


**Testing for Link Between Bacteria and Stomach Cancer in Aklavik
CBC Special Report, Wednesday, February 6, 2008, 7:40 a.m.**

 RANDY HENDERSON, CBC: If you have a belly ache, Aklavik is the best place in Canada to be this week. That's one of the jokes that's going around the community's nursing station. That's because a half dozen of the top gastrointestinal specialists in the country are there and, as we told you last week, there's a major medical research project going on in the community. Doctors are hoping to learn more about a possible link between a bacteria and high rates of stomach cancer. Joining me on the line from Aklavik is Dr. Bob Bailey, one of the project leaders. Good morning, Dr. Bailey.


BAILEY: Good morning, Randy. How are you? You're right; this is the place to be.

CBC: That's the place to be, indeed. And I hear that you've taken over the nursing station. What's it like there these days with all equipment and all the people that you've brought there?

BAILEY: Lots of action, lots of excitement, the place is just a buzz. I don't know if you've been to Aklavik, but they have a first-class nursing station. The people are really in good shape up here. And we've been able to take over, temporarily, of course, about five of the examining rooms and we've set up a station for five physicians and nurses and helpers to see the patients and to pass an endoscope and get biopsies for helicobacter and have a little chat, so it's quite a place. They still have a stream of patients who come in for medical problems. The situation can handle it, but it's a busy place.

CBC: No kidding. And you've been in the community for a few days now and I guess some of your staff are staying with families, they're being billeted in the community. So have you got any sense of what the buzz is on the streets of Aklavik?

BAILEY: Yup, absolutely. There are about 30 of us I would think in the team and we're staying at different places throughout the community, boarding homes and people's houses and the nursing residence, any place they could find a spot for us. Last night we were out at the dance. We saw some of the local children put on their speciality dances and we ended up having a few dances with them ourselves. It gave us a chance to talk to

people and I think the community are really thrilled that we're here. Randy, can I tell you that one of the things was this is sort of nothing out of the blue and I know you painted it initially as a research project, but, boy, over several years, maybe as many as 10, the doctors here and the doctors that come up from Inuvik to do speciality clinics, in particular John Morse who works out of Yellowknife, felt that there was definitely more stomach problems in Aklavik than other places. Like the incidents of gastric cancer, cancer of the stomach, in the Northwest Territories is somewhat higher, not dramatically but somewhat higher, than the rest of the population. And when you look at Aklavik, there are families where gastric cancer is in the family. So when you look at Aklavik, there are more people with gastric cancer here than throughout the Territories. Now, the numbers are small. So the community said, hey, listen, we've got a problem here. And in medicine we've figured out helicobacter, this bacteria, had something to do with gastric cancer. And we've got a smart bunch of people here and they said can you not do something for us? We've got abdominal discomfort, there's more gastric cancer around, we know that we've got helicobacter. And the reason they knew they had helicobacter is because most of their health care needs, sort of any intervention, is done in Inuvik and so they fly over to Inuvik and get it done. So it was through that observation that the community said, listen, help us out here, and the medical profession and the nurses and everybody who looks after everybody said, yeah, sure, we'll do something. So it started to roll about a year and a half, two years ago, because we needed to get all kinds of people involved. 

CBC: And Dr. Morse was telling us about this on Friday's program. And as you mentioned, you're testing people who volunteer. I mean you're there at their invitation and it's not really too invasive. I know you put a tube down the nose...

BAILEY: No, no, Randy, it's easy. Yeah, we do.

CBC: But have you had anybody come in for a test and then chicken out?

BAILEY: We've had a couple people who are pretty nervous and that makes sense. I mean it's something new. You know, if you haven't had any of that stuff before, it can... Yeah, there's some nervous people. If somebody really said I don't want this in my nose at all, I wouldn't have them swallow it or put it down their throat. We're prepared if there was a problem to make people sleepy, but nobody has had to be sleepy. And, Randy, we had 40 people the first day and then I think word got out through the community, because we didn't have to make anybody sleepy at all. So yesterday we were busy. Today we have at least 55 people whose names we have that are coming in here,

but last night at the dance and at some of the social gatherings, people said, well, listen, I'm not on the list, can I come? So you know, you talked about word on the street, well the word on the street is this is not tough and this is helpful. 🗣️

CBC: In just the short time we have here, doctor, the results so far, what have you found?

BAILEY: I'll answer your question in terms of what did we find when we looked down. For the most part we don't find anything bad at all. We see normal, healthy stomachs, and that's what we'd expect. We have found nobody with cancer. We found one fellow with an ulcer in his duodenum, that's just a little past the stomach. We found one woman with an ulcer in her stomach but it was benign, not cancer. And we found two or three people with arosaphesophogitis (?). That means burn marks in the oesophagus from acid. And those people said, boy, I got terrible heartburn, can you see anything there? But they're about four or five people out of, what have we done to far? Eighty, with no cancers.

CBC: No cancers, but have people tested positive for the H. pylori virus?

BAILEY: Well, yes and no, and again we don't know anything about what we've found looking out the scope. We've done some breath tests and about 50 percent of the people have helicobacter. But the biopsies are flown back to Edmonton and there we're going to interpret the studies. Like, it's not a quick turnaround; you need to do some special...(inaudible)...on the studies, and we're doing something special, as well. Ordinarily Yellowknife, Edmonton, if you come into the doctor and you have helicobacter we don't test for sensitivities because we can give you the medications. But we just don't know if there isn't a bit of a problem here, so we're going to grow the helicobacter and test them against individual drugs in the lab and then come back to the community and say we had the best concoction of medicines for you. 🗣️

CBC: Really? So you're custom building an antibiotic for the stain of this bacteria in Aklavik.

BAILEY: You got it, but we're not going to design an antibiotic, we're going to use antibiotics already in existence but we're going to get the best combination.

CBC: And when will that be?

BAILEY: Well, I think it will be within a month or two, but it's going to take that long. This helicobacter, unlike most bugs that we grow in the lab, is really a toughy to grow. We got to grow it specially.

CBC: Did you say grow?

BAILEY: We're going to grow it on 200 people.

CBC: Exactly.



BAILEY: Big deal.

CBC: When you talk about helicobacter, is that the H. pylori virus?

BAILEY: Hum, hum.

CBC: The same thing, okay.

BAILEY: No, it's not a virus, bacteria.

CBC: Bacteria.

BAILEY: H. is for helicobacter and P for pylori.

CBC: Alright. So, Doctor, what is it like to see this project underway after all the work you've done setting it up?

BAILEY: Oh boy, this is marvellous. You know, Randy, this is a first in the whole world. Nowhere in the world have a group of people ever gotten together like this to come into a community to help a bunch of people and to learn some things. You know, one of my jobs is I work for something called the Northern Health Services Network, and so we're kind of a communicator between the North and the South. But let me tell you, the Capital Health from Edmonton, Alberta Heritage Foundation, the federal government, the provincial government here in the Northwest Territories, and I gotta tell you that the Premier was well aware of what was going on here and really encourages it, and I don't have to remind you that he's also the Member from Inuvik but this all happened before he became the Premier, everybody has pitched in. So it is really, really, really exciting.

CBC: Well, with that, Dr. Bob Bailey, thanks for joining us and all the best in the rest of your stay in Aklavik.

BAILEY: Well, listen, thank you very much for letting us chat and if anybody in Aklavik is listening, we still have a few spots and if anybody in the rest of the Territories is listening, you tell them to phone their relatives here in Aklavik and get in and get looked after, because something is really special here.

CBC: Alright. Thanks again.



BAILEY: Okay, Randy.

CBC: Bye bye now.

BAILEY: Nice to talk to you. Bye.

CBC: Dr. Bob Bailey has been instrumental in bringing this testing project for the H. pylori bacteria to Aklavik.