Mohale Moloi 02:10

As the sun rises in orange farm south of Johannesburg, Porsche and junk when he gets ready to see a doctor at Charlotte Maxeke Academic Hospital 45 kilometres away

Mohale Moloi 02:29

she was diagnosed with cancer in 2020 After discovering a lump

Portia Njangwini 02:35

The night before. So when I touched the breast, I felt that I had a big lump. On my left side.

Mohale Moloi 02:43

The gravity of the situation hit Portia when she saw a nurse for a checkup on her pregnancy.

Portia Njangwini 02:49

So she felt a lump and said no, this might be serious, I need to go to hospital.

Mohale Moloi 02:57

The results weren't good.

Portia Njangwini 02:59

I went back after two weeks to get the results. Then, that's when I was told that I've got breast cancer stage three. The doctors told me that I need to terminate the pregnancy. Because me being pregnant at that time, it meant I was feeding the cancer every day. That's why it was so aggressive.

Mohale Moloi 03:22

She decided to go through with the chemo and keep the baby.

Portia Njangwini 03:26

And then they took the tumour out, and they had to cut the right breast just to resize it to this one. So after all that, I finished my chemotherapy then I was sent to Charlotte Maxeke for radiation. I have been waiting for 10 months for radiation, which I might go soon. That's why they said wait for a year or more

Mohale Moloi 04:00

The head of Radiation Oncology at Charlotte Maxeke, Doctor Duvern Ramiah, says it's not just breast cancer patients who have to wait.

Duvern Ramiah 04:09

So sometimes the breast cancer waiting lists can go up to sort of 12 months to 18 months. And the prostate cancer waiting list is sitting somewhere around about five years at the moment.

Mohale Moloi 04:20

The wait is because of staff shortages.

Duvern Ramiah 04:23

And that process involves radiation oncologist, a radio or a radiotherapist and a medical physicist. Now the issue in Charlotte [Maxeke] is that we don't have enough of any of those three professionals to treat the number of patients that come in. And if you don't have an adequate amount of staff doing it, then you don't have enough radiotherapy plans being churned out of your department and you can't actually fill all the slots in your machine and that's where the issue actually lies now.

Mohale Moloi 04:52

The problem with waiting too long for radiation is that it increases the chance of your cancer returning.

Duvern Ramiah 04:58

It's a very, very tough conversation to have with patients and it's probably one of the reasons why a lot of radiation oncologists, for example, don't like working at a place like Charlotte because you get involved in conversations that are difficult for you to have with patients. As a radiation oncologist. If you see a patient and decide that they need radiotherapy, you obviously want to get them treated, right. That's, that's what you've done. That's what you've been trained to do. And obviously, if there is an issue, in terms of the resources available to you, you've then got to explain to your patient that you can't, you know, you need treatment, but we can't actually do it for you now, because of various issues.

Mohale Moloi 05:39

Over at Netcare's Milpark hospital just three kilometres away, we find Dr. Carol Ben, who works at the Breast Care Centre. She used to work part time in the breast cancer department of a public hospital

Carol Benn 05:52

But I want to put on the table that private isn't better than government. Each group has its own set of problems. The sadness is it's the people who are suffering for something that can be so well managed. So I do think that having some form of sensible national health, but it has to be managed properly, every person has to be performance managed.

Mohale Moloi 06:18

Louise Turner works with Dr. Benn She's a breast cancer survivor. And even though she was on medical aid when she was diagnosed, it wasn't smooth sailing.

Louise Turner 06:27

When I started, they were aware I'd been diagnosed and needed treatment, but the medical aid excluded me for a pre existing condition for a year.

Mohale Moloi 06:36

So she had to use public healthcare. In her experience, the difference in care often comes down to attitudes and access.

Louise Turner 06:44

Unless there is a change in the attitude of our government, our conditions, the hospitals, people cannot access services. Where you stay, what you earn, what your demographic is, what your bank balances, etc should not make a difference to accessing care.

Mohale Moloi 07:06

Portia remembers feeling nauseous travelling back home to Orange Farm on public transport after treatment.

Portia Njangwini 07:13

The sad part is going back after taking chemotherapy, it's not easy, because you are not okay. You need someone.

Mohale Moloi 07:24

She's anxious to be declared cancer free, along with 1000s of other people on waiting lists across the country.