

CALABARZON CANCER HOSPITAL

A Thesis Presented to the Faculty
Architecture Department
De La Salle University – Dasmariñas
Dasmariñas City

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In Partial Fulfillment of the Requirements in Architectural Design 9 and
Architectural Design 10 – Architectural Thesis (ARET 511 – ARET 521) for the degree
Bachelor of Science in Architecture

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March 2011

Abstract

"Cancer is the third leading cause of morbidity and mortality in the Philippines. Leading cancer sites/types are lung, breast, cervix, liver, colon and rectum, prostate, stomach, oral cavity, ovary and leukemia. There is at present a low cancer prevention consciousness and most cancer patients seek consultation only at advanced stages. Cancer survival rates are relatively low. The Philippine Cancer Control Program, begun in 1988, is an integrated approach utilizing primary, secondary and tertiary prevention in different regions of the country at both hospital and community levels. Six lead cancers (lung, breast, liver, cervix, oral cavity, colon and rectum) are discussed. Features peculiar to the Philippines are described; and their causation and prevention are discussed. A recent assessment revealed shortcomings in the Cancer Control Program and urgent recommendations were made to reverse the anticipated 'cancer epidemic'. There is also today in place a Community-based Cancer Care Network which seeks to develop a network of self-sufficient communities sharing responsibility for cancer care and control in the country." (Corazon A. Ngelangel¹ and Edward H. M. Wang.)

Although identified as one of the more frightening diseases in the Philippines, Filipinos are still, by and large, unaware of cancer and its causes. They only realize that they really have cancer when it is in the terminal levels. Cancer awareness is what the people need first – and to do so, the Philippines must have the ample capacity and necessary facilities to treat it.

Children are not exempt from Cancer cases. Even though the elderly tend to be the common cases of Cancer in the Philippines, the age bracket which the disease affects gradually creeps into younger people, where acceptance of the disease will be more troublesome compared to older people.

Cancer is one of the most lethal diseases in the world, and in the Philippines, it is regarded as the third most frequent disease, only lower than communicable and cardiovascular diseases. A hospital specializing in Cancer treatment will help alleviate this problem; however, these factors should be considered in suggesting such a solution in the Philippine medical scene:

Care – Long term treatment and facilities intended for terminal patients.

Diagnosis – Providing the latest technology to access the earliest diagnosis possible

Prevention – Produce possible Cancer Solutions through a Cancer Research Center.

Treatment – providing the five pillars of cancer care: Radiology, Surgery, Pathology, Oncology and Therapy.

As of the time this thesis was written, the Philippines has yet to build a Cancer Specialty facility which will accommodate the growing population of Cancer patients. If given the chance, why not design one that can give the utmost treatment, as well as help the Filipino people be aware of the relief it could give if Cancer can be detected at early stages and significantly reduce the overall risk of cancer in the Philippines? Why not try to make it so that Cancer may be changed into the least cause of death in the Philippines?

Those are some of the questions that have inspired us to pursue this study. The severity of such a disease in the country should be taken care of. If this thesis will help, if even a bit, to offer solutions, possibilities, and hope to those who need and seek for it, then this thesis shall have served its purpose.