your child's cancer specialist, which includes:
 - Basic x-rays
 - CT, MRI and PET-CT scans
 - Ultrasound, isotope or nuclear bone scans
 - Other specialised scans

Other needs related to your child's condition and treatment not covered by the Oncology Benefit will be paid from the available funds in your day-to-day benefits, for example wigs, which are deemed external medical items.

Bone marrow donor searches and transplants are paid for subject to review and approval. Discovery Health Medical Scheme will fund donor searches on approval through providers that have an arrangement with Discovery Health up to an agreed amount. If you are the KeyCare Plus and KeyCare Core Plans, you have access to local bone marrow donor searches once we have approved your transplant procedure and treatment. (Discovery Health Medical Scheme will not cover the costs of Scheme members who want to donate bone marrow to non-members of Discovery Health Medical Scheme.)

You may appeal for the costs of the tests your child had in order for the doctor to make a diagnosis to be paid as part of your Prescribed Minimum Benefits. You'll need to complete an out-of-hospital PMB appeal form. You can get this at: www.discovery.co.za or by calling: **0860 99 88 77**.

You can also appeal funding decisions: If you disagree with Discovery Health Medical Scheme's decision on the PMB cover you requested, there is a dispute process you can follow. Call: **0860 99 88 77** to request a dispute application form.

How to get the most out of your benefit:

Register on Discovery Care Oncology Programme

If your child is diagnosed with cancer, you need to register him or her on the Oncology Programme. To register, you or your child's doctor must send Discovery Health a copy of your child's histology results that confirm your child's diagnosis. Call Discovery Health on **0860 99 88 77**.

Check your benefits

Make sure you know which benefits apply to your child's specific diagnosis and treatment, whether it's in or out of hospital.

You can go to www.discovery.co.za, or call **0860 99 88 77**.

Use Discovery Health's network

You have cover from the Prescribed Minimum Benefits, but you must use a healthcare provider who is part of Discovery Health's network; and your treatment must match the treatments included as part of the defined benefits for your condition, otherwise you will have to fund a portion of the costs yourself (co-payment).

If your child's doctor is in the network, Discovery Health Medical Scheme will pay your child's approved treatment costs. If the doctor is not in the network, you will have to pay any differences between what is charged and what Discovery Health pays.

Call Discovery on **0860 99 88 77**, or go to www.discovery.co.za for a list of network doctors and hospitals.

Get approval first

If your child needs cancer treatment, your cancer specialist must send his or her treatment plan to Discovery Health for approval before starting the treatment. Discovery Health Medical Scheme will only fund your cancer treatment from the Oncology Benefit if your child's treatment plan has been approved and meets your Discovery Health Medical Scheme plan's terms and conditions.

Use approved treatments and medicines

When you use approved cancer treatment methods and medicines you won't be responsible for any co-payments. Discovery Health Medical Scheme does not pay for medicines and treatments that are not approved or registered by the Medicines Control Council of South Africa (MCC). This includes treatment that has not been sufficiently tested as well as herbal or traditional treatments.



What to **look out** for when you claim from **Discovery Health Medical Scheme**

Find out if your healthcare provider has sent your account so you don't duplicate the claim.

Make sure your account is sent to Discovery Health within four months from the date of service; otherwise they will be considered expired and will not be paid.

Ensure that the following details are on the account:

- Your membership number
- The service date (the date your appointment/service took place)
- Your healthcare professional's details and practice number
- The amounts charged for the consultation and any diagnostic tests
- The relevant consultation and procedure code and diagnostic (ICD-10) codes performed
- The name and birth date of the dependant the service was done for
- If you have paid the account upfront, attach your receipt or make sure the claim says 'paid'

Remember always to keep copies of your claims for your records. To see the status of your claim, you can go to www.discovery.co.za

We need the appropriate ICD-10 codes on accounts

All accounts for your child's cancer treatment must have a relevant and correct ICD-10 code for us to pay it from the Oncology Benefit. To ensure there isn't a delay in paying your doctor's accounts, it would be helpful if you double check to make sure that your doctor has included the ICD-10 codes.



Useful resources and additional information

- South African Children's Cancer Study Group – www.saccsg.co.za
- Cancer Index – www.cancerindex.org
- National Cancer Institute – www.cancer.gov/cancertopics/types/childhoodcancers
- CHOC Childhood Cancer Foundation SA –

CHOC provides direct practical help to children with cancer, from diagnosis onwards; including accommodation in CHOC Houses; support groups for parents; support to the state-funded academic treatment centres in the form of furnishings and equipment; support to the health professionals working in the field of paediatric oncology; advocacy and support into research studies and investigating the causes and treatment of childhood cancer.

Call: 086 111 3500 • Email: headoffice@choc.org.za • Visit: www.choc.org.za

- The South African Anxiety and Depression Group (SADAG) –

SADAG offers counselling and a referral network of recommended therapists. Call anytime from 8am to 8pm, 365 days a year, for any kind of mental health or emotional support.

Call: 011 262 6396 • Visit: www.sadag.co.za



Discovery claims and support numbers:

- Oncology preauthorisations email: MMD_Oncology@discovery.co.za
- Oncology preauthorisations fax number: **011 539 5417**
- DiscoveryCare oncology team: **0860 99 88 77**



As the parent of a child with cancer, you are the most important part of his or her treatment team. Not only are you her primary caregiver, you will become an advocate for your child's health. Your attitude and the way you tackle this challenge will have a great impact on how your child copes. Your child will look to you for clues and for guidance on how to behave.

Doctors say: A calm parent is a calm child.

If you are able to manage, to cope positively and be in control, your child will take up this attitude and it will help him to cope. Research confirms, the better the family can adjust to the diagnosis, the more likely the child will find ways to cope.





Glossary of **childhood cancer terms**

Benign tumour:

A non-cancerous lump of cells that does not invade nearby tissue or spread to other parts of the body. It can grow and cause problems by pushing on body parts that are close by.

Biopsy:

A process of removing a sample of tissue or cells from the body for analysis.

Bone marrow:

The spongy tissue inside cavities of long bones of limbs, ribs, pelvis and hips, here stem cells develop into the mature blood cells (red blood cells that carry oxygen through the body, the white blood cells that fight infections, and the platelets that help with blood clotting).

Cancer:

An uncontrolled growth of abnormal cells.

Chemotherapy:

Treatment with medicines to destroy cancer cells. Often used in conjunction with surgery or radiation.

CT scan:

A method of imaging and viewing the anatomy of tissues inside the body using x-ray beams. A computer puts all the pictures together to show any tumours. (CT or CAT stands for: Computerised Axial Tomography.)

Electrolytes:

Minerals that your body needs to keep cells healthy.

Fever:

A complex physiologic response to disease characterised by a rise in core body temperature.

Immune system:

The body's defence system against infection and germs.

Immunosuppression:

When your immune system is not working normally and you are more at risk of getting infections.

Leukaemia:

A cancer of blood cells usually starting in the bone marrow. There are several types of leukaemia.

Lymph or lymphatic system:

Is made up of lymphatic organs such as the bone marrow, spleen, tonsils, thymus and a network of glands and vessels that carries lymph – a fluid that contains fluid from tissues together with lymphocytes and a few red blood cells.

Lymphocyte:

A type of white blood cell that helps protect the body against foreign substances by making antibodies (B-lymphocytes) directly fighting infections and cancers (T-lymphocytes) and keeping up the immune system.

Lymphoma:

A type of blood cancer affecting white blood cells that form part of the immune system. Lymphoma may develop in the lymph nodes, spleen, bone marrow, blood or other organs.

Malignant tumour:

A cancerous growth, which tends to invade and destroy surrounding tissue and/or spread to other parts of the body.

Metastasis:

When cancer spreads to other parts of the body. (You would say it has metastasised.)

MRI:

A procedure in which magnetic waves are sent through the body to get a picture of a tumour. The scan itself is painless, but the MRI machine is noisy and they must lie in a tunnel for a short time. (MRI stands for: Magnetic Resonance Imaging.)

Neutropaenia:

An abnormally low number of neutrophils (a type of white blood cell), which means the person is more susceptible to infections.

Oncologist:

A doctor who specialises in cancer treatment.

Oncology:

The study and management of cancer, which involves the diagnosis, therapy and medical care of people with cancer.

Osteosarcoma:

A cancer of the bone.

Platelet:

A white blood cell that helps stop bleeding.

Radiology:

The scientific discipline of medical imaging using x-rays, ultrasound scanning, MRIs and other scans used to investigate, diagnose and treat medical conditions including some cancers.

Radiotherapy/ radiation therapy:

The use of high-energy rays to eliminate or shrink cancer cells before and/or after surgery, or sometimes as the main treatment. Radiation destroys or slows down the growth of abnormal cells. Normal cells should suffer little or no damage in the long term, but short-term damage is a side effect.

Red blood cells:

Blood cells that pick up oxygen from the lungs and transport it to tissues throughout the body.

Relapse:

The return of a disease after a period of remission.

Remission:

The period when cancer abates or lessens in severity.

Retinoblastoma:

Cancer of the eye (retina) that generally occurs in children younger than six.

Sarcoma:

Cancer of supportive or connective tissue – muscle, bone, cartilage, fatty tissue.

Tumour:

An abnormal lump or mass of tissue. Tumours can be benign (not cancerous) or malignant (cancerous).

Ultrasound:

Ultrasound waves are sound waves that the human ear can't hear. A special machine directs the waves at a certain part of the body. An image from the waves shows where there is a tumour.

Veins:

Blood vessels that carry blood from the tissues and organs back to the heart.

White blood cells:

Blood cells that protect the body against foreign substances. They are divided into groups with different jobs.

Wilms' Tumour:

A type of cancer of the kidney, that typically occurs in children (also known as nephroblastoma).

X-ray:

Radiation that goes through body tissues and is used to get an anatomical image picture of what's inside, it can also be used in the treatment of some cancers.



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