Cameroon Townhall for Healthcare Professionals

Meeting Minutes, March 14, 2026

Host: Cameroon Townhall for Healthcare Professionals

Date: March 14, 2026

Session: No. 129

Chair: Dr. Munoh Kenne Foma

Co-Moderators: Elvis Ndansi (moderator for this session)

Guest Speakers: Dr. Luegenia Ndi, MD, internist; President of ACPA (2025 to 2027), Association of Cameroonian Physicians in the Americas (ACPA); Dr. Munoh Kenne Foma, MD, MPH, medical oncologist; Chair of ACPA Medical Missions, ACPA; Chair, Cameroon Town Hall; Dr. Joshua Tambe, MD, PhD, MPH, radiologist (cancer imaging), Assistant Professor, Faculty of Health Sciences, University of Buea (local lead for the programme)

Distinguished Guests: Dr. Nadege Fackche, surgical oncologist, ACPA Chair of Education and Scientific Research, Dr. Benjamin Vabi, colorectal surgeon (ACPA), Dr. Efua Leke-Fonlon, obstetrician gynaecologist, ACPA President-Elect, A surgical oncologist and palliative care physician, Chicago, Prof. Alan Tita, Chair of the ACPA Board of Directors, Dr. Florence Zeh Kakanou, Permanent Secretary of the National Cancer Control Committee, Sidney Tazeh, medical physicist, CLEAR Radiology, Buea, Prof. Mathias Fobi, A paediatrician and medical school teacher

Title: Giving Back: The ACPA 2026 Cancer Screening and Advanced Cancer Education Program in Buea

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Agenda Items:

1. Welcome and introduction by Elvis Ndansi
2. Presentation of ACPA by its President, Dr. Luegenia Ndi
3. Presentation of the ACPA 2026 Cancer Screening and Advanced Cancer Education Program by Dr. Munoh Kenne Foma
4. Discussion and Q&A
5. Remarks by ACPA members and partners
6. Closing remarks

Opening Remarks:

- Elvis Ndansi said giving back is a core pillar of the town hall, which started its giving back initiative two years earlier and now counts about 2,450 participants in about 36 countries. He said giving back is a responsibility, not charity: transferring skills, building systems and mentoring.
- He introduced the session on the ACPA programme in Buea, run with the Buea Regional Hospital and the University of Buea Faculty of Health Sciences, and noted that too many cancer patients in Cameroon are diagnosed late.

Presentation Points:

Presentation by Dr. Luegenia Ndi: "ACPA 2026 Cancer Screening and Advanced Cancer Education Program, Buea, March 24 to 27, 2026"

1. ACPA and its mission:

Dr. Ndi said ACPA was about to celebrate its tenth anniversary in Atlanta in April, with about 150 registered members across 23 specialties. Its aims are professional development and networking, integration of Cameroonian trained physicians into US medicine (at least about 35 residents placed with ACPA support, including the Chair), a forum on health issues, involvement in care and policy in Cameroon, and training physicians who stay in Cameroon. This would be ACPA's first physical mission in Cameroon after earlier support to groups on the ground.

2. Why Buea, and why now:

The Chair said Buea was chosen because it was relatively stable, as a model to be repeated elsewhere, including Bamenda, once conditions allow. Many ACPA members trained in the US, so the mission was also a fact finding visit. He said Cameroon has no national screening guideline for any cancer, and that ACPA would use the experience to advocate to the Minister for regular screening.

3. The cancer burden seen locally:

He described a rising burden of breast cancer, persistently high cervical cancer, prostate cancer in men and rising colorectal cancer. Surgeons at the regional hospital see colon cancer only at obstruction, metastasis or ascites; there was no colonoscopy service in the South West, referral pathways are fragmented, and rural patients often attribute cancer deaths to witchcraft. He noted the Minister had made mammography available in all 10 regions.

4. Screening offer:

Screening for breast, cervical, prostate and colorectal cancer would run at the Buea Regional Hospital and CLEAR Radiology from Tuesday March 24, after a fact finding

day. Breast screening would include clinical examination with ultrasound or mammography, using a threshold of 40 years, aiming at over 300 mammograms; a mammogram normally costs about 17,500 FCFA. Cervical screening, digital rectal examination with prostate screening, and faecal occult blood testing (FIT not being available) would be offered, with referrals for colonoscopy to partners in Douala.

5. Education and tumour boards:

Daily symposiums at the University of Buea would cover breast (Tuesday), colorectal (Wednesday), cervical and prostate cancer (Thursday), with a multidisciplinary tumour board on Friday. Sessions would include hands-on workshops and decision making in resource limited settings, open to physicians, nurses, students and patients. The Chair stressed teamwork: 'no tissue, no issue', with pathologists and radiologists as important as oncologists. He said the aim was to start a multidisciplinary tumour board in the South West.

6. Partners:

Partners named included Prof. Halle-Ekane (University of Buea), Dr. Mokake Divine, director of the Buea Regional Hospital, Sidney Tazeh of CLEAR Radiology, Dr. Yauba Saidu of the Clinton Health Access Initiative, Dr. Joshua Tambe as local lead, the Cameroon Oncology Center (which would present on radiation oncology, noting Cameroon has one linear accelerator and a cobalt machine that is often down), Mbingo's radiation oncologist, faculty from Yaoundé and Bamenda, and the US Embassy. The Chair said the Minister of Public Health supported the programme and offered to intervene if administrative obstacles arose; clearance from the Cameroon Medical Council had been obtained.

7. Expected outcomes:

Goals were early detection in the community, a programme backed by the regional hospital for continuity, practical cancer care skills for local staff, guideline based multidisciplinary care, stronger referral and follow-up, and a scalable model for future programmes. Members travel at their own expense.

Discussions and Q&A Session:

- **Elvis Ndansi (from the chat): will costs be clearly communicated so patients are not surprised by fees?** An ACPA leader said cervical, prostate and colorectal screening and registration are free; for mammography, a 3,000 FCFA hospital registration fee applies while the mammogram itself is covered by ACPA. Dr. Tambe said each mammogram includes a full clinical examination and must be archived for future comparison, which the registration covers. A participant later urged that 'free' must

mean free, and Elvis Ndansi noted that 3,000 FCFA is a lot for many Cameroonians. The Chair said new donations might allow the fee to be waived.

- **Elvis Ndansi: how will you handle an overwhelming turnout, as happened with a kidney disease screening in the South West and Littoral that reached 35,000 people in under three months?** The Chair said patients would be given appointments for later days and that the programme was built into the regional hospital and CLEAR Radiology so screening could continue. A participant suggested registering people in advance by cancer type. The Chair said the hospital director had set up a team to separate campaign flow from routine activity, with daily coordination meetings.
- **How will continuity of care be ensured?** The Chair said the work runs through existing government structures, with the regional hospital setting up a referral system and the Cameroon Oncology Center and Mbingo teams involved, and that memorandums of understanding with US teaching hospitals would follow. An ACPA leader stressed referral and counter-referral back to the patient's own facility, to spare patients the cost of staying in Douala.
- **From the chat: will the data be used to build AI diagnostic tools trained on African patients?** Dr. Fackche said data would be recorded and that locally driven research is needed. Dr. Tambe said algorithms trained elsewhere do not transfer well, so local images from local equipment should train local models, while warning against AI hype. He said the Permanent Secretary of the National Cancer Control Committee planned to attend all four days and use the event to launch regional multidisciplinary tumour boards, and had asked how the team planned 400 faecal occult blood tests for 400,000 FCFA (about 1,000 FCFA per test), with a view to scaling it during colorectal cancer awareness month.
- **A paediatrician and medical school teacher: what about HPV vaccination?** The Chair said HPV vaccine is free in the national programme, supported by Gavi and UNICEF, now given to girls and boys aged 9 to 11, and that the main barrier is rumours that it sterilises girls. The programme would reinforce education rather than run vaccination. The paediatrician suggested framing it as cancer prevention rather than linking it to sexual activity.
- **Dr. Benjamin Vabi (comment)** He cited an 11% rise in colorectal cancer incidence in Cameroon from 1999 to 2017, more cases in young people, a suture clinic for students, a case list being prepared with Dr. Mokake, and challenged local scientists to develop a local stool screening test.
- **Prof. Alan Tita, ACPA board chair (comment)** He recalled working in Acha after medical school, endorsed the programme on behalf of the board, and said health problems ultimately lie with politics, so professionals should engage to put the right decision makers in place.

- **Sidney Tazeh, CLEAR Radiology (comment)** He said his staff were ready, that breast cancer is a cancer where early diagnosis makes a real difference because treatment exists in Cameroon, and that the cohort of about 300 women would give a first picture of incidence, as more women in their 30s are being diagnosed.
- **Dr. Florence Zeh Kakanou, Permanent Secretary, National Cancer Control Committee (comment)** She asked for a working session with the team during the visit and feedback afterwards on lessons learned, and said the national committee belongs to everyone.

Call to Action and Closing:

- Elvis Ndansi announced a personal donation of $5,000 earmarked for screening; Dr. Ndi committed that every franc would go to screening patients.
- A surgical oncologist and palliative care physician from Chicago said it would be her first visit to Cameroon and that she saw it as a chance to learn about palliative care there. Prof. Fobi said he was one of ACPA's founders and was proud to see the two groups together.
- Dr. Ndi invited physicians to the ACPA annual conference in Atlanta, April 24 to 26, 2026 (acpacmr.org), where the President of the Cameroon Medical Council, Dr. Rudolph Fonkoua, was expected, and said a report on Buea would be presented there.
- The Chair thanked partners and the ACPA board for funding, noted the town hall's past support to cholera and COVID-19 programmes and to the Cameroon English-speaking medical students' (CAMESA) campaign, and said the Minister had promised the day before to help remove any obstacles.
- Elvis Ndansi closed by calling the programme an example of diaspora and local professionals working together.

Recording: https://www.youtube.com/watch?v=j7BLcdVfMSc

Submitted by: Co-Moderators, Cameroon Townhall for Healthcare Professionals