

A combined ICEDOC- Georgian Cancer Prevention Centre workshop and consultative visit, 21-28 July, 2000, Tbilisi and Batumi, Georgia.

(ICEDOC is the International Campaign for Establishment and Development of Oncology Centers)

Toward Global and Balanced Strategies for Cancer Control with Special Emphasis to Prevention and Palliative Care in the Republic of Georgia.

Consultants participating in ICEDOC's Mission to Tbilisi and Batumi , Georgia July 21-28 , 2000:

ICEDOC-Georgia :

- Rema Gvamichava, Professor, Cancer Prevention Center. *Tbilisi, (Georgia).*
- Ioseb Abesadze, M.D. – Cancer Prevention Center. *Tbilisi, (Georgia).*

ICEDOC :

- Ahmed Elzawawy, M.D., Professor Suez Canal University, Port Said, Egypt and President, ICEDOC
- Pamela Haylock, R.N., M.A. Oncology Consultant, Medina,Texas (USA) and Executive Director, ICEDOC
- Malgorzata Krasuska, Ph.D., Assistant Professor, Nursing Faculty, University School of Medicine, Lublin, (Poland)
- Daniel Rutz, Media Consultant, Former Senior medical correspondent , CNN , Atlanta, Georgia (USA)
- Aziza Shad, M.D., Professor, Hematology/Oncology, Georgetown University, Washington, D.C. , (USA)
- Amita Sanchetee, M.D., (India)
- Suresh Sanchetee, M.D., Medical Director, Sanchetee Hospital, Jodpur, (India)
- Peter Tonhaeuser, Nordion MSD, (Germany)

Upon the invitation of Cancer Prevention Center(Tbilisi, Georgia) a combined Georgian Cancer Prevention Center/ICEDOC workshop. The ICEDOC & Georgian consultants who shared in this workshop and visit are the authors of this article. The program consists of workshop, lectures panel discussions, visits to cancer centers and hospitals, exchange of views with colleagues, meetings with health authorities, assessment of present oncology care facilities with participation of Georgian colleagues, several meetings with media to mobilize the community resources and enhance the information about awareness of cancer prevention and problems

COUNTRY AND POPULATION DATA

Georgia is a hilly and mountainous country situated on the eastern shores of the Black Sea, which stretches into the Southern flanks of the Caucasus Mountain. It covers an area of 70 thousand square kilometers and has a population of 5.5 million, 43 % of whom live in rural

areas. The Russian Federation, on the East borders it on the North by Azerbaijan, on the South by Armenia and on the South West by Turkey. Together with Azerbaijan and Armenia it constitutes the Transcaucasian Region. More than 60 nationalities reside in Georgia.

Following the disintegration of the former USSR, Georgia was among the first Soviet republics to gain formal independence and sovereignty on April 9, 1991.

Independence with its rapid and cardinal changes caused great number of difficulties in Georgia influencing all spheres of life. Abrupt collapse of socialist system fully distorted social guarantees and benefits. This process appeared to be very painful especially for healthcare system. Heavy social-economic crisis, flow of refugees and total unemployment made the greater part of population unprotected, undeserved and thus minimized their demand on medical establishments.

The reform, which is targeted for providing population with modern medical service and necessary preventive measures, at present moment is at the stage of implementation and aims to liquidate the existed gaps. The reform places high priority on improvement of oncology service by early diagnostics and prevention, but in the conditions of slim financing and high level of corruption, its successful realization meets a lot of problems.

GNP. US\$ 5. 1 billion (est 1998)

GNP per capita: US\$ 930 (1998)

AGE DISTRIBUTION

The age distribution is more European than developing world with no predominance of children.

LANGUAGE

The state language is Georgian, with its unique alphabet. Russian is still used for external communication. Till recently, few Georgians have knowledge of English, French or German languages but there are growing number of people who learn and speak foreign languages, particularly English.

CANCER STATISTICS

There is no National Cancer registry, but available data showed the incidence of 4300 cancer cases annually. Surely the real incidence is higher than this data reveals. The most common cancers are among adult females – cancers of the breast, cervix, genitals, lung, skin (non-melanomas) and colorectal. Among men, cancers with the highest incidence are those originating in lung, stomach, colorectal, prostate, skin, and larynx.

MAIN CANCER SERVICES IN GEORGIA

There are three main cancer centers in Georgia – Tbilisi National Cancer Center, Batumi Oncology Center and Kutaisi Oncology Dispenser.

SURGERY IN HOSPITALS

Surgical oncology operations are performed in the stated oncology centers. There are some surgical procedures performed in other governmental and private clinics.

CHEMOTHERAPY

Most of the essential chemotherapy drugs are available, but patients are expected to pay part of the cost of cytotoxic drugs. We see that what is needed in this area is training regarding medical oncology of nurses and young physicians in addition to promote progress in medical oncology and pediatric oncology.

RADIOTHERAPY

Radiotherapy is available only in Tbilisi National Cancer Center, Batumi Oncology Center and Kutaisi Oncology Dispanser. A short report about the equipment and facilities are presented at the end of the report (Annex I).

PRIORITIES

According to the point of view to the Georgian colleagues and ICEDOC consultants, the most essential and immediate programmatic needs are: renovation of facilities and equipment, training of personnel (physicians, nurses, administrators, technical personnel), implementation of new technologies, provision of information, creation, implementation, and/or further refinement of programs of cancer prevention, early detection and palliative care. (There is no hospice or palliative care program in Georgia.) Especially pressing is the elevation of the level of nursing care available to persons affected by cancer in this region.

RECOMMENDATIONS AND OUTCOMES

1. Conduct a professional educational needs assessment of all integral disciplines involved in the provision of cancer services.
2. Continuing education curriculum development that matches the needs identified in the needs assessment.
3. Create and implement professional education programs needed to enhance cancer care services in Georgia.
4. Creation and implementation of a program to promote palliative care services: A pilot project could be implemented in Tbilisi. External funding mechanisms such as grants will be pursued to support this project.
5. Creation and implementation of a program to promote a "culture of health" among Georgian women. Such a program could focus on prevention and early detection of cervical cancer, early detection of breast cancers, and prevention or cessation of tobacco use among women in general, teen-age girls and pregnant and lactating women in particular.
6. Creation of a formalized collaboration between ICEDOC and the Georgian Cancer Prevention Centre as an ICEDOC sub-committee in Georgia.
7. Bring the assessment of upgrading the quality of radiation therapy equipment to the attention of the International organizations, particularly the International Atomic Energy Agency (IAEA).
8. Enhance visibility of research potential via collaboration with International Network for Cancer Treatment and Research (INCTR).
9. Promote educational programs for pediatric oncology.

10. Create and develop the network of communications and collaboration via telemedicine technology.
11. Create a radiation therapy patient and family education tool in the Georgian language.
12. To assist the Georgian Cancer Prevention Centre in collaboration with some organization such as the EORTC Biologic Therapeutics Development Group (BTDG).
13. Promote a working relationship with the media to promote prevention and early detection of the cancers that affect the Georgian population.

ICEDOC - Cancer Prevention Center July 22- 24 2000

Tbilisi, Georgia

Meeting with participants of the workshop in the Clinic of Pediatric Hematology

Peculiarities of Cancer morbidity in Georgia /Prof. Z. Zarkua NCC, – Georgia/

*Radiation Background and Oncology Diseases of Population in Western Georgia
/G. Eradze, TSMU, N. Vepkhvadze, TSMU, chair of Preventive Medicine – Georgia/*

- Principles of management of psycho- social problems of cancer patients.
- Improving the quality of cancer care.
- Practical aspects of chemotherapy administration .

*/ Dr.Malgorzata Krasuska , Ph.D. Cancer Care, Adjoin Professor of Oncology Nursing ,
University of Lublin , Poland./*

*ICEDOC and it's role in Cancer Prevention - / Professor Dr. Ahmed Elzawawy , president ,
ICEDOC. /*

*Positron Emission topography (PET) as a tool in Clinical Oncology . Let us speak about
one of the technology 21st century. / Professor Dr. Ahmed Elzawawy, ICEDOC. /*

*National Model of Cancer Prevention: Conception – V. Tkeshelashvili – National
Association of Cancer Control. Georgia/*

*Successful Cancer Prevention and Early Detection Programs – two parts /Pamela Haylock ,
. Oncology Consultant USA ,Secretary General of ICEDOC./*

*“Make Case Against Cancer” / Dan Rutz - Chief ICEDOC adviser for Organizational and
Media Affaires and former Senior Medical Correspondent , CNN , USA //*

Cancer Control: Turning Words into Action /, Dan Rutz/

Glaxo-Wellcome pharmaceutical company - information /Zurab Natrosvili, Georgia/

A balanced cancer control strategies in the new millenium and ICEDOC - first parts /
Professor Dr. Ahmed Elzawawy , president , ICEDOC. /

State Program of Primary Detection of Cancer Diseases /Prof. Z. Zarkua /

Modern Chemotherapy Equipment - / Peter Tonhaeuser- MDS Nordion Area Sales
Manager

Role of Molecular Markers in Cancer Prevention / Prof. G. Burkadze -TSMU, Georgia/

Medical Treatment Based Mainly on Outpatient Regimes and Prescriptions for Common
Cancers / Dr. Suresh Sanchetee, (India), Chief Medical Oncologist and managing Director,
Cancer Institute, JODPUR [India]

Cervix Carcinoma and early diagnosis - /Dr. Amita Sanchetee, Gynecologist and
Obstetrician, Managing Director Cancer Institute Jodpur, India /

Pediatric Hematology / Professor Aziza Shad , Head of Pediatric Hematology and bone
Marrow transplantation department , George Town University, Washington D.C. , USA
and Consultant , ICEDOC and INCTR /

Cancer Trends in Georgia(NIS) need for urgent referral – A. Kokrashvili, TSMU, faculty of
internal medicine- Georgia/

Closing speech - Rema Gvamichava . NCC, CPC – Georgia

ICEDOC - Cancer Prevention Center July 25- 26 2000

Batumi, Georgia

Peculiarities of Cancer morbidity in Georgia /Prof. Z. Zarkua NCC, – Georgia/

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Carcinoma Cervix and early diagnosis - /Dr. Amita Sanchetee, Gynecologist and Obstetrician, Managing Director Cancer Institute Jodpur, India /

Pediatric Hematology / Professor Aziza Shad , Head of Pediatric Hematology and bone Marrow transplantation department , George Town University, Washington D.C. , USA and Consultant , ICEDOC and INCTR /

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Closing speech - Rema Gvamichava . NCC, CPC – Georgia

(ICEDOC belongs to all. ICEDOC is a message of scientific cooperation in all fields against cancer and love for all!)

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The Georgian participants Consultants the combined ICEDOC- Georgian Cancer Prevention Centre workshop in Tbilisi:

Avtandil Jorbenadze - Minister of Healthcare of Georgia

Ramaz Yrushadze – Professor, Head of Public Health Department,

Revaz Vepkhvadze – Professor, Director of National Cancer Center

Zurab Devdariani – Professor, Director of National Cancer Center in clinical field

Zaza Zarkua – Professor, Director of National Cancer Center in the field of Programs

Vasil Tkeshelashvili – National Association of Cancer Control

Eliso Gedevanishvili – Professor, Department of Chemotherapy Planning

George Gedevanishvili –UMCOR

Ramaz Khecuriani – Rector of Tbilisi State Medical University (TSMU)

Nini Vepkghvadze – Professor, TSMU, chair of Preventive Medicine

Baadur Mosidze – Professor, Institute of Surgery

Tengiz Axmeteli – Professor

Gia Mukhashavria – Center of proctology

Gela Mukhashavria – Center of proctology

levan Bakhtadze - Professor, Clinic of Pediatric Hematology

Asmat Shengelaia - Professor, Clinic of Pediatric Hematology

George Burkadze – Professor -TSMU

Kokrashvili, TSMU, faculty of internal medicine

Zurab Natroshvili – Representative of British Pharmaceutical Company Glaxowellcome in Georgia

Rema Gvamichava – Cancer Prevention Center, Member of Supervisory council of National Cancer Center, Professor.

The Georgian participants Consultants in the combined ICEDOC- Georgian Cancer Prevention Centre workshop in Batumi:

Minister of Healthcare of Ajaria- **Professor** Akaki Beridze

Rector of the Medical **Ecology Institute** of Batumi –Academician Tamaz Surmanidze

Director of **Batumi Oncology Center-Memed** Gincharadze

The Chief Internist of Ajaria-David Zoidze

The Deputy of Minister of Healthcare of Ajaria-Merabi Kvicia

The Reanimatologist of Ajaria-Temuri Peshkovi

The Chief Hematologist of Ajaria –Revaz Mikeladze

The Chief specialist in the field Pathologies -Juri Choidze

The Chief of the Surgery dep. of Central Clinical Hospital of Batumi-Zurab chihlaze

The Chief of Pediatric out-patient Clinic of Batumi-Tina Dania

The Chief doctor of clinical Hospital of Batumi-Rezo Bolkvadze

The Chef inspector of “Mother –Ghild” Health and prevention field-Elida Breus

The head of the Comity of health Care –Makvala Mardalishvili

The Chef of the Obstetrics house of Batumi- Nanuli Qiqava

The Head of the department of Women consultation-Jujuna Culukidze

The Head of the newborn’s department (neonathology)-Manana Munjiri

The Chief otolaryngologist of Ajaria- Dursun Diasamidze

INFORMATION ABOUT BATUMI ONCOLOGY CENTER

Batumi Oncology Center serves population of Ajaria (400000) and Guria (300 000) region.

Oncology Center in Batumi has the following departments: clinical (for 65 beds), radiology, dispensary,

labs: clinical, cytological, hysto morphological. The clinical department serves gynecological, urology, laryngology patients. Those who need are operated here.

Approximately 3500 patients offer the dispensary per year. In 1999 369 patients were diagnosed for primary cancer.

Among them:

Breast cancer- 85 cases

Lung cancer – 90

Skin cancer – 40

Urinary bladder – 25

Pancreatic cancer – 17

Malignant lymphoma –17

Rectum cancer – 13

Liver cancer – 10

Cervix cancer – 8

Cancer of body uterus - 7

Testicles cancer – 6

Kidney cervix -6

338 patients were operated in 1999. Among them:

Breast cancer – 65

Stomach cancer – 23

Urinary bladder – 19

Abdominal cavity – 22

Larynx cancer - 12

Ovary cancer – 10

Vulva cancer – 1

Skin and under skin tissue – 28

Non- malignant diseases – 150 operations

Structure of cases of morbidity among men in Ajaria (1982-1992)

- I. lung cancer
- II. skin cancer
- III. stomach cancer
- IV. larynx cancer
- V. urinary bladder
- VI. colorectal cancer
- VII. prostates cancer
- VIII. lymphoma cancer
- IX. leukemia cancer
- X. liver cancer

Structure of cases of morbidity among women in Ajaria (1982-1992)

- I. breast cancer
- II. skin cancer
- III. cervix cancer
- IV. stomach cancer
- V. ovary cancer
- VI. colorectal cancer
- VII. cancer of body uterus
- VIII. lung cancer
- IX. leukemia
- X. non-Hojkins lymphoma

The main 5 cancer localization among the Ajarian population are as follows:

- I. lung cancer
- II. skin cancer
- III. breast cancer
- IV. genital cancer
- V. stomach cancer

During 1999 :

Radiotherapy was applied to 170 patients

Chemotherapy – to 500 patients

The following preparations were used for chemotherapy: Cyclophosphani, Methotrexate, Vincristine, 5-Fluorouracil, Adriablastine, Adreamicine, Dactinomycin, Vepezite, Prospidine, Bleomycin, Vinblastine, Platidiamine, Carboplatin, Phlutamidi, Nathulani, etc.

The main problems and needs of Batumi Oncology Hospital

1. Obsolete Radiotherapy apparatus LUCH-1. (available for dismantling, resource is to be buried.)
2. No mammography
3. No ultra sound apparatus
4. Endoscopy apparatus is obsolete

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**Annex1 : Short Summary about Radiation Oncology In Georgia .
By: Ahmed Elzawawy , President of ICEDOC.**

Postgraduate education for radiation oncologist:

In the past, postgraduate education was done in Russia. Nowadays, there are problems and no efficient plan for postgraduate education in the field of radiation oncology. However, we emphasize here (as in many parts of this report) that is not an obstacle to stop development. It is an argument to encourage establishment of collaboration and co-operation in the field of training and education.

(P.S . We noticed that in general, the program for specialization in oncology is 6 years, the first 4 years , the Post graduates have rotation in different branches in oncology, then to have the last 2 years in subspecialty in one subspecialty only, for example radiation oncology. In fact, one of suggestions of Ahmed Elzawawy, included in his presentation “Professional cancer education” during the World Health Organization symposium entitled “Cancer Strategy in the new millennium”, 19-20 October 1998, London, and published among the abstracts of the meeting, (Cancer Strategy ,1999;1: 47) , Dr. Elzawawy, suggested that the first postgraduate certificate should be in most of countries as clinical oncology with abilities to do cancer management by chemotherapy and radiotherapy. Then later on it could be subspecialized. The number of years was not specified by Dr. Elzawawy, it could be left for different countries, but it should be at least 3 years of well-planned curriculum and training. This is just a comment on the condition and difficulties of postgraduate training of Georgia and this should a motive for brain storming ideas and implementation and design of efficient curriculum, and training to reach the level of most of European and American qualities. But . It should be tailored to fit the needs in Georgia and Mid Asia. It is a call for all including ICEDOC to cooperate.)

Radiation Physics:

The same call is applied for the professional education and medical physics, therapy radiographers, and oncology nursing. Moreover, the same call is applied for all specialties of oncology particularly surgical oncology, pathology, and imaging, in order to cover the needs of the three cancer centers in Tbilisi, Kutaisi , and Batumi.

Radiotherapy facilities:

There are 3 radiotherapy departments in the 3 cancer centers : In Tbilisi, Kutaisi , and Batumi.

We should emphasize that our Georgian colleagues are grateful for help and support of IAEA, but we hope that these facilities should be increased, mainly by IAEA and other help.

Radiotherapy facilities in Tbilisi:

The department is located in the national cancer center that was established in 1977.

Condition of the national cancer center: it contains 614 in-patient beds. The building has lack of funding for maintenance, but it could operate better with some funds for maintenance.

Equipment: 1) Linear accelerator: Leningrad 1990. 15 Mev , that never operated. The large bunker where the accelerator was installed is large, but the protection should be revised. As a space, it could be suitable for new functioning machine. 2) Cobalt units: there are 3, One of them are (Agat) is a Russian machine, the new Russian source is provided by IEAE last year. The other 2 machines are Rokus , Russian machines that need change of source. 3) There are also x-ray unit 250 KiloVolts, working however it needs some regular maintenance for pipes. The same for superficial x-ray therapy (40-50 KV). 4)Brachytherapy: High dose rate Agat 1992 was not working till last year, Russian engineers repaired it. High dose rate brachytherapy 1978, not working since 1988. Manual loading Brachtherapy using radium is not used now, however, there are 12 tubes containing 15 g of radium ²²⁶ that should be subjected for dosimetry for leakage, if there is a leakage and for the decision of its fate.

Planning system: there is planning system (Rocks) offered by the IAEA.

Imaging: 2 x-ray machines are used in localization of fields of irradiation.

CT: there are 2 available CT. One in Tbilisi, and the other one is in Rostave, near Tbilisi

MRI: Available in independent units in Tbilisi

Nuclear medicine: There is no functioning gamma camera in Tbilisi.

Thermography: Two Thermography units still functioning. The recent one, delivered from Japan on 1997 and working since 1998.

Batumi:

The hospital that contains the department of oncology is relatively in a good condition.

Bunkers: A bunker that fits Cobalt machine.

Equipment:

One cobalt machine installed on 1967, it is not functioning, and the source needs safe disposals as it is most probably still present in the machine. There is also 125 KV machine used for superficial tumors.

Recommendations for Batumi:

There is a real need for megavoltage machine in Batumi

Kutaisi:

According to the information that we have, and there is 120 KV machine is used for superficial lesion. There is a need for a megavoltage machine.

Summary of main needs and recommendations for radiotherapy in Georgia:

- 1- A need for co-operation to establish more efficient curriculum of professional education and practical training in all fields related to radiation oncology (radiation oncologist, medical physicists, technician, engineers and maintenance, nursing)
- 2- A need for 3 megavoltage machines; one for Tbilisi and one for Batumi and one for Kutaisi as an addition to the cobalt machine in Tbilisi.
- 3- Facilities and equipment for mould room (low melting point alloy beam shaping equipment) blocks for shielding, instruments for body contourer and immobilization system for patients.
- 4- Two Brachytherapy machines, one in Tbilisi and one in the region of west Georgia.
- 5- The need for more support in field of equipment and training in the field of dosimetry, planning, imaging and protection.
- 6- The ICEDOC expresses its appreciation to the different support given to Georgian centers by IAEA and re-express our thanks to Dr. Vic Levin, head of applied radiation biology and radiotherapy section, division of human health IAEA for his guidance and helping ICEDOC by information.
- 7- It is an occasion to call IAEA and different organizations to co-operate and support more the departments of radiation oncology and the very enthusiastic Georgian colleagues.

It is a very brief note and for further details please contact Prof. Dr. Ahmed Elzawawy (email: worldcooperation@gmail.com and website www.icedoc.org & www.icedoc.net & Mobile +20 100 514 00 65)

Annex II:

Personalities met in Tbilisi :

Avtandil Jorbenadze - Minister of Healthcare of Georgia

Amiran Gamkrelidze- Professor, First Deputy Minister ,Ministry of Health and Social Affairs of Georgia

Ramaz Yrushadze – Professor, Head of Public Health Department,

Revaz Vepkhvadze – Professor, Director of National Cancer Center

Zurab Devdariani – Professor, Director of National Cancer Center in clinical field

Zaza Zarkua – Professor, Director of National Cancer Center in the field of Programs

Tamar Beruchashvili- Deputy Minister ,Ministry of foreign affairs of Georgia.

Vasil Tkeshelashvili – National Association of Cancer Control

Eliso Gedevanishvili – Professor, Department of Chemotherapy Planing

George Gedevanishvili –UMCOR

Ramaz Khecuriani – Rector of Tbilisi State Medical University (TSMU)

Nini Vepkghvadze – Professor, TSMU, chair of Preventive Medicine

Baadur Mosidze – Professor, Institute of Surgery

Tengiz Axmeteli – Professor

Gia Mukhashavria – Center of proctology

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levan Bakhtadze - Professor, Clinic of Pediatric Hematology

Asmat Shengelaia - Professor, Clinic of Pediatric Hematology

George Burkadze – Professor –TSMU

Michael Shavdia , M.D, Ph.D., Senior Scientific Worker ,Oncology Department.

Kokrashvili, TSMU, faculty of internal medicine

Zurab Natroshvili – Representative of British Pharmaceutical Company Glaxowellcome in Georgia

Rema Gvamichava – Cancer Prevention Center, Member of Supervisory council of National Cancer Center, Professor.

Personalities met in Embassy of USA, Georgia:

Personalities met in Batumi

Minister of Healthcare of Ajaria- Professor Akaki Beridze

Rector of the Medical Ecology Institute of Batumi –Academician Tamaz Surmanidze

Director of Batumi Oncology Center-Memed Gincharadze

The Chief Internist of Ajaria-David Zoidze

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The Head of the department of Women consultation-Jujuna Culukidze

The Head of the newborn’s department (neonathology)-Manana Munjiri

The Chief otolaryngologist of Ajaria- Dursun Diasamidze

Personalities met in Embassy of USA, Georgia:

Sandra Clark ,First Secretary, Political and Economic affaires.

Catherine Fisher , United States Agency for International Development(USAID) ,Regional Health Specialist
, Caucasus

Nino Kumsishvili, Commercial Assistant

Personalities met in “Open Society- Georgia Foundation”

Michael Chachkunashvili , Executive Director