المركز الوطني لعلاج وأبحاث السرطان
National Center for Cancer Care & Research
عضو في مؤسسة حمد الطبية
A Member of Hamad Medical Corporation

NEWS & VIEWS

Nov. 2025 Volume No. 10

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	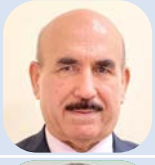	**Dr. Kakil Ibrahim Rasul**	• Senior Consultant, Hematologist/ Oncologist • Continuous Professional Development Officer (CPD officer)
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WELCOME MESSAGE

It is with great pride that I welcome you to Edition 10 of the NCCCR Newsletter. This landmark issue celebrates the power of achievement, innovation, and awareness in advancing cancer care in Qatar.

This year, NCCCR reached a defining milestone by winning the Managing Director's Award at the Stars of Excellence 2025. The recognized project, "From Delay to Precision: A Lean Redesign of Chemotherapy Services," exemplifies our commitment to continuous improvement and operational excellence. By optimizing workflows, minimizing waiting times, and enhancing precision in chemotherapy delivery, this initiative has transformed the patient experience and set a new benchmark across Hamad Medical Corporation. This recognition, the highest corporate distinction, reflects the dedication, teamwork, and patient-centered culture that drive every success at NCCCR.

Our achievements this year extended beyond our walls. At the Person-Centered Care Middle East Forum 2025, NCCCR's Oncology Department proudly earned two prestigious awards for the projects "Building Continuity in Survivorship" and "Onco-Geriatric Collaboration." These initiatives highlight our pioneering role in integrating oncology with primary and geriatric networks, ensuring that every patient receives coordinated, compassionate, and holistic care throughout their cancer journey. They represent not only clinical excellence but also a deep commitment to humanity and empathy in medicine.

Alongside these awards, NCCCR continues to lead in awareness, education, and community outreach. Through events such as October in Pink and national initiatives like the Pink Walk 2025 in collaboration with the Qatar Cancer Society and Q-SOINS, our teams have engaged the community in meaningful dialogue about prevention, early detection, and survivorship. These campaigns remind us that the fight against cancer extends beyond hospitals—it lives in classrooms, workplaces, and families. Awareness is our most powerful tool, and together we are building a culture where early detection and compassion go hand in hand.

Every page of this edition reflects the collective spirit of NCCCR — the physicians, nurses, scientists, and allied professionals who embody excellence every day. Their dedication continues to position Qatar as a regional and global leader in oncology, innovation, and patient advocacy.

As we celebrate these accomplishments, let us also renew our shared mission: to advance cancer care through healing, discovery, and partnership, while empowering every individual to take part in the journey of awareness and hope.

NCCCR ONCOLOGY WINS TWO PRESTIGIOUS AWARDS AT PERSON-CENTERED CARE MIDDLE EAST FORUM 2025

The National Center for Cancer Care and Research (NCCCR) proudly achieved double recognition at the Person-Centered Care (PCC) Middle East Forum 2025, receiving two prestigious awards that celebrate excellence in patient-centered innovation and multidisciplinary collaboration.

Under the leadership of Dr. Salha Bujassoum Al-Bader, Chairperson of Medical Oncology and Palliative Care Medicine, NCCCR's oncology team presented two outstanding projects:

- "Building Continuity in Survivorship: A Person-Centered Model Integrating Oncology and Primary Care Networks in Qatar"
- "Onco-Geriatric Collaboration: Scaling Person-Centered Cancer Care"

These award-winning initiatives demonstrate NCCCR's commitment to advancing holistic, coordinated, and compassionate cancer care. By integrating oncology services with primary and geriatric care, both projects enhance continuity, improve patient outcomes, and promote a culture of person-centered excellence across Qatar's healthcare system.

This remarkable achievement reflects NCCCR's alignment with Hamad Medical Corporation's vision of delivering world-class, person-centered care and reinforces its role as a regional leader in oncology innovation and quality improvement.

NCCCR WINS MANAGING DIRECTOR'S AWARD AT STARS OF EXCELLENCE 2025

The National Center for Cancer Care and Research (NCCCR) has proudly received the prestigious Managing Director's Award during the Stars of Excellence 2025 ceremony. This distinguished honor recognizes the most outstanding project across all categories, celebrating exceptional innovation, teamwork, and impact on patient care.

The winning initiative, titled "From Delay to Precision: A Lean Redesign of Chemotherapy Services at NCCCR," demonstrated remarkable success in transforming chemotherapy delivery processes. By applying Lean principles, the project streamlined workflows, reduced waiting times, and enhanced the precision and efficiency of care for oncology patients.

This recognition underscores NCCCR's unwavering commitment to advancing excellence in cancer care, patient experience, and operational performance—reflecting Hamad Medical Corporation's vision of delivering world-class healthcare in Qatar.


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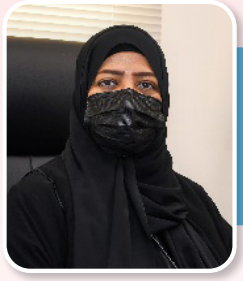
نجوم التميز
Stars of Excellence
MANAGING DIRECTOR'S AWARD


HEALTH – QUALITY AND PATIENT SAFETY
STAR OF EXCELLENCE AWARD

OCTOBER IN PINK:

ADVANCING BREAST CANCER CARE IN QATAR



DR. SALHA BUJASSOUM AL-BADER

Chairperson of Medical Oncology and Palliative Care Medicine, A/Chair of Precision Medicine Committee Clinical Leads of Breast Cancer at NCCCR, and Director of Cancer Genetics

Every October, the world unites under the color pink to raise awareness about breast cancer, the most common cancer affecting women globally. It is a month dedicated not only to awareness, but also to education, early detection, and celebrating the strength of survivors. In Qatar, this mission is embraced wholeheartedly, with the National Center for Cancer Care and Research (NCCCR) standing at the forefront of innovation and comprehensive care.

Breast Cancer in Focus

Breast cancer accounts for nearly one-third of cancer diagnoses among women worldwide. Thanks to continuous advancements in screening and treatment, survival rates are steadily improving. Early detection through mammography, ultrasound, and MRI has proven lifesaving, and when paired with cutting-edge therapies, outcomes are stronger than ever.

Qatar's Commitment to Excellence

At NCCCR, breast cancer care is guided by the latest evidence-based practices and supported by world-class technology. Our center offers a full spectrum of services — from early screening programs and genetic counseling to advanced imaging, surgery, chemotherapy, immunotherapy, radiation

therapy, and targeted treatments.

State-of-the-art screening and diagnostics: 3D mammography, digital breast tomosynthesis, and precision imaging tools ensure accurate and early detection.

Multidisciplinary treatment planning: Every patient benefits from a team approach, where oncologists, surgeons, radiologists, nurses, and allied health professionals collaborate to design tailored treatment plans.

Innovative therapies: NCCCR provides access to the latest chemotherapy protocols, targeted therapies, immunotherapies, and hormone treatments, aligned with international standards.

Advanced surgical techniques: Breast-conserving surgery and reconstructive options are available to promote both physical recovery and emotional well-being.

Comprehensive survivorship programs: Dedicated support services — including psycho-oncology, rehabilitation, and survivorship clinics — help patients and families navigate life beyond treatment.

A National Effort

Qatar has integrated breast cancer awareness and care into its broader vision for health. Public campaigns, community partnerships, and nationwide initiatives ensure that early detection is accessible to all. NCCCR continues to lead the way in research, professional training, and collaboration with international cancer networks to keep patient care at the cutting edge.

The Power of Pink

This October, as Qatar turns pink, NCCCR calls on every individual to take an active role: schedule your screening, encourage loved ones to be proactive, and support survivors. Awareness is the first step, but action is what saves lives.

Message of Hope

Breast cancer is no longer the silent disease it once was. With modern technologies, multidisciplinary care, and the unwavering commitment of NCCCR, patients in Qatar receive world-class treatment close to home. Together, we can ensure that pink is not just a color of awareness, but a symbol of progress, strength, and hope

IAEA ANCHOR CENTRE

TAKING SUSTAINABLE, HIGH IMPACT ACTION TO BEAT CANCER

Dr Noora Al-Hammadi

- Chair of Radiation Oncology, Radiation Oncology Department, NCCCR
- Deputy CMO for Staff Affairs, HMC

The recognition of HMC as an IAEA Anchor Centre signals Qatar's growing global influence in advanced healthcare, education, and research. It is a testament to the country's strategic investments in medical infrastructure and human capital, and a powerful step forward in the global fight against cancer.

Hamad Medical Corporation Recognized as IAEA Anchor Centre, Strengthening Qatar's Leadership in Global Cancer Care and Medical Imaging

Doha, Qatar | September 23, 2025

Hamad Medical Corporation (HMC), Qatar's leading public healthcare provider, has been officially designated as an Anchor Centre by the International Atomic Energy Agency (IAEA) under its global Rays of Hope initiative. This prestigious recognition marks a major milestone in Qatar's efforts to advance healthcare delivery, cancer care, and medical imaging services on a regional and global scale.

The formal signing ceremony took place in September on 16th, 2025 at the IAEA Headquarters in Vienna, where Dr. Mohamed Salem Al-Hassan Medical Director & CEO of National Center for Cancer Care and Research (NCCCR) and Dr. Noora Al-Hammadi, Deputy CMO for Staff Affairs, Medical Workforce Planning & Performance Chairman Radiation Oncology & Deputy Medical Director for Admin Support Services – NCCCR represented Qatar. Their participation

reflects HMC's strong commitment to international collaboration in the fight against cancer.

Alongside HMC, five other leading institutions from Australia, Brazil, Egypt, Estonia, and Serbia were also recognized as new Anchor Centers—bringing the total number of centers in the IAEA's global network to 18. Together, they form a growing alliance dedicated to delivering #CancerCare4All.

A Regional Hub for Radiation Medicine Excellence

With its new status as an IAEA Anchor Centre, HMC will serve as a regional hub of excellence in radiotherapy, nuclear medicine, radiology and medical physics—areas critical to the diagnosis and treatment of cancer and other diseases.

This recognition positions HMC to:

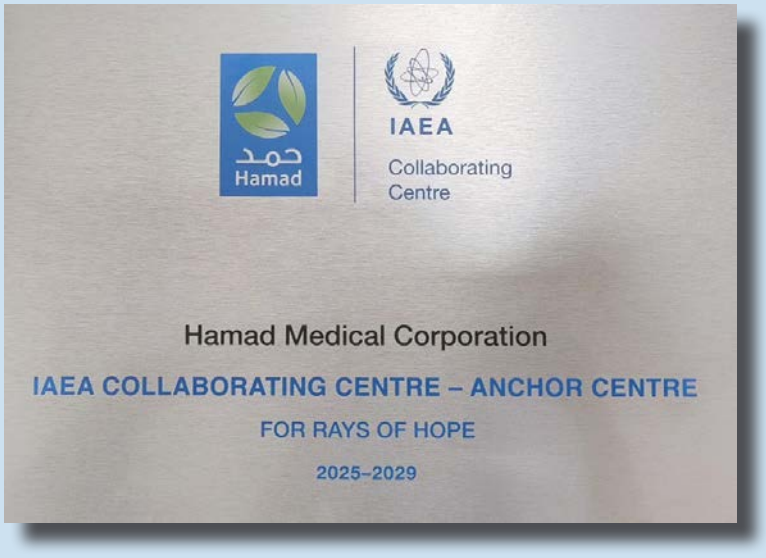
- Provide training and capacity-building programs across the region
- Support IAEA technical cooperation and field missions
- Contribute to the creation of clinical guidelines and educational tools
- Assist with implementing quality assurance and radiation safety systems
- Host regional conferences, expert workshops, and joint research initiatives

Advancing Global Health Equity Through Rays of Hope

The IAEA's Rays of Hope initiative aims to improve access to cancer care in low- and middle-income countries, where the burden of cancer is growing rapidly. With over 75% of global cancer deaths projected to occur in these regions by 2030, Anchor Centers like HMC play a vital role in scaling up safe, effective, and sustainable radiation medicine services.

A Milestone for Qatar's Global Healthcare Vision

The recognition of NCCCR, HMC as an Anchor Centre is a testament to Qatar's strategic investments in medical infrastructure, education, and innovation. It strengthens Qatar's position as a regional leader in oncology and diagnostic medicine, while contributing meaningfully to the global effort to fight cancer.



CELEBRATING WORLD MARROW DONOR DAY AT NCCCR

On 22 September 2025, the National Center for Cancer Care and Research (NCCCR) proudly joined healthcare institutions worldwide in celebrating World Marrow Donor Day, a special occasion dedicated to honoring the courage and generosity of stem cell and marrow donors. These remarkable individuals give the ultimate gift—hope and life—to patients facing life-threatening illnesses.

The commemoration at NCCCR was held under the esteemed leadership of Dr. Mohamed Salem Jaber Al-Hassan, Chief Executive Officer of NCCCR, and Dr. Mohammad Bakr, BMT Program Director, alongside the BMT teams and Nursing Administration Department. The event brought together patients, families, healthcare professionals, and members of the wider community. The atmosphere was filled with gratitude and inspiration as the program highlighted the invaluable role donors play in advancing cancer care and saving lives.

One of the most moving highlights of the day was the personal testimonies of two stem cell donors, who recounted their unique journeys and the emotions tied to their life-saving decisions. Their stories resonated deeply with both patients and attendees, underscoring the profound impact a single donor can make.

The program also celebrated the achievements of Qatar's Bone Marrow Transplant (BMT) Program, which has grown into a national center of excellence since its establishment. Updated statistics presented during the event showcased a significant milestone: 104 successful allogeneic stem cell donations performed at NCCCR since September 2017. This accomplishment reflects the dedication of donors, the resilience of patients, and the unwavering commitment of the clinical teams guiding them through complex transplant journeys.

Educational activities formed another key component of the celebration. Awareness materials, informative presentations, and interactive discussions emphasized the central message of the day: Stem cell donation saves lives.

The celebration concluded with a heartfelt acknowledgment of the many individuals who contribute to the success of the BMT Program—donors, healthcare providers, coordinators, the Stem Cell Lab, the Apheresis team, and support staff. Their collective efforts ensure that NCCCR continues to deliver world-class care and remains at the forefront of advancing stem cell transplantation in Qatar.

World Marrow Donor Day at NCCCR was not only a day of reflection and gratitude but also a call to action. By raising awareness and inspiring more people in Qatar to join the international donor registry, NCCCR is helping to build a future where every patient in need can find their lifesaving match.

"One donor has the power to change the course of a family's story—turning despair into hope, and hope into life."


World
Marrow
Donor
Day
National Center for Cancer Care & Research

VENOUS THROMBOEMBOLISM IN PREGNANCY:

UNDERSTANDING THE RISKS & MANAGEMENT

• **Dr. Sarah Elkourashy, ABHS, MRCP-UK**
• Assistant professor of clinical Medicine/ WCM-Q
• Hematology/BMT Consultant
• Lead of Obstetric hematology
• NCCCR-HMC

Venous thromboembolism (VTE), which includes deep vein thrombosis (DVT) and pulmonary embolism (PE), is both a morbidity during pregnancy and a cause of pregnancy-related mortality. Pregnant women have a 4.0–4.6 higher risk of a VTE compared to similarly age non-pregnant women. Venous thrombosis complicates approximately 1-2 in 1,000 deliveries and results in 1 death in 100,000 deliveries.

Increased risk of VTE through each trimester, a peak 1-3 weeks postpartum and then a decline in risk till equivalent to a non-pregnant state by 12 weeks postpartum. Daily risk of VTE is increased 5 to 10-fold during pregnancy and 15 to 35-fold in the early postpartum period.

VTE was the leading cause of direct maternal deaths in many developed countries while postpartum hemorrhage remains a major cause of maternal mortality in developing countries where access to prompt and effective care is limited.

Pregnancy associated risk factors include venous stasis, an increase in procoagulant factors, a reduction in natural anticoagulants, and vessel wall injury that occurs during labor and following caesarean section (CS). Increased BMI is an important and consistent risk factor, especially in combination with immobilization. Prior VTE especially if unprovoked, pregnancy-related or estrogen-related increases the risk of antepartum recurrence by 5-10%.

Nowadays, increasing VTE incidence is attributed to conception at older age, existing maternal co-morbidities, inherited thrombophilia & increasing rates of CS. Inaccurate assessment of VTE risk factors as well lead to delay in investigations and diagnosis. This inappropriate implementation of VTE prophylaxis (antepartum or postpartum) results in erroneous diagnoses of VTE and complicates the outcome.

Lots of challenges in diagnosis during pregnancy are faced due to several reasons.

- A wide overlap exists between the clinical symptoms of PE and symptoms caused by physiological changes in pregnancy, such as tachycardia, swelling of the legs, and shortness of breath which is present in 70% pregnant ladies
- Clinical decision rules for VTE such as the Wells or Geneva scoring systems have had limited value during pregnancy.
- There is no international consensus on a definitive diagnostic algorithm for VTE during pregnancy, leading to inconsistent guidelines due to a lack of high-quality data
- Up To date, no studies have described a role for PE rule out criteria (PERC) in pregnant females.

Radiation Exposure:

The need for imaging tests like computed tomography pulmonary angiography (CTPA) and ventilation-perfusion (V/Q) scans poses risks of radiation exposure to the mother and fetus.

D-dimer Limitations:

While D-dimer tests can help rule out VTE in non-pregnant individuals, establishing safe D-dimer cut-off points for pregnant women is challenging because D-dimer levels naturally increase during pregnancy.

Therfore, diagnosis of VTE needs high index of clinical suspicion while avoiding overtesting to minimize the risk of radiation and contrast exposure.

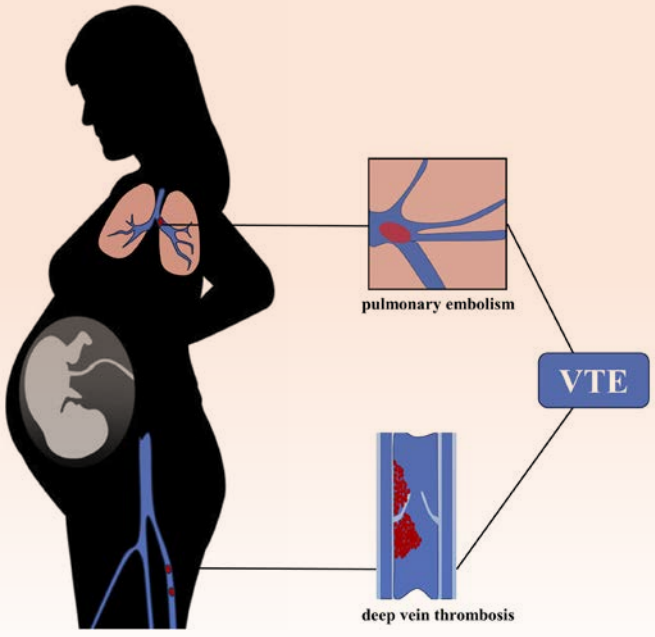
- While in the past V/Q scan was the preferred mode for imaging patients with suspected PE, we now use CTPA as the primary imaging modality.
- This preference is based upon the practical rationale that CTPA:
- Can be done with abnormal Chest X-ray or pre-existing chest issues,
- Faster results, widely available, 24/7, allowing for quicker diagnosis and faster initiation of treatment if needed.
- Better interobserver agreement for radiologists than nuclear scans
- Has a higher sensitivity for detecting smaller clots in the pulmonary vessels
- May provide an alternative diagnosis in 12 to 13% of cases,
- Recent advances in technology have notably decreased CTPA radiation doses by 30%.
- Better assessment of clot burden and anatomy, which may be used to guide percutaneous intervention

Maternal and Fetal Safety Considerations

- Both CTPA and perfusion scanning do appear equally good in diagnosing PE during pregnancy, similar negative predictive value with comparable accuracy
- Low dose perfusion scanning & CTPA: expose fetus to radiation far below the dose causing fetal complication
- Advances in modern CTPA protocols offer lower radiation doses than older models yet still expose breast tissue to higher radiation than V/Q scans, however the doses still remaining within established safety limits
- Furthermore, it was proved by that fetal exposure to iodinated contrast is no longer a concern for secondary neonatal thyroid disorders.

Counseling Pregnant Patients Undergoing Diagnostic Imaging:

- Pregnant individuals may experience significant stress regarding the health of their fetus when undergoing diagnostic testing.



- Counseling at the time of imaging is essential to optimize informed choices and to improve the quality and experience of care.
- Therefore, clinicians must be well informed and comfortable discussing the risks associated with delay in testing & explaining the known safety thresholds of radiation and everyday radiation exposure to present it through benefit-risk ratio
- In a recent retrospective cohort study; by Vinson, D.R, 2025; 1 in 5 pregnants with suspected PE refused diagnostic imaging, for fear of harming their baby, highlighting the importance of effective counseling and communication skills

Finally, A careful assessment of individual risk factors is crucial for guiding the diagnostic workup, proper counselling whenever intermediate or high risk probability exists to perform imaging, interdisciplinary approach for management.

Optimal management of venous thromboembolism (VTE) in pregnancy requires more than timely diagnosis and anticoagulation—it demands a comprehensive, patient-centered approach. Clear counselling regarding the necessity and safety of imaging investigations is fundamental to addressing maternal concerns and ensuring adherence to diagnostic pathways. Equally important is the interdisciplinary collaboration of hematologists, obstetricians, radiologists, anesthesiologists, and maternal–fetal medicine specialists, working together to individualize care that balances maternal and fetal safety. This combination of effective communication and coordinated team-based management represents the cornerstone of best practice in VTE care during pregnancy.

WHEN CANCER CHANGES APPETITE:

FEED THE HEART, NOT JUST THE BODY.

DR. ABDELHAMID AFANA

- Consultant Clinical Psychologist, Psychotherapist
- Medical Technical Consultan
- Head of NCCCR Psychotherapy Unit

Food is a symbol of life, strength, and love. Seeing a loved one with cancer eat well can make the family feel like proof that cancer patients are "fighting" the illness. So, when a cancer patient eats very little, it's natural for family members and caregivers to feel worried and even frustrated; therefore, sometimes they push and insist on patients to eat, or even sometimes, accuse patients of "not trying hard enough".

It is important to understand that cancer patients love to eat their favorite foods, favorite drinks, and preferred fruits, but the loss of appetite is not simply about patients' self-control. It's a complex mind–body response involving changes in the body's chemistry, the brain's appetite regulation systems, and the patient's emotional state. Understanding this can help replace frustration with compassion and make mealtimes more positive and fun for everyone.

Cancer and its treatments can significantly reduce appetite through both biological and psychological mechanisms.

Biologically, cancer triggers chemical messengers that alter the brain's appetite center, lowering hunger signals and increasing the sense of fullness. Treatments like chemotherapy and radiotherapy can distort taste and smell, create aversions, and cause discomfort such as nausea, constipation, or mouth sores, making eating unpleasant. Cancer also disrupts energy metabolism, which further blunts normal hunger cues.

Psychologically, appetite is closely linked to the mind–brain–emotions connection, influenced by two key hormones: the first is the ghrelin hormone (hunger hormone), which tells the brain, "I'm hungry." The second is the leptin hormone, which says "I'm full". The balance of these two hormones can be disturbed by the cancer, its treatment, and stress, which means a patient might not feel hungry, or they may feel full after just a few bites. These changes are real, not stubbornness, laziness, or "giving up".

What usually happens in cancer patients is that cancer can disrupt both hormones, making hunger unreliable and fullness exaggerated. The hunger hormone may not rise normally before meals as it always does; therefore, the brain never receives a strong "time to eat" signal. While the fullness hormone stays higher than usual, telling the brain the stomach is already full, even after only a few bites.

When the signals of these hormonal signals are altered because of cancer, emotions and thoughts get disturbed, therefore the patient becomes anxious and fearful, the fear of nausea makes meals unappealing, and the pleasure associated with food is lost because of a change in food taste that makes the food feel like a chore.

When family members urge patients and force them to eat, it makes the patient feel guilty of disappointing loved ones, turning meals into a stressful event. Stress hormones raise and further lower the appetite. Consequently, and unconsciously, foods become stress triggers and will be linked to negative emotions and pain. To deal with these negative emotions, the patient avoids the family's requests to eat by pretending to sleep. In this situation, comfort and support will be replaced by burden and tension, which will again strengthen the low appetite.

How to help

Tips for family members and care providers to enable patients to deal with such an uncontrollable loss of appetite

Accept the Patient's Changing Appetite: It is natural to watch cancer patients eating closely and to feel worried if they're not eating "enough." Recognize that low appetite is part of the illness, not a personal choice. These changes are real, not a sign of stubbornness, laziness, or "giving up." Hunger and fullness signals may not match.

Shift from Pressure to Shared decision: Instead of telling the patient, "You must eat," try asking, "What feels easiest to

eat right now?". Offer two or three appealing options instead of asking "What do you want to eat?" This reduces decision fatigue and increases the chance they'll choose something. Pushing or insisting often creates resistance, but working together builds trust, and the patient feels comfortable and in control.

Small-goal Reinforcement : Use small, tiny, frequent and achievable eating goals to reinforce brain signals, such as eating small bites of the chosen food repeatedly and frequently, and then celebrate success warmly, focusing on encouragement rather than calorie counts

Appetite Ritual Cue: Establish a gentle mealtime routine by using the same seat, a special plate, and a familiar spoon or size, which gives the brain a consistent "it's time to eat" signal without creating pressure. Link eating with positive emotional activities rather than obligations.

Optimize Eating Environment/Conditions: Appetite can be affected by the environment as much as the food itself. Create a calm, pleasant atmosphere at mealtimes and avoid tense conversations or arguments about how much is eaten. Offer smaller food portions to avoid overwhelming the patient, and serve foods attractively, using favorite dishes or colors to make them more appealing.

Adapt to Changing Tastes: Cancer treatments can make favorite foods taste bland, metallic, or bitter. Instead of sticking to "what used to work," be willing to experiment. Adjust seasonings, change textures, and try different temperatures; some patients tolerate cool or room-temperature foods better than hot meals.

Support, Don't Stress: Meals are not just about nutrition; they are also a chance for connection. Keep the focus on sharing time, talking about everyday life, or enjoying a moment of humor. Even a few bites can be a success. If the patient sees your smile and hears your kind words, they feel encouraged rather than pressured.

Collaborate with Psychotherapy Services to relax the mind and restore mind-brain-emotion and stomach signals and help to design a personalized plan that meets the patient's needs, reducing effort and stress.

Care for Yourself: Caring for someone with cancer can be emotionally and physically exhausting. It's easy to lose sight of your own needs, take breaks when you can, share responsibilities with other family members, and talk to friends or consult the psychotherapy services available.

Conclusion Eating is not just about calories; it's about comfort, dignity, and emotional connection. By replacing pressure with patience, you give your loved one the space to eat what they can, when they can, with less stress and more peace.

YOUNG ONCOLOGISTS, BIG IMPACT:
SHAPING THE FUTURE OF CANCER CARE

DR HIND SAQALLAH
Clinical Oncology Fellow

When I began my journey in oncology, I knew it would be intellectually challenging—but I never imagined how deeply it would shape who I am as a person. At the National Center for Cancer Care and Research (NCCCR), every day brings a new lesson, a new patient story, and a renewed sense of purpose.

Being a young oncologist here means standing on the shoulders of giants. Under the mentorship of Dr. Salha Bujassoum Al-Bader and other dedicated consultants, we are constantly encouraged to think critically, act compassionately, and pursue innovation. From multidisciplinary team to bedside discussions, we witness firsthand how teamwork and evidence-based practice change lives.

Our generation of oncologists is driven by curiosity and hope. We're learning to use precision medicine, immunotherapy, and digital tools to tailor treatments—and to listen carefully to each patient's fears and dreams. Beyond the clinical walls, we contribute to research, awareness campaigns, and international conferences that place Qatar on the global oncology map.

Every patient we meet reminds us why we chose this path. We are not just treating cancer; we are standing beside those who fight it. The experience has taught me that progress in oncology isn't only about new drugs or technology—it's about people, empathy, and the belief that together, we can shape a brighter future for cancer care.

NCCCR & Q-SOINS PARTICIPATES AS EVENT PARTNER IN ASPIRE ZONE FOUNDATION'S ANNUAL PINK WALK 2025

Aspire Zone Foundation launched its annual Breast Cancer Awareness Campaign in collaboration with the Qatar Cancer Society through the organization of the Pink Walk 2025, held at Aspire Park on October 4, 2025. The initiative forms part of Breast Cancer Awareness Month and aligns with the Foundation's mission to promote community health, while reinforcing its social responsibility in encouraging healthy lifestyles and regular physical activity.

The event, supported by Qatar Scientific Oncology Innovation & Networking Society (Q-SOINS) as an official event partner, gathered more than 500 participants from diverse sectors. It featured warm-up and cool-down sessions, the distribution of educational materials and giveaways, and engaging awareness activities highlighting prevention and the importance of early detection.

Dr. Salha Bujassoum Al-Bader, President of Q-SOINS, expressed her appreciation for the collaboration, stating: "Q-SOINS is proud to partner with Aspire Zone Foundation and the Qatar Cancer Society in this meaningful initiative. The Pink Walk not only raises awareness about breast cancer and the importance of early detection but also unites our community in a shared commitment to health, hope, and solidarity. Through such partnerships, we reaffirm our dedication to advancing oncology education, innovation, and person-centered care across Qatar."

The society's participation underscored its mission to advance cancer education, promote early detection, and strengthen collaboration across Qatar's oncology network in alignment with national health priorities.

ONCOLOGY MASTERCLASS 2025 MARKS A MILESTONE IN ADVANCING CANCER CARE

The Oncology Masterclass 2025: Advancing Cancer Care Across Specialties was successfully held on 13 September 2025 at the Marriott Marquis City Center Doha. The event brought together leading oncologists, researchers, and healthcare professionals to share expertise, exchange ideas, and highlight the latest innovations in cancer care.

Organized under the umbrella of the newly established Qatar Scientific Oncology Innovation and Networking Society (Q-SOINS), the Masterclass reflected Qatar's commitment to fostering collaboration, education, and innovation in oncology in alignment with the Qatar National Vision 2030.

The program featured sessions across major specialties, including lung, genitourinary, women's, gastrointestinal, head and neck cancers, and melanoma, with expert-led presentations, panel discussions, and knowledge-sharing opportunities. Each session underscored the importance of multidisciplinary collaboration in improving patient outcomes.

In her opening remarks, Dr. Salha Bujassoum Al-Bader, Chair of Medical Oncology and Palliative Care at NCCCR and Chairman of Q-SOINS, welcomed participants and emphasized the Society's mission to serve as a hub for medical education, research, and professional networking. She highlighted that this Masterclass represents one of the first steps in bringing the vision of Q-SOINS to life.

The day concluded with closing remarks by Dr. Salha, who expressed appreciation to the speakers, partners, and attendees for their contributions in making the Oncology Masterclass 2025 a meaningful platform to advance cancer care in Qatar and the wider region.

With its success, Q-SOINS looks forward to hosting future educational and scientific events that continue to strengthen Qatar's role as a regional leader in oncology.

RAISING QATAR'S FLAG IN GLOBAL ONCOLOGY:

NCCCR SHINES AT ESMO CONGRESS 2025

The National Center for Cancer Care and Research (NCCCR) is proud to announce its participation at the prestigious European Society for Medical Oncology (ESMO) Congress 2025, held in Berlin, Germany. NCCCR was represented by Dr. Salha Bujassoum Al-Bader, Chair of Medical Oncology and Palliative Care, through a scientific poster presentation showcasing the center's contribution to global oncology research.

NCCCR's presence at one of the world's most influential oncology platforms reflects Qatar's growing leadership in cancer care, research, and innovation. This international participation not only highlights the scientific excellence of our physicians but also strengthens Qatar's position as a regional hub for advanced cancer treatment and collaborative research.

Engagement in global conferences such as ESMO provides valuable opportunities for NCCCR experts to exchange knowledge, share best practices, and build partnerships with leading cancer centers worldwide. It also ensures that the latest innovations and evidence-based practices are integrated into patient care at home, aligning with the mission of Hamad Medical Corporation and Qatar's National Cancer Strategy to deliver world-class healthcare.

NCCCR's participation at ESMO 2025 serves as a testament to its ongoing dedication to advancing oncology through education, collaboration, and innovation, bringing global recognition to the efforts made in Qatar toward improving cancer outcomes and shaping the future of cancer care.

WHEN CANCER FEAR IS NEVER FAR:

MANAGING HEALTH SCARES AS A SURVIVOR

Mr. EYAD MOHD AHMAD TUBISHAT
• Medical Manager -NCCCR

For many cancer survivors, life after treatment is not free of challenges. While remission brings relief, the shadow of fear often lingers, resurfacing in moments that may seem routine to others.

When my head started hurting, my first thought was not dehydration, stress, or lack of sleep. Instead, it was the fear of breast cancer returning — metastasis invading my brain.

The first time I experienced a migraine, I did not recognize it for what it was. I had enjoyed a couple of glasses of wine the night before, so I assumed the relentless pulsing in my right temple was a simple hangover. But when the pain persisted into the next morning, intensifying and spreading into my neck, accompanied by waves of nausea, my anxiety grew.

By the third day, I entered full panic mode. As a survivor who had overcome breast cancer more than eight years ago, I knew too well how easily small symptoms could mask something more serious. Every ache and pain carried an unspoken question: What if it's cancer again?

On the fourth day, the pain finally began to ease. Relief came, but it was tinged with unease. Why had the headache lasted so long? Was it just a passing episode, or was there something more?

When the pain subsided completely, I decided to take it as a wake-up call. Perhaps it was stress, dehydration, or lifestyle choices. I made a simple plan: drink more water, reduce alcohol, and pay closer attention to my health.

This experience reminded me of an important truth: cancer survivorship is more than living beyond the disease. It is also learning to manage the emotional echoes it leaves behind. Health scares may never disappear entirely, but they can become moments of resilience, self-care, and renewed commitment to well-being.

Expert Guidance: Managing Health Scares After Cancer

At the National Center for Cancer Care and Research (NCCCR), we recognize that survivors often face heightened anxiety about their health. Here are key strategies recommended by our clinicians:

1. Know When to Seek Medical Advice

Not every ache or headache signals cancer, but some symptoms should always be evaluated. Survivors should promptly consult their healthcare provider if they experience:

- Persistent pain that does not improve with rest or usual remedies
- Unexplained weight loss, fevers, or fatigue
- New lumps, swelling, or changes in skin or breast tissue
- Neurological changes such as vision problems, dizziness, or prolonged headaches

2. Build Healthy Habits

Lifestyle choices can reduce both physical risks and emotional stress:

- Stay hydrated and eat a balanced diet rich in fruits, vegetables, and whole grains
- Limit alcohol and avoid smoking
- Maintain regular physical activity, which also helps relieve stress and improve sleep
- Keep up with scheduled follow-up appointments and screenings

3. Address the Emotional Impact

Fear of recurrence is a normal part of survivorship. Support can make a big difference:

- Join survivorship programs or support groups, where experiences are shared in a safe space
- Seek counseling or psychological support if fear becomes overwhelming
- Practice relaxation techniques such as mindfulness, breathing exercises, or gentle yoga

4. Stay Connected With Your Care Team

Your oncologists, nurses, and primary care providers are partners in your long-term health. Keeping open communication ensures that concerns are addressed early and that you never feel alone in managing post-cancer health.

Moving Forward With Strength

For survivors, every headache, backache, or cough may carry a weight others cannot see. Yet by combining personal awareness with expert guidance, it is possible to live with less fear and more confidence.

Survivorship is not only about defeating cancer — it is about reclaiming life, with all its uncertainties, one healthy step at a time

TTP
Thrombotic Thrombocytopenic Purpua

A BENIGN NAME FOR A SERIOUS HEMATOLOGICAL DISEASE?

Dr. Abdulrahman F. Al-Mashdali
• Hematology Fellow, Year 3 - NCCCR

Hematology as a medical discipline is divided into malignant and benign categories. However, benign disorders can carry significant morbidity and mortality, calling into question the appropriateness of the term "benign." For this reason, many experts now prefer to use the term "classical hematology."In this summary, we shed light on thrombotic thrombocytopenic purpura (TTP).

Overview of TTP

Thrombotic thrombocytopenic purpura (TTP) is a rare but severe hematologic emergency, with an incidence of approximately 1.5 to 6 cases per million people worldwide. Despite its rarity, it carries a high risk of death if not promptly recognized and treated. The disease results from severe deficiency of ADAMTS13, an enzyme that cleaves von Willebrand factor (vWF) multimers and prevents excessive clot formation. Without adequate ADAMTS13 activity, unusually large vWF multimers accumulate in circulation, leading to widespread platelet-rich microvascular thrombosis.

There are two major forms of TTP: congenital TTP (cTTP), caused by mutations in the ADAMTS13 gene, and the more common immune-mediated TTP (iTTP), in which autoantibodies inhibit ADAMTS13 activity.

Clinical Features

Patients typically present with features of microangiopathic hemolytic anemia (MAHA) and severe thrombocytopenia, with or without organ dysfunction. MAHA is characterized by schistocytes on blood smear, elevated lactate dehydrogenase (LDH), and low haptoglobin levels, reflecting mechanical red cell destruction in obstructed microvessels. Thrombocytopenia is usually profound (platelets $<30 \times 10^9$/L) and manifests as petechiae, purpura, and mucosal bleeding.

Neurologic symptoms are common and range from mild confusion or headache to seizures and coma. These often fluctuate rapidly due to transient cerebral ischemia. Renal involvement, typically mild creatinine elevation or proteinuria, is usually less severe than in hemolytic uremic syndrome (HUS), although significant impairment can occur. Fever, once thought to be a defining feature, occurs in fewer than a quarter of cases and is no longer considered a reliable diagnostic sign.

Because of its rapid progression, TTP should be suspected in any patient with MAHA and thrombocytopenia without another clear cause. Diagnosis is confirmed by demonstrating

ADAMTS13 activity less than 10%, though results are often delayed. For this reason, treatment is usually started empirically in patients with high clinical suspicion, supported by scoring tools such as the PLASMIC score, which incorporates platelet count, hemolysis markers, creatinine, INR, and clinical history.

Advances in Treatment

In recent decades, treatment advances have transformed TTP from a uniformly fatal disease into a highly treatable condition, with survival rates now exceeding 90%. The cornerstone of therapy is urgent plasma exchange (plasmapheresis), which removes pathogenic antibodies and replenishes ADAMTS13. Immunosuppressive therapy, most commonly corticosteroids and rituximab, reduces ongoing antibody production and lowers relapse risk.Caplacizumab, a nanobody targeting the interaction between vWF and platelets, has emerged as an important addition to therapy. By directly inhibiting microvascular clot formation, it shortens time to platelet recovery, reduces early recurrences, and improves outcomes. However, it is associated with increased bleeding risk.

Our Experience with Innovative Approaches

Our recent study at the NCCCR addressed a practical challenge: how to proceed when ADAMTS13 test results are delayed. We evaluated initiating caplacizumab immediately based on strong clinical suspicion, rather than waiting for confirmation. The results were encouraging. All patients with confirmed TTP survived and achieved platelet recovery within approximately one week. While some experienced bleeding complications, none were life-threatening. This strategy proved especially valuable in our setting where testing delays are common. The study has been submitted for presentation at the upcoming American Society of Hematology (ASH) conference.

Special Considerations in Pediatric Patients

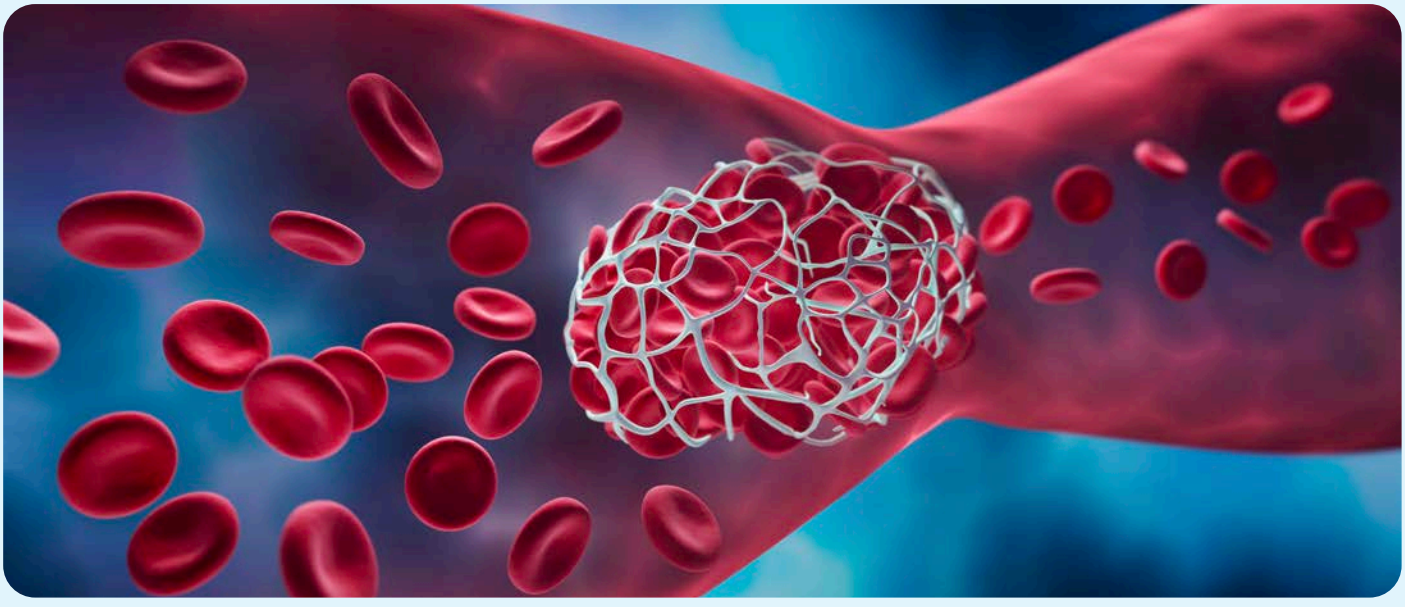
TTP in children is exceedingly rare, representing less than 10% of cases. Management principles are similar to adults, but careful attention to dosing is required. Caplacizumab is not formally approved for pediatric use; reports of off-label administration exist, particularly in children under 12 years of age.

Recent Publications and Insights

Given the seriousness of TTP and the introduction of novel therapies, the literature on this subject has expanded. Our group conducted a scoping review of pediatric cases, published in Blood Reviews. The review found caplacizumab to be safe and effective in children, with rapid platelet recovery and favorable outcomes. However, evidence remains limited, and optimal dosing,especially in very young patients, requires further study.A recent review on iTTP published in JAMA emphasized the importance of long-term monitoring. Following remission, about 16% of patients relapse. Monitoring ADAMTS13 activity and administering rituximab when activity falls below 20% significantly reduces relapse risk.

Conclusion

The management of iTTP has evolved dramatically in recent years. Advances in diagnostics, plasma exchange, immunosuppressive therapies, and targeted agents such as caplacizumab have greatly improved survival. Our experience highlights that early, proactive treatment based on clinical suspicion can be lifesaving in the face of testing delays. While challenges remain, particularly in pediatric cases and resource-limited settings, the future of TTP management is promising, with ongoing research and clinical innovation shaping best practices.



3rd GCC HEMATOLOGY HUB 2025

Professor Honar Cherif

- Senior Consultant Hematologist
- Head of Dep of Hematology - NCCCR

The 3rd GCC Hematology Hub conference was successfully held on May 16–17, 2025, at the Hilton Doha, Qatar. This premier event represented a remarkable collaboration among leading hematology societies across the GCC region, including the Emirates Society of Hematology, Hematology Academy, Kuwait Hematology Association, MENA Hematology League, Oman Society of Hematology, Qatar Cancer Society and The National Centre for Cancer Care and Research.

Spanning two enriching days, the program featured a dynamic agenda comprising six interactive scientific sessions, four engaging panel discussions, and six industry-sponsored symposia. Attendees also benefited from a "Meet-the-Expert" parallel session, alongside inspiring opening and closing ceremonies. The conference was accredited by the European Board for Accreditation in Hematology (EBAH), offering participants 10 credit hours, underscoring its educational value.

The conference was co-chaired by colleagues from Qatar and Oman. The opening ceremony featured insightful speeches from distinguished representatives of the participating societies, emphasizing the vital role of regional cooperation and knowledge-sharing in advancing hematology practice across the GCC.

The 2025 program was thoughtfully designed to address both regional priorities and global advancements in hematology. It focused on innovation, case-based learning, and tackling region-specific challenges. Key topics included Chronic Myeloid Leukemia (CML), Chronic Lymphocytic Leukemia (CLL), Multiple Myeloma, Acute Myeloid and Lymphoblastic Leukemia (AML/ALL), Lymphoma, Myelodysplastic Syndromes/Myeloproliferative Neoplasms (MDS/MPNs) and novel therapies. The diverse formats—interactive panels, expert case discussions, and industry symposia—fostered

meaningful multi-stakeholder dialogue and practical clinical applications.

The conference attracted over 300 participants from 15 countries, comprising physicians, allied health professionals, residents, students, and academic researchers. The faculty featured more than 45 renowned experts, ensuring a high-quality learning experience. The event also enjoyed the generous support of 15 sponsors and exhibitors, highlighting the strong commitment from industry partners to the advancement of hematology in the region.

Feedback from post-event surveys reflected excellent satisfaction levels, with attendees praising the relevance of content, the quality of presentations, and the opportunities for networking and collaboration.

The conference concluded with a celebratory award ceremony, honoring the dedication of the participating hematology societies across the GCC for their unwavering commitment to collaboration, education, and the ongoing advancement of hematology care in the region.

NCCCR HOSTS FIRST MEDICAL ONCOLOGY FELLOWSHIP TRAINING WORKSHOP ON ULTRASOUND-GUIDED PLEURAL ASPIRATION

Dr. Salha Bujassoum Al Bader,
Chair of Medical Oncology

Dr. Mohammed Ussama Al Homsi,
Deputy Director of Education

The Department of Medical Oncology proudly marked a milestone on 14 August 2025 with the launch of its first fellowship training workshop in Ultrasound-Guided Pleural Aspiration, held at NCCCR.

This highly interactive, hands-on training was supervised by Dr. Abdulrhman Zar, Program Director of the Fellowship Training, alongside Dr. Salha Bujassoum Al Bader, Chair of Medical Oncology, and Dr. Mohammed Ussama Al Homsi, Deputy Director of Education. The workshop was expertly conducted by Dr. Aymen, Interventional Radiologist, under the direction of Dr. Ali Barah.

The initiative represents a significant step forward in enhancing clinical competence, advancing technical skills, and fostering multidisciplinary collaboration in the care of oncology patients. Current fellows actively participated, gaining practical expertise in a crucial diagnostic and therapeutic procedure.

Looking ahead, future technical skills workshops will be conducted at Itqan, open to interested trainees and physicians from oncology, hematology, and palliative care specialties.

For registration and further details, please contact the Chief of Fellowship (Medical Oncology, Palliative Care, and Hematology).

THE QATAR SCIENTIFIC ONCOLOGY INNOVATION AND NETWORKING SOCIETY CELEBRATES LANDMARK BREAST CANCER WEBINAR SUCCESS

Q-SOINS
QATAR SCIENTIFIC ONCOLOGY INNOVATION AND NETWORKING SOCIETY
الرابطة العلمية القطرية للابتكار والتواصل في طب الأورام

Doha, Qatar — The Qatar Scientific Oncology Innovation and Networking Society (Q-SOINS) has achieved a landmark milestone with the successful launch of its first Breast Cancer Network webinar, led by Dr. Salha Al Bader, President of Q-SOINS and Chair of Medical Oncology & Palliative Care Medicine at NCCCR.

The event attracted an impressive 438 participants from across the Gulf region, underscoring the growing commitment to advancing breast cancer care and research. Guided by Dr. Salha's vision, the program featured a distinguished panel of experts from the USA, UAE, Kuwait, Bahrain, Oman, and Qatar, who shared updates on managing advanced breast cancer, presented real-world clinical cases, and engaged in an interactive panel discussion.

More than 72% rated the educational content as excellent, while the webinar earned a remarkable 4.79 out of 5 overall satisfaction score. Participants also praised the quality of speakers and the seamless live-streaming experience, with over 96% reporting very good to excellent engagement.

This success reflects not only the scientific value of the session but also the vision and dedication of Dr. Salha Bujassoum in uniting regional expertise.

With this achievement, Q-SOINS has set a strong foundation for future collaborative initiatives. Society is already preparing upcoming programs in different fields of oncology sub-specialties, aiming at strengthening oncology education and fostering innovation across the Gulf.

BREAKING THE CYCLE:

BUILDING A CULTURE OF LEARNING AND SAFETY IN ONCOLOGY CARE

HANNAN ZADEH

- Acting Director of Nursing for Ambulatory Service - NCCCR

In oncology care, the stakes are extremely high, and every decision we make can significantly influence patient outcomes. To deliver the safest and highest-quality care, we need an environment where team members feel supported, valued, and empowered to speak up when challenges arise.

In some healthcare settings, a culture of blame has unintentionally developed — where individuals fear being singled out or punished for mistakes. While accountability is important, an overly punitive environment can discourage staff from reporting incidents or near misses. This hesitation limits our ability to learn from events, improve processes, and strengthen patient safety.

Research from clinical settings worldwide has shown that many healthcare professionals avoid reporting adverse events because they worry about legal consequences, negative judgments, or organizational repercussions. This fear creates missed opportunities for collective learning and systemic improvements that could prevent future harm.

Within oncology units, where teamwork, timely communication, and precise treatment administration are vital, the impact of this dynamic becomes even more significant. A supportive and open culture is essential for ensuring accuracy and safety. When staff feel psychologically safe, they are more likely to share concerns, report errors, and work collaboratively to resolve challenges — ultimately improving care for patients.

One promising approach is adopting a "just culture." In a just culture, errors are viewed not only as individual lapses but also as indicators of where systems, workflows, or processes can be improved. This approach balances accountability with understanding and focuses on learning rather than assigning blame. Leadership plays a crucial role by promoting open communication, encouraging reporting, and creating an atmosphere of trust and respect.

Importantly, we must also acknowledge the emotional impact on healthcare providers when errors occur. These "second victims" often experience stress, guilt, and anxiety, and they too need support. Providing a safe space for reflection and learning not only protects the well-being of our colleagues but also enhances patient safety in the long term.

By shifting towards a culture of openness and continuous learning, our oncology unit can become stronger, safer, and more collaborative. This change requires commitment from every team member, including leadership, but the rewards are significant: improved patient outcomes, increased staff morale, and a supportive environment where everyone can grow together.

Breaking the cycle of blame is not about avoiding accountability — it is about building a foundation of trust, learning, and shared responsibility so we can deliver the best possible care to our patients.

QATAR HEMOPHILIA SYMPOSIUM 2025:
A LANDMARK COLLABORATION FOR ENHANCED CARE

We are thrilled to share the highlights of the Qatar Hemophilia Symposium, which took place on April 2025, at the Rixos Hotel in Doha. This pivotal event marked a milestone in hemophilia care, brought to fruition through a remarkable collaboration between the National Center for Cancer Care and Research (NCCCR) and the Qatar Friends Hemophilia Group.

The symposium attracted a diverse array of healthcare professionals and experts from multiple disciplines, including hematology, orthopedics, trauma care, pharmacy, physiotherapy, dental care, and psychology. The event provided an invaluable opportunity for attendees to interact with distinguished speakers and moderators from Qatar, the UK, Malaysia, Saudi Arabia, the Netherlands, and Argentina. Their global perspectives enriched the discussions, highlighting the importance of international collaboration in advancing hemophilia care.

Over the course of two days, participants engaged in a series of in-depth sessions that fostered knowledge exchange and collaboration. The discussions underscored the critical need for a multidisciplinary approach in managing hemophilia and emphasized the importance of continuous education and support for healthcare providers. Topics ranged from innovative treatment strategies to patient-centered care, offering a comprehensive view of the challenges and solutions in managing hemophilia.

We would like to express our heartfelt gratitude to all the speakers, moderators, and participants whose expertise and insights contributed to the success of this symposium. Special thanks go to Dr. Ussama Al Homsi, Dr. Honar Charif, Dr. Amna Gamil, and Liam Fernyhough Dr. Liam Ferrnough for their exceptional contributions to this symposium. Their leadership and knowledge helped elevate the symposium and foster a dynamic learning environment.

This event not only marked a significant step forward in improving hemophilia care in Qatar but also served as a platform for fostering ongoing collaboration and innovation in the field. As we continue to build on the progress made during the symposium, we remain committed to advancing care and support for individuals living with hemophilia, both in Qatar and globally. We look forward to future partnerships that will further enhance the quality of care and outcomes for the hemophilia community.

ANNOUNCEMENT:

INAUGURATION OF NCCCR NEW BRACHYTHERAPY FACILITY

Siji Nojin Paul
- Medical Physicist, Radiation Oncology Department, NCCCR

We are proud to announce the inauguration of our state-of-the-art Brachytherapy Facility in the Department of Radiation Oncology. This marks a significant advancement in our institution's mission to provide cutting-edge cancer care, combining technology, expertise, safety and patient-centred services.

Comprehensive Infrastructure

This facility brings together all essential components under one roof, enabling smooth workflow and high-quality treatments:

- **Fully Equipped Operation Theatre (OT):**

Designed specifically for brachytherapy procedures, the OT is outfitted with modern anaesthesia workstations, sterile preparation areas, and advanced patient monitoring systems.

- **Seamless Imaging Integration:**

Direct access to state-of-the-art imaging facilities, including CT, MRI, and ultrasound, ensures accurate applicator placement and precise treatment planning.

- **Dedicated Treatment Suite:**

Equipped with High Doserate Brachytherapy system, latest treatment planning software, and shielded treatment rooms to provide safe and efficient brachytherapy sessions.

Key Benefits

- **Streamlined Workflow:**

Patients can undergo applicator insertion, imaging, planning and treatment in a single, well-coordinated and time-managed session.

- **Enhanced Accuracy:**

Integration of high-quality imaging like MRI significantly improves target coverage and organ-at-risk sparing.

- **Patient Comfort & Safety:**

The facility is designed to minimize waiting times and ensure optimal patient experience throughout the process.

For Our Patients

With this new facility, patients will benefit from enhanced precision, improved outcomes, and a more comfortable treatment journey. The multidisciplinary team — radiation oncologists, physicists, anaesthetists, nurses, and technologists — is fully prepared to deliver comprehensive care tailored to individual needs.

Now Operational

The new Brachytherapy Facility is now fully functional and open for patient care. This achievement highlights our institution's unwavering commitment to innovation and excellence in cancer treatment.

ICTP 2025 SCHOOL ON RADIATION ONCOLOGY MEDICAL PHYSICS:

GLOBAL PARTICIPATION AND MEFOMP'S CONTRIBUTION

Dr. Rabih Hammoud

- Chief of Oncology Physicist, Radiation Oncology Department, NCCCR

Dr. Aram Rostami

- Medical Physicist, Radiation Oncology Department, NCCCR

The Abdus Salam International Centre for Theoretical Physics (ICTP), located in Trieste, Italy, is a world-renowned scientific institution dedicated to fostering advanced studies and research, while promoting international cooperation in physics and mathematics. Through its programs, ICTP has played a vital role in building scientific capacity in developing countries, particularly in fields related to applied and medical physics.

In its recent school on Radiation Oncology Medical Physics, ICTP brought together a large community of specialists from across the world. A total of 66 radiation oncology medical physicists participated in person, while more than 70 joined virtually, representing diverse regions and professional backgrounds. This significant international presence highlighted the global commitment to advancing knowledge and clinical practice in radiotherapy.

The program was further enriched by the participation of Dr. Rabih Hammoud, Vice President of the Middle East Federation of Organizations of Medical Physics (MEFOMP) and Chief Medical Physicist at the Department of Radiation Oncology, National Center for Cancer Care and Research (NCCCR), and Dr. Aram Rostami, Senior Radiation Oncology Medical Physicist at NCCCR. Both attended in person as lecturers, delivering a total of eight theoretical and practical lectures. Their contributions, on behalf of MEFOMP and NCCCR, reflected the growing leadership of the Middle East region in advancing radiotherapy practice and education.

HMC PHYSICISTS REPRESENT QATAR AT ICARO4- CONFERENCE

Siji Nojin Paul
- Medical Physicist, Radiation Oncology Department, NCCCR

Mojtaba Barzegar M.Sc.
- Medical Physicist, Radiation Oncology Department, NCCCR

Radiation Oncology department medical physicists at NCCCR from Hamad Medical Corporation (HMC), Mojtaba Barzegar and Siji Nojin Paul, actively participated in the Fourth International Conference on Advances in Radiation Oncology (ICARO-4), organized by the International Atomic Energy Agency (IAEA) from June 2 to June 5, 2025, in Vienna, Austria. ICARO-4 served as a premier global platform for advancing knowledge and exchanging expertise in radiation oncology, radiotherapy, and medical physics. The participation of HMC physicists in this distinguished scientific forum reflects the institution's strong commitment to academic excellence, clinical innovation, and international collaboration.

During the conference, Mojtaba Barzegar presented his lecture on "Assessment of Spatial Distortion in MRI-Based Radiotherapy Planning", while Siji Nojin Paul delivered her lecture on "Implementation of an MRI-Based Brachytherapy Program." Their contributions highlighted HMC's continuous efforts to integrate advanced imaging and radiotherapy techniques into clinical practice.

We gratefully acknowledge the IAEA for inviting and supporting the participation, as well as the support of HMC leadership and the guidance and encouragement of Dr. Noora Al-Hamadi and Dr. Rabih Hammoud, whose commitment was instrumental in enabling this successful engagement. The representation of HMC at ICARO-4 highlights Qatar's growing role as a regional leader in oncology and reaffirms its dedication to advancing patient-centered care through education, research, and global cooperation.

About ICARO-4

The Fourth International Conference on Advances in Radiation Oncology (ICARO-4) was held at the IAEA headquarters in Vienna, Austria. This biennial conference serves as a global platform for advancing knowledge and exchanging expertise in radiation oncology, radiotherapy, and medical physics.

Objectives

ICARO-4 aimed at:

- Review the current role and potential of clinical, medical physics, technological, and molecular/biological innovations in radiation oncology.
- Discuss the status of evidence-based recommendations for treating common cancers.
- Exchange information on the latest advances and implementation challenges in the field among leading experts.
- Define future challenges and directions in the clinical use of radiotherapy.

Themes and Topics

The conference focused on:

- Technological innovations in radiotherapy
- Medical physics advancements
- Molecular and biological innovations in radiation oncology
- Patient-centered care in radiation oncology
- Evidence-based treatment protocols for common cancers

Workshops and Side Events

ICARO-4 featured various workshops and side events, including:

- Workshops: Practical sessions on topics such as reirradiation techniques, safety considerations, and balancing efficacy with potential toxicity.
- Side Events: Discussions on the current role and future potential of technological, medical physics, and molecular/biological innovations for routine clinical practice in patient-centered radiation oncology.

Sustainability Initiatives

In line with its commitment to sustainability, the IAEA organized ICARO-4 as a 'green meeting' according to the Austrian Ecolabel, including:

- Paper-smart documentation
- Waste reduction and recycling
- Environmentally friendly catering

CELEBRATING OUR TEAM'S ACHIEVEMENT:20 MAY 2025

We are pleased to share that two of NCCCR members, Dr Radwa Maher Pharmacy Supervisor and Ms Gilrose Brinas, Laboratory Senior Technologist, have successfully completed the Improvement Coach Program.

This certification reflects their strong commitment to quality and continuous improvement, and will further support their valuable work within their respective departments.

On behalf of the NCCCR executive leaders , I extend my sincere congratulations to both of them. We are confident that the skills and insights they have gained will positively impact our ongoing efforts to enhance patient care and safety.

EVENING ONCOLOGY & HEMATOLOGY CLINIC IMPROVES ATTENDANCE WITH SIMPLE INTERVENTION

To better serve our national oncology and hematology patients, especially those with morning work commitments—NCCCR launched an evening clinic to reduce pressure on morning services and provide greater flexibility.

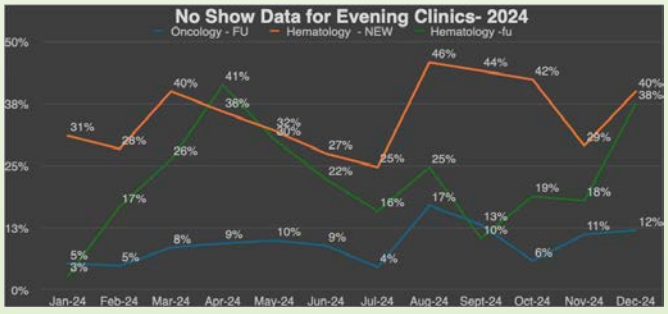
However, the clinic initially faced a challenge: around 40% of patients were not showing up for their scheduled appointments, leading to wasted slots and reduced access for others.

With the support and engagement of NCCCR leadership, the team introduced a patient confirmation system, calling patients two days before their appointment to confirm attendance. If a patient could not come, the slot was offered to another patient in need.

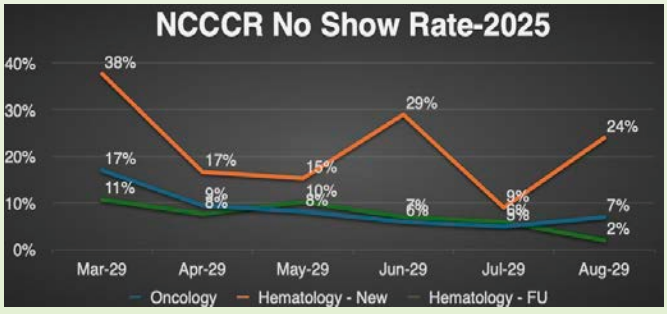
This simple but effective step reduced the no-show rate ,improving clinic efficiency, ensuring better use of resources, and helping more patients receive timely care. Says Mrs. Sharifa Al-Naar Senior Administrative Affairs Supervisor at NCCCR.

In the picture Mrs. Sharifa and colleagues celebrating the successful project.

Before the implementation of the project intervention:



After the Implementation of the project intervention



GLOBAL SPOTLIGHT ON DR. ANAS HAMAD:
FIP NOMINEE LEADING EASTERN MEDITERRANEAN PHARMACY

The International Pharmaceutical Federation is a global organization representing pharmacy, pharmaceutical sciences, and education. Within its Hospital Pharmacy Section, regional vice presidents play a vital role in aligning local priorities with global strategies. Dr. Anas Hamad, the Director of Pharmacy at the National Center for Cancer Care and Research (NCCCR), was chosen from a pool of highly qualified nominees to be the FIP Vice President for its Hospital Pharmacy Section in the Eastern Mediterranean Region. His experience in leading large-scale hospital pharmacy operations and his extensive contributions to research and policy positioned him as the standout candidate.

Dr. Hamad is not only the Director of Pharmacy at NCCCR, but he is also the head of the Medication Safety and Quality Center and the Pharmacy Research Center at Hamad Medical Corporation. Dr. Hamad is also a Clinical Associate Professor of Clinical Pharmacy & Practice at Qatar University. In addition, he is leading the Health Technology Assessment and Innovation Regulation Project in the National Health Strategy 2024-2030 at the Ministry of Public Health. Through these roles, he has consistently demonstrated a unique blend of clinical expertise, academic rigor, and leadership in workforce development, all of which are qualities central to FIP's mission.

As FIP Vice President for the Eastern Mediterranean, Dr. Hamad will oversee initiatives to strengthen regional pharmacy systems, support continuing professional development, and foster collaboration across diverse healthcare contexts. His selection signals confidence in his ability to unite stakeholders, promote evidence-based practices, and represent the region's evolving needs at a global level. Dr. Hamad's nomination is more than a personal achievement; it is a milestone for regional pharmacy leadership. His appointment is expected to inspire greater engagement across the profession, accelerate regional collaboration, and elevate the role of pharmacists in delivering high-quality, patient-centered care worldwide.

EMPOWERING FUTURE PHARMACISTS: DR. SHEREEN ELAZZAZY HONORED FOR EXCELLENCE IN CLINICAL TEACHING

Dr. Shereen Elazzazy is the leader of the clinical pharmacy service at the National Center for Cancer Care & Research (NCCCR), Clinical Associate Professor at Qatar University's College of Pharmacy, and Cancer Expert and Cervical Cancer Elimination Strategies Consultant with WHO. On May 19th, 2025, she was recognized for her outstanding contributions to pharmacy education with the Excellence in Clinical Teaching Award. The award was presented to her by Qatar University's Vice President for Health and Medical Sciences Office, in the Third Annual Clinical Faculty Members Appreciation Day.

Amidst the official 481 top-tier clinical educators affiliated with the 5 Health Cluster Colleges at Qatar University, governmental, and Private Hospitals, Dr. Elazzazy was selected for this prestigious award. It celebrates her 15 years of commitment to integrating didactic teaching as well as bedside teaching with rigorous academic standards, supervising structured practical experiences that prepare students for real-world clinical roles. Her work in developing assessment tools, guiding experiential placements, and advocating for pharmacist-led clinical services has set a high standard for clinical education.

Qatar University's teaching recognitions honor educators who demonstrate measurable excellence in student engagement, innovative teaching approaches, and improved learning outcomes. Dr. Elazzazy's award underscores her ability to bridge the gap between academia and clinical practice, fostering a new generation of skilled pharmacists prepared to meet the demands of modern healthcare. By acknowledging her achievements, this award also highlights the collaboration between educators, clinicians, and students that drives the advancement of pharmacy education in Qatar.

HOPE DAY 2025:
ADVANCING ONCOLOGY PHARMACY EXCELLENCE IN QATAR

The National Center for Cancer Care & Research (NCCCR), part of Hamad Medical Corporation, organized the 5th Hematology/Oncology Pharmacy Educational (HOPE) Day on September 6, 2025, at St. Regis Marsa Arabia Hotel in Doha. The annual symposium has become a key platform for advancing pharmacy practice in oncology across Qatar and the broader region.

HOPE Day 2025 brought together pharmacists, clinicians, academics, and researchers to explore emerging trends and innovations in cancer care. The program featured sessions on antimicrobial stewardship, bispecific therapies, pharmacogenetics, and best practices in palliative care. Through lectures, case discussions, and an interactive workshop, participants engaged with experts to share evidence-based strategies and practical solutions for improving patient outcomes.

The event emphasized the vital role of pharmacists in multidisciplinary cancer care teams, highlighting leadership, clinical decision-making, and medication safety. Attendees gained insights into optimizing treatment protocols, implementing new therapies, and enhancing patient-centered care.

Since its inception, HOPE Day has strengthened knowledge exchange, professional development, and collaboration between academic, clinical, and research teams. By focusing on both emerging therapies and real-world challenges, the symposium supports Qatar's national goals of excellence in specialized healthcare.

The 5th edition of HOPE Day reinforces NCCCR's commitment to fostering innovation, cultivating expertise, and elevating the standard of oncology pharmacy practice. It continues to serve as a platform where knowledge, collaboration, and clinical excellence converge to improve cancer care for patients across the region.