



UCI

Dr Jackson Orem

One of the questions doctors hear most often from patients and families is: "Why did one person survive while another person with the same cancer did not?" It is a difficult question, especially when people compare experiences among friends, relatives, or public figures.

Many people assume that if two patients are diagnosed with the same type of cancer, they should have the same treatment journey and outcome. However, cancer is far more complex than that. Even when two people have the same cancer, their outcomes can be very different because every patient is unique.

Why outcomes differ

The first major factor is the stage of cancer at diagnosis. Cancer stage refers to how far the disease has spread in the body. A patient diagnosed early often has a much better chance of successful treatment compared to someone diagnosed when the cancer has already spread. For example, breast cancer detected early may be treated successfully through surgery and additional therapies. But if it is discovered late, after spreading widely, treatment becomes more dif-

Why two people with the same cancer have different outcomes



ficult. Late diagnosis remains a major challenge in Uganda. Many people delay seeking medical attention due to fear, stigma, financial difficulties, misinformation, or lack of awareness about symptoms.

The second factor is the biological behaviour of the cancer itself. Even within the same cancer type, some subtypes grow differently and respond differently to treatment. Some breast cancers grow slowly and respond well to hormonal therapy, while others are more aggressive and resistant. Modern medicine now allows doctors to study tumour characteristics and choose more personalised treatments.

Another important reality is that medicine does not always behave predictably. Some patients with advanced cancer respond very well to treatment, while others diagnosed early may still experience complications or recurrence. This unpredictability is why cancer care requires continuous monitoring and individualised treatment.

At the Uganda Cancer Institute,

doctors consider many factors before treatment, including cancer type, stage, laboratory findings, imaging results, age, general health, and available treatment options. Cancer care is increasingly personalised, with new technologies helping to identify genetic and molecular features of tumours to guide treatment decisions.

Human factors

A patient's overall health plays a major role in outcomes. A physically strong patient may tolerate treatment better than someone with other conditions such as diabetes, heart disease, HIV, kidney disease, or malnutrition. Cancer treatment, including chemotherapy, surgery, and radiotherapy, can be physically demanding, and nutrition, immunity, and mental wellbeing all affect recovery.

Age can also influence outcomes. Younger patients may tolerate aggressive treatment better, although this is not always the case. Some cancers also behave differently in

younger and older patients.

Access to timely treatment is another critical factor. Patients who begin treatment early often do better than those who face delays. Financial barriers such as transport, accommodation, nutrition, and repeated hospital visits can also disrupt care. Some patients stop treatment early due to cost or discouragement.

Treatment adherence is equally important. Some patients complete treatment and attend follow-ups, while others stop early when they feel better or experience side effects. In some cases, patients rely solely on alternative medicine, which can delay effective care.

Emotional and psychological well-being also matters. Cancer affects both body and mind. Depression, fear, and anxiety can make treatment harder, while strong family support, counselling, and spiritual encouragement improve resilience. Patients with strong support systems often cope better.

Public perception can sometimes lead to misunderstandings. When a public figure dies of cancer, people may assume treatment does not work. But they may not know how advanced the disease was or how complex the case was. Similarly, survival does not mean others failed. The key lesson is that early detection and timely treatment significantly improve outcomes.

The writer is the executive director, Uganda Cancer Institute

Many blood pressure medications, especially some diuretics, beta-blockers, and calcium channel blockers, list dry mouth as a side effect. Saliva protects your teeth by washing away food, neutralising acids, and controlling bacteria. When saliva is reduced, you are more likely to get cavities, especially along exposed tooth roots in older adults. If you notice persistent dryness, talk to your doctor and dentist about solutions such as sugar-free chewing gum, saliva substitutes, or changing medications if appropriate.

Medicine side effects to watch for

Some blood-pressure drugs can cause visible oral effects:

- **Gingival enlargement:** Certain calcium channel blockers (for example, nifedipine) can cause the gums to grow over the teeth.
- **Taste changes or mouth sores:** ACE inhibitors and ARBs may cause altered taste.

Practical tips

- **Keep your dentist informed:** Tell your dentist you have high blood pressure and list all medications, including dose and how often you take them.
- **Get blood pressure checked before treatment:** For safety, dental clinics often check blood pressure before procedures. If yours is very high, the dentist may ask you to see your doctor first.
- **Improve gum health:** Brush twice daily with fluoride toothpaste, clean between teeth daily, and visit the dentist regularly for cleanings. Good oral hygiene reduces inflammation that can harm both gums and your blood pressure.
- **Reduce stress at appointments:** Tell your dentist if you get anxious because simple steps such as breathing exercises or short breaks can prevent blood pressure spikes during treatment.
- **Coordinate care:** If medications cause oral problems, your dentist can discuss options with your doctor. Sometimes switching drugs or adding dental treatments helps.

When to seek help

See your dentist if you have persistent bleeding gums, swelling, bad breath, a change in how your teeth fit together, new mouth sores, or long-lasting dry mouth. Seek immediate medical attention for sudden facial or throat swelling, difficulty breathing, or severe chest symptoms.