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DIRECTOR'S MESSAGE

FWHPWI Calls for Urgent Action Against the Critical Surge of Early-Onset Cancers in Young African Women

There was once a time when cancer was whispered about in our communities as a disease reserved exclusively for the elderly. Today, a devastating shift is happening across Africa. Across the continent, we are witnessing an unprecedented and alarming influx of vibrant, young African women in their twenties, thirties, and forties entering oncology clinics. Various data sources confirm that Africa is facing a critical surge in early-onset cancers (diagnosed in adults under 50). This crisis demands immediate public attention, systemic policy reform, and community action.

Experts warn that early-onset breast, colorectal, and gastrointestinal cancers have spiked significantly in younger populations globally. But the epidemiological burden falling on sub-Saharan Africa is uniquely severe. While wealthier nations see only 5% to 7% of breast cancer cases occurring in women under 40, data from the Breast Imaging Society of South Africa (BISSA) reveals that a staggering 20% of breast cancer cases in South Africa occur in this younger demographic ⁽¹⁾. Furthermore, historical registry analyses demonstrate that up to 38% of cases in certain regional African cohorts are women under 50 ^(2,3).

Demographic shift in early-onset cancers represents a profound societal crisis compounded by severe structural deficits in local healthcare infrastructure. Recent studies from the University of Cape Town reveal that 67% of South African patients present with advanced-stage disease due to systemic shortages of diagnostic mammography units, surgical services, and oncology specialists ⁽⁴⁾. Unfortunately, this is not just a statistics problem – when a young African mother or breadwinner is diagnosed, the clinical outlook is uniquely challenging. The International Agency for Research on Cancer (IARC) warns that women in sub-Saharan Africa diagnosed under the age of 40 face significantly lower survival rates than older cohorts, with net 5-year survival frequently falling below 50% across the region ⁽⁵⁾. Consequently, these premature deaths trigger a catastrophic, intergenerational economic and social impact, permanently destabilizing the welfare, financial security, and education of African families ^(6,7,8).

The causes behind this Surge of Early-Onset Cancers in Young African Women are complex, combining genetic predispositions, environmental factors, and overlapping health crises:

► **Aggressive Biological Subtypes:** Emerging genomic research indicates that women of African ancestry may be biologically predisposed to more aggressive, fast-growing cancer strains, such as Triple-Negative Breast Cancer (TNBC), which naturally peak at an earlier age ⁽⁹⁾. Recent breakthrough studies on the continent have also identified unique African genetic variants linked to these early-onset patterns ⁽¹⁰⁾.

► **The HIV Sub-Epidemic:** Sub-Saharan Africa's unique healthcare landscape includes a heavy intersection with infectious diseases. Young women living with HIV are being diagnosed with advanced breast and cervical cancers at a significantly younger age – often averaging just 42 years old compared to 56 years old for HIV-negative individuals ⁽¹¹⁾.

► **Urbanization and Shifting Lifestyles:** Rapid dietary changes, higher stress levels, increased alcohol intake, and metabolic shifts are driving up early-onset colorectal and metabolic-linked malignancies across African youth ⁽¹²⁾.

As we can no longer afford to treat cancer as an afterthought or a disease of old age, FWHPWI calls on governments, healthcare providers, and the public to implement a multi-pronged counter-strategy:

1. We urge all young women from the age of 20 to practice regular breast self-examinations and report any unusual bodily changes immediately.
2. African public health policies must adapt to local demographics. We need localized, resource-appropriate risk assessment tools that account for African genetic profiles.
3. Governments must operationalize specialized units to provide fast-tracked telehealth and pathology testing closer to rural communities ⁽¹³⁾.

Age is no longer a shield against cancer. We must share this knowledge, destigmatize the disease, and demand the diagnostic infrastructure our young women deserve.

Dr. F. N. Alaribe Nnadozie
(MD, FWHPWI)

1.SABC; 2.Cape Argus; 3.eNCA; 4.University of Cape Town News;
5.IARC; 6. IOL; 7.IARC/WHO; 8.IARC/WHO; 9. eCancer;
10. University of the Witwatersrand; 11. Bhuiyan, M.;
12. Anazodo, F.I. et al; 13. Ngwa, W. et al

Just a few ways
to reduce your risk
of gynecological
cancers advised
by
the US National
Foundation for
Cancer Research

► **Have your Pap test
by age 21.**

The Pap test looks for abnormal cell changes in the cervix to detect cervical cancer in its early stages.

► **Protect yourself
from Human
papilloma virus
(HPV)**

Talk to your doctor about getting the HPV test and HPV vaccine. Also, limit your sexual partners and, when you do have sex, use a condom.

► **Don't smoke.**

Smoking increases the risk of different cancers including cervical, ovarian, vaginal and vulvar cancers.

► **Make healthy
choices.**

It's important to maintain a healthy weight, be active and eat a healthy diet consisting of fruit, vegetables, lean proteins and whole grains.

► **Share your family
history with your
doctor.**

Genetic testing is now available to see if you carry a *BRCA1* or *BRCA2* mutation, which could put you in a high-risk category for ovarian and breast cancer. If you carry a genetic mutation associated to Lynch Syndrome, a heredity condition that increases your risk of colon cancer, ovarian cancer, uterine cancer, etc.

► **Contact your doctor
if you notice any of
these symptoms.**

- Abnormal vaginal bleeding or discharge
- Pelvic pain or pressure
- Abdominal or back pain
- Bloating
- Changes in bathroom habits (increased urination, constipation, diarrhea)
- Itching or burning of the vulva
- Changes in vulva color or skin (rash,

FWHPWI EVENTS

The FWHPWI's steadfast commitment to community health awareness is being fulfilled. The first half of our year, dedicated to "Empowering Women through Health, Knowledge, and Technology," saw the successful rollout of several key initiatives:

► **28 March 2026:** FWHPWI hosted an impactful online outreach session focused on **Personal branding**. Carlson Bawe, a professional nurse from Cameroon, led the session for approximately 80 participants. The masterclass provided actionable insights into career advancement, covering:

- **Resume Building:** Crafting high-impact CVs for the healthcare and development sectors.
- **LinkedIn Optimization:** Leveraging digital networks for strategic job searches.
- **Professional Presence:** Building a credible, authoritative personal brand online and offline.
- **Skill Monetization:** Interactive exercises on successfully marketing professional skills.
- **Organizational Visibility:** Aligning personal brands with broader institutional goals.

► **18 April 2026:** FWHPWI team attended the PACHWA workshop and training seminar at St. Martin de Porres Catholic Church in Sunnyside, Pretoria. The event featured expert insights from counsellor Anastacia Tlhapané and social worker Mrs Mmutle, focusing on holistic community well-being. Key takeaways included:

- **Mental Health Literacy:** Deepening the understanding of psychological well-being.
- **Practical Counselling:** Equipping attendees with foundational support skills.
- **Self-Care Strategies:** Implementing daily practices to preserve mental health.
- **Strategic Networking:** Fostering vital connections for future joint mental health outreaches.

► **25 April 2026 (6th Annual Conference):**

FWHPWI successfully hosted its 6th Annual Conference virtually via Zoom. Themed "Women's Health in Africa: Leveraging AI, Education & Research to Combat Cancer," the global event brought together key stakeholders, researchers, and advocates. Professor Euchay Ngozi Horsman delivered a powerful keynote address aligning with the core theme. The conference featured a distinguished panel of guest speakers, including Nurse Carlson Bawe, Prof. Jacqueline Tembu, Prof. Anuli Regina Ogbuagu, and Prof. Etienne Alain Feukeu. The rigorous, engaging sessions explored four critical sub-themes:

- **Cancer Research in Africa:** Navigating systemic challenges and unlocking new opportunities.
- **Empowerment Through Education:** Utilizing health literacy to improve patient outcomes.
- **AI Innovations:** Deploying artificial intelligence for early screening and precise diagnosis.
- **Healthcare Entrepreneurship:** Driving innovation in cancer care and medical technology.

The event concluded with highly interactive Q&A sessions and networking segments, sparking vital conversations that will shape FWHPWI's advocacy roadmap moving forward.

📣 **Join us Empower Women's Health Today**

Our impact is only possible because of advocates like you. Here is how you can take action today:

- Are you an organization or researcher? **Partner With Us** to collaborate on our upcoming health projects.
- **Sign Up for FWHPWI Membership** to join our global network of healthcare professionals, researchers, and advocates.

RESEARCH NEWS

The 2026 Hantavirus Landscape:

Understanding the Threat

For those new to the discussion, hantaviruses belong to the family *Hantaviridae*. They are zoonotic viruses transmitted to humans primarily through the inhalation of aerosolized urine, droppings, or saliva from infected rodents¹ Unlike the respiratory viruses that have plagued global populations in previous decades, hantaviruses do not spread easily from human to human.² A rare exception occurs with the Andes virus strain in South America, which can transmit between people through prolonged, close contact.³ Instead, hantavirus infection remains a disease of proximity – driven by humans encroaching upon the natural habitats of rodents or by rodents invading human spaces in search of food and shelter.

In humans, the virus manifests as two severe, clinically distinct syndromes: Hantavirus Pulmonary Syndrome (HPS) – also referred to as Hantavirus Cardiopulmonary Syndrome (HCPS) – which predominantly attacks the lungs and causes rapid respiratory failure, and Hemorrhagic Fever with Renal Syndrome (HFRS), which targets the kidneys and induces systemic hemorrhaging.⁴ Both conditions progress aggressively, carry high mortality rates approaching 40%, and require immediate intensive critical care.⁵

Dr. F. N. Alaribe Nnadozie
(MD, FWHPWI)

1.WHO; 2.WHO; 3.U.S., CDS;
4.Moore RA, Griffen D., Bing et al.;
5. Moore RA, Griffen D.

Click here to read
the latest issue of
our Magazine

How Cancer Care is Evolving in 2026

A recent feature in *Your Health Magazine* highlights how modern oncology is moving rapidly away from a “one-size-fits-all” approach toward highly personalized, data-driven interventions. The key pillars driving this 2026 healthcare evolution include:

- **Precision Oncology:** Utilizing genomic testing and RNA profiling to identify specific tumor mutations, allowing clinicians to select highly effective targeted therapies with less patient toxicity.
- **Expanded Immunotherapy:** Checkpoint inhibitors and CAR T-cell therapies are successfully extending patient survival rates across broader solid tumors, early-stage diseases, and pediatric cancers.
- **Artificial Intelligence (AI):** Reshaping diagnostics by accounting for 80% of current AI applications in oncology. AI tools are drastically reducing clinical trial patient-matching times from two hours down to just 30 minutes.
- **Next-Gen Tools:** Non-invasive liquid biopsies are detecting molecular signs of cancer recurrence early, while personalized cancer vaccines train a patient’s own immune system to target specific tumor profiles.

[Read more](#)

Guideline Update: New Options for Cervical Cancer Screening

The American Cancer Society (ACS) has updated its cervical cancer screening guidelines to improve access and address rising cancer rates in older individuals:

- **Self-Collection Approved:** Average-risk individuals aged 25–65 can now use FDA-approved self-collected vaginal specimens for primary human papillomavirus (HPV) testing.
- **Testing Intervals:** While clinician-collected primary HPV tests are preferred and done every 5 years, a negative result on a self-collected test requires repeat testing every 3 years.
- **New Exit Requirements:** To stop screening after age 65, individuals must have negative primary HPV or co-testing results at both age 60 and age 65 (or three consecutive negative Pap tests).

[Read more](#)

Lessertia frutescens commonly known as cancer bush shows great anti-cancer potential



Image credit: news.nwu.ac.za

Researchers at North-West University (NWU) have found that extracts from the indigenous South African *Lessertia frutescens* (cancer bush) show significant potential in combating drug-resistant lung and colorectal cancers. The team plans to develop an affordable, locally produced complementary medicine by 2027.

CancerNews Africa

Do you know?

A scientist at Jackson State University in Mississippi obtained a US patent issued 1 Feb 2005 on extracts of Vernonia amygdalina, an African medicinal plant sometimes called Bitterleaf (or Bitter Leaf). According to the patent, the extracts are effective against cancer. The inventor obtained samples in Benin City, Nigeria.

(Source: *Out of Africa Mysteries of access and benefit*)

[Read more](#)



[Click to join us](#)
[share information about the cancers](#)

Global Health Inequity: The Ongoing Kaposi Sarcoma Crisis in Sub-Saharan Africa

An article published in *The Cancer News* highlights a stark global disparity in oncological care, noting that while Kaposi Sarcoma (KS) is largely controlled in Western nations through antiretroviral therapy (ART), it remains a devastating crisis in sub-Saharan Africa. Fueled by a high regional prevalence of human herpesvirus 8 (HHV-8) and limited access to critical healthcare infrastructure, the region accounts for 73% of global KS cases, resulting in an alarming five-year survival rate of just 45%.

[Read more](#)

Rising Demand Drives Massive Growth in Kenyan Cancer Care Services

Cancer Care Kenya has nearly doubled its annual revenue to almost KSh1 billion. This financial growth, driven by rising patient numbers and advanced treatment uptake, underscores a critical health challenge as Kenya faces approximately 45,000 new cancer cases and 29,000 deaths annually. While the Kenyan government is expanding regional treatment capacity and offering financial support through the Social Health Authority, medical experts emphasize that early screening remains urgent, as over 70% of local cancer cases are still diagnosed at advanced stages.

[Read more](#)

Researchers at the University of Cape Town (UCT) successfully decoded how the MUC1 protein rewires its sugar coating to evade the human immune system.

A UCT-led research team has decoded a major cancer survival strategy by uncovering how

tumors alter the MUC1 protein's sugar coating to evade immune detection. In a healthy body, MUC1 acts as a protective shield, but cancer cells shorten these sugar chains, turning the protein into a “cloak of invisibility” that actively helps tumors grow. By mapping this exact molecular breakdown using advanced computer modeling, the scientists have provided a vital blueprint for developing next-generation cancer vaccines, diagnostic biomarkers, and precision therapies.

[Read more](#)

Sub-Saharan Africa's Botanical Treasury for Cancer Treatment

A review published in *Plants* identifies 556 plant species from 110 families used for cancer treatment in sub-Saharan Africa, where 80% of the population relies on traditional remedies. Key findings highlight *Fabaceae* and *Asteraceae* families, with *Kigelia africana* and *Annona muricata* frequently used, offering promising phytochemicals for future drug discovery.

[Read more](#)



Image credit:
[wikipedia.org](https://www.wikipedia.org)



Image credit:
deepai.org/machine-learning-model/

Upcoming Events

12TH GLOBAL SUMMIT ON CANCER SCIENCE & THERAPY

AUGUST 03-04, 2026

**ZURICH,
SWITZERLAND.**

This premier global event is set to convene the brightest minds in cancer, hematology cancer, research, and healthcare leadership.

[Read more](#)

INTERNATIONAL SYMPOSIUM ON ONCOLOGY AND CANCER PREVENTION

14 OCTOBER 2026

**JOHANNESBURG,
SOUTH AFRICA**

Get a chance to converse with experts about the most pressing concerns in the field.

[Read more](#)

WORLD CANCER CONGRESS 2026

SEPTEMBER 24–26

HONG KONG

Unites global leaders, advocates, and policymakers to advance cancer control and reduce the disease burden.

[Read more](#)

ESMO CONGRESS 2026

OCTOBER 23–27

MADRID, SPAIN

One of the most highly influential global oncology meetings for clinicians, researchers, and patient advocates to witness new impactful data and breakthroughs in clinical practice.

[Read more](#)

*The COVID-19
pandemic exposed the
importance of
this practice.*



Never

forget the practice!

*It is necessary
for your health
now and always.*

Do it often.

*The best for you is to
keep safe for yourself
and for us all.*



HEALTH AND LIFESTYLE

Structured Exercise Slashes Recurrence Risk for Colon Cancer Patients

A landmark randomized controlled trial presented at ASCO shows that participating in a structured exercise program after chemotherapy offers a profound survival advantage for stage 2 and 3 colon cancer patients. The study found that a three-year physical activity program reduced the risk of cancer recurrence or new cancer by 28% and slashed the overall risk of death by 37%. Medical experts note that these absolute survival gains rival, and in some cases exceed, the benefits achieved through traditional chemotherapy drugs, establishing structured exercise as a powerful, necessary component of standard cancer care.

[Read more](#)

Research Spotlight: How Exercise Powerfully Boosts Cancer-Fighting Immunity

A comprehensive review highlights that physical activity acts as a potent, natural boost for the immune system, directly enhancing the body's ability to prevent and combat cancer. Key scientific insights from the study include:

- **Immediate Immune Mobilization:** A single session of intense exercise rapidly mobilizes highly functional white blood cells into the bloodstream, preparing the body to target abnormal cells.
- **T-Cell Optimization:** Consistent, chronic exercise increases the abundance of vital T-cells while actively reducing the number of dysfunctional, exhausted immune cells.
- **Adjuvant Therapy Potential:** The data strongly supports integrating tailored exercise regimens alongside traditional cancer treatments like immunotherapy to counteract cancer-induced immune

- dysfunction.

[Read more](#)

Research Reveals How Healthy Habits Directly Lower Post-Cancer Mortality

A landmark study published by the World Cancer Research Fund and Newcastle University has revealed that following evidence-based lifestyle guidelines significantly improves long-term survival rates after a cancer diagnosis. Analyzing data from over 28,000 individuals, the researchers found that fully meeting just one lifestyle recommendation correlates with an 8% lower risk of all-cause mortality, while meeting the highest tier of guidelines lowers the risk by 16% across multiple cancer types. The findings heavily reinforce that maintaining a healthy weight, staying physically active, and limiting alcohol, red meat, and ultra-processed foods are critical habits for both primary cancer prevention and long-term survivorship.

[Read more](#)

Harvard Health outlines five core principles for a healthy diet

The guidelines focus on long-term habits, high-quality, minimally processed foods, and abundant fruits and vegetables.



Image credit: deepai.org/machine-learning-model/

The guidelines recommend prioritizing plant-based proteins, limiting saturated fats and added sugars, and focusing on nutrient-dense options to support overall wellness.

[Read more](#)

In review of the scientific literature on the relationship between vegetable and fruit consumption and risk of cancer, results from 206 human epidemiologic studies and 22 animal studies are summarized. The evidence for a protective effect of greater vegetable and fruit consumption is consistent for cancers of the stomach, esophagus, lung, oral cavity and pharynx, endometrium, pancreas, and colon. The types of vegetables or fruit that most often appear to be protective against cancer are raw vegetables, followed by allium vegetables, carrots, green vegetables, cruciferous vegetables, and tomatoes.

<https://www.jandonline.org/>

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Advertising in our magazine is ideal for businesses in Nigeria and South Africa, targeting to impress their clientele and to attract more prospective customers and collaborators.

Blueberry antioxidant smoothie



Anthocyanins, a type of flavonoids found in blueberries, are a key component for their many health benefits.

Ingredients

- 1 cup blueberries
- 1 handful of spinach
- 1/2 cup plain regular or nondairy yogurt
- 1 cup regular or nondairy milk
- 1/2 banana

Blend together until smooth. If you're looking for a thicker consistency, add a few ice cubes before blending. [Read more](#)



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