GUIDELINES FOR PARENTS

Care of Childhood Cancer Survivors

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10 FAQs on CARE OF CHILDHOOD CANCER SURVIVORS

1. What precautions do we have to take for our child and till when?
2. When should we bring our child for visit again and how often?
3. What should be the child’s diet?
4. Can our child resume school/college and participate in all extra-curricular activities?
5. What tests are required after completion of treatment and how frequently should they be done?
6. What vaccines should our child receive and when?
7. How do we improve our child’s quality of life?
8. Can our child’s disease come back? What are the warning signs of disease coming back?
9. What could be the late side effects of the treatment our child has undergone?
10. Does a cancer survivor have fertility issues later in life?
IAP Parent Guideline Committee

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Q1
What precautions do we have to take for our child and till when?
Depending on the intensity of chemotherapy received, the immunity of your child would be restored completely in 6 months to 1 year after treatment. Regular hygiene practices should be maintained and taught to the child as way of life.

Q2
When should we bring our child for visit again and how often?
In the first year, physical examination and laboratory evaluation would be done 3 monthly, followed by 6 monthly for the next 2 years, and annually thereafter. It is advisable to visit your child's pediatrician for regular health issues. In case a need is felt, he/she would refer your child back to the oncologist.

Q3
What should be the child’s diet?
As your child has completed treatment his blood cell count would be in the normal range and therefore there would be no dietary restrictions, but a balanced diet is advised. Ultraprocessed foods should be avoided. Homemade foods are best for your child.
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**Q4**
Can our child resume school/college and participate in all extra-curricular activities?

Yes, school or college can be resumed as your child would no longer have increased susceptibility to infection. It is advisable that the teacher is made aware of child’s medical history.

**Q5**
What tests are required after completion of treatment and how frequently should they be done?

In the 1st year, complete blood counts with peripheral smear, liver function tests, and renal function tests would be advised 3 monthly. If the child has been treated for a solid tumor, local X-rays, ultrasound, or other imaging modalities would also be advised.

Investigations for treatment-related long-term side effects would usually be done 6 monthly in the next 2 years and annually thereafter.

**Q6**
What vaccines should our child receive and when?

Vaccines are recommended 6 months after completion of chemotherapy and after 12 months of allogenic bone marrow transplant.

Indian Academy of Pediatrics (IAP) vaccination schedule for childhood cancer survivors should be followed and vaccines can be administered by the pediatrician after planning with the oncologist.

**Q7**
How do we improve our child’s quality of life?

A balanced diet as advised by dietician and regular exercise under the guidance of physiotherapist along with good family support will ensure good quality of life.

If the child has been operated for a bone tumor or has undergone limb surgery, then regular follow-up with the occupational therapist would improve the functioning of the limb. Sessions with the counselor and psychologist will help the child to reintegrate with society. Child should join school or college and participate in extracurricular activities whenever possible.

Joining certain cancer survivor organizations would help the child to connect with other survivors and help in dealing with challenges or long-term side effects.
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There is a possibility that the cancer may come back, based on known risk for relapse.

The highest chance of the disease coming back is in the first 2 years following stopping the therapy.

It is very rare for the disease to relapse after 2 years.

Also, there is a very low risk of secondary malignancy later in life with use of certain chemotherapy drugs.

Warning signs of a relapse include fever, infections, lumps or swellings of some parts of the body, bleeding manifestations, loss of appetite, loss of weight, and an increase or decrease in blood counts.

The child can have certain late side-effect depending upon whether chemotherapy or radiotherapy was given. Fatigue is a common symptom. Child may have some issues with heart, lung, kidneys, nerves, bone, joint, and muscles after chemotherapy. You should not get disheartened as not all children will have these side-effects.

Depending on the site of radiotherapy, the following side effects can occur: Cataracts, dry mouth, permanent hair loss, problems with thyroid or adrenal glands, slowed growth in children, and memory problems.

Does a cancer survivor have fertility issues later in life?

- Depending upon the chemotherapy that your child has received, he/she may have reduced fertility or total loss of fertility.
- However, if your child’s sperms or ovarian tissue has been cryopreserved, then with advanced techniques, he/she could have biological children.

Cancer Survivors Do Well

- Specific side effects based on the chemotherapy that the child has received and the type of malignancy that he/she has suffered can be discussed with the pediatric oncologist who has treated the child.
- Most of the childhood cancer survivors do well in later life and a regular follow-up throughout their childhood and adulthood will go a long way in ensuring a good quality of life.