





Date: 19.10.2023

To,

Child vikas foundation. 17th Cross Road, No. 441, 35th Main Rd, JP Nagar Phase 6, Bangalore, Karnataka 560078.

This is in reference to Master Harish, 5 years old boy child who developed, imbalance since May 2023 and upon MRI done in August 2023 was found to have posterior fossa lesion with obstructive hydrocephalus. He underwent complete excision on 21.08 2023. Subsequently, a diagnosis of WHO Grade 4 CNS embryonal brain tumour (Medulloblastoma) which an aggressive tumour with a propensity to spread along the brain and spine was established. At present he has stable disease, and needs by craniospinal irradiation (CSI), i.e radiotherapy to the whole brain, spinal cord and meninges followed by tumour bed boost, for a duration of 6-7 weeks. As he is a very small child, delivery of high-precision RT for him.

Craniospinal irradiation is best delivered by modern, image-guided, pencil beam scanning proton beam therapy, which, with its inherent ability of 'no-exit dose results in sparing of all critical structures, namely lungs, thyroid, cochlea, heart, bowel, genitalia, hippocampi and surrounding brain parenchyma etc. This leads to very minimal side effects of craniospinal irradiation with proton beam therapy compared to the conventional radiotherapy. thereby resulting in preserved quality of life. There is compelling high-quality international evidence showing that modern proton beam therapy has superior intellectual outcomes, better preservation of 1Q scores, and significant reduction in haematological toxicity, compared to any form of conventional photon-based CSI Moreover, moderni proton beam therapy has been shown to significantly reduce the incidence of secondary malignant neoplasms by 2- 15 times because of significantly reduced integral dose to normal tissues when compared to any form of conventional photon therapy 4. Due to these significant benefits, proton beam therapy is now endorsed as the preferred modality for CSI in Medulloblastoma in guidelines and model policies from several leading oncology societies including ASTRO (USA), JASTRO & ISHPO (Japan), Canada, etc. Since he is a very young child with a potentially curable malignancy, the question of long-term quality of life and minimizing the risk of radiation induced secondary malignancies is of paramount importance in his case, which makes him an ideal candidate for proton beam therapy. (Links to the references are attached below.

The entire duration of treatment with intensity modulated proton beam therapy, including planning, will be approximately 7 weeks. The total cost of the treatment with proton beam therapy will be approximately 30 lakhs INR. Any help in facilitating the above is greatly appreciated.

Thank you,

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