EDITORIAL

TUMOUR REGISTRIES: REQUIREMENT & NEED IN PAKISTAN

Cancer registries are used for the record of history, diagnosis, treatment, and disease status for every cancer patient, the record which is easily reproducible. The data from these registries is used for the detailed information and management of cancers. Data analysis of diseases is very important to know the pattern, frequency and prevalence of that disease. The tumour registries can be of various types depending upon the mode of data collection. There are many types of cancer registries like population based, hospital / institution based, radiology data based, biopsy data based etc.

The most important are population based tumour registries. The hospital / institution based cancer registries are the part of a localized collection of data in a single institute and are managed by the hospital authorities, whereas the population based cancer registries are governed by the state health department. The hospital based cancer registries are mostly used to improve the therapy for malignant diseases. Both hospital and population based cancer registries can use their data for epidemiological studies, comparison of treatment strategies of different clinics and reporting data at national data base level. In almost all the developed countries population based cancer registries exist like in United States, SEER, (Surveillance, Epidemiology, and End Results) registry collects and publish data on cancer incidence and survival throughout the country.

The population based cancer registries, register the frequencies of new cancer cases every year in well defined population. The data is collected through different sources like treating clinicians, pathologists and death certificates. The frequency of the cases is expressed as "per 100,000" of population. If there is an unexpected increase in a particular malignancy then hypothesis about possible cause is generated and then hypothesis is investigated as second step with the aim to recognize and reduce the risk. On the other hand the hospital/institution based registries collect detailed data of diagnosis, therapy etc of their own institute. These registries can provide very useful information for researchers and help clinicians to determine the results of different cancer treatments^{1,2}. When population based registries are not available then hospital/institution based tumour registries play very important part in the systematic collection of data³. Quality of life (QoL) can also be studied from data based on population based cancer registries to assess the record of guality of life regarding social and emotional health of the cancer patient by a particular treatment4. An effective National Cancer Control Program (NCCP) is the main requirement in Pakistan. In many guidelines and studies of Pakistan the same point has been stressed since long but organized dedicated efforts are not made so far⁵. In many proposals of Pakistan, a national or regional cancer registration system, and smaller cancer proposed as focal units are point. The requirement of a population-based Cancer Registry has been recognized by National Action Plan on Chronic Diseases (NAPNCD) also. Only then the target population can be made aware of the preventive measures to reduce incidence for a particular neoplasm, like breast carcinoma; which not only in each and every study of Pakistan has been found on top of the female malignancies but its frequency up to 33% has been reported in some studies⁶.

As in most developing countries, cancer incidence is increasing in Pakistan. There are no national or proper provincial level population based cancer registries in Pakistan. Due to this the clear trends of cancer incidence is not known. The frequency based Cancer data is available in the form of hospital and departmental based records at some centers⁶. Although there are a few regional/institution based cancer registries working in Pakistan [Rawalpindi, (AFIP tumor registry), Karachi Cancer registry, at Lahore's center of excellence in Oncology include a research center and a population-based tumor registry for Lahore district etc]^{3,7-9}. But there is no countrywide population based cancer registry in Pakistan. Therefore there is dire need to have a Population based Cancer registry at National level.

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Brig Shahid Jamal

MBBS FCPS (Pak) FRCPath (UK) Prof of Pathology & Consultant Histopathologist Army Medical College National University of Sciences & Technology (NUST) Islamabad Email: sjarjawj@gmail.com