

Foreword

The maintenance of a register of cancer cases serves many purposes. The recording of cases diagnosed and treated in a single hospital has a primarily clinical function, and is a valuable resource for monitoring and evaluating the work of the institution concerned, including the end results achieved. Registries which record the cancer cases arising in a defined population have rather different goals, which can be broadly categorized as assisting in planning and evaluating cancer-control activities for the populations concerned, and providing a data resource for epidemiological studies of cancer causation. This volume is concerned almost entirely with the functions of such population-based cancer registries, although one chapter is devoted to outlining the specialized functions of the hospital registry.

The development of population-based cancer registration, particularly over the last 20–25 years, has been marked by increasing standardization of methods and definitions. This process has been greatly facilitated by the foundation of the International Association of Cancer Registries (IACR) in 1966, and this monograph is the result of the close collaboration that has evolved between the Association and the International Agency for Research on Cancer (IARC). The first manual on cancer registration methodology was published as recently as 1976 (*WHO Handbook for Standardized Cancer Registries (Hospital Based)*, WHO Offset Publications No. 25). Two years later IARC and IACR published *Cancer Registration and Its Techniques* (by MacLennan, R., Muir, C.S., Steinitz, R. & Winkler, A.; IARC Scientific Publications No. 21), which incorporated all of the material from the earlier handbook, but made additions and changes of emphasis appropriate to population-based registries. Twelve years later, much of the work of cancer registries has been revolutionized by the almost universal availability of computers. Electronic storage and processing of data has greatly enhanced the potential for quality control, and analysis of the data collected has become a routine function, rather than solely an annual event. This monograph reflects these changes, and the now obsolete technology, based on manual filing and card indexes is outlined only briefly.

The monograph describes the steps involved in planning and operating a population-based registry. Several chapters are devoted to the uses to which cancer registry data may be put, and the methods appropriate for the analysis and presentation of results. Guidance is also provided on appropriate definitions and codes for the variables commonly collected by cancer registries, which includes a section on the classification and coding of neoplasms. It is thus intended that this monograph will replace its predecessors in becoming the standard work of reference on cancer registration methods.

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