HOSPITAL BASED CANCER REGISTRY Cachar Cancer Hospital & Research Centre, Silchar

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Cachar Cancer Hospital & Research Centre (CCHRC) has been established in 1996 by the Cachar Cancer Hospital Society, a non profit organisation in Silchar in southern Assam. It is a 100-beded comprehensive cancer centre serving patients predominantly from the Barak valley and Dima Hasao districts of Assam and the neighbouring districts of Tripura, Manipur and Meghalaya. About 3000 new (1700 cancers) and 15,000 follow-up patients are seen annually.

A department of Epidemiology & Tumour Registry has been started in 2008. The registry has been contributing data to the Cancer Atlas and Patterns of Care and Survival Studies for Head & Neck, Breast and Cervical cancers from the same year. The registry staff underwent a structured in-house training following which they were trained at Cancer Institute (W.I.A), Chennai, National Cancer Registry Programme (NCRP) under Indian Council of Medical Research (ICMR), Bangalore and Dr. B. Borooah Cancer Institute (BBCI), Guwahati. The Department of Information Technology (IT) in the hospital developed a hospital management system in-house. During follow-up it was found that a large number of patients gave wrong addresses or contact numbers. To address these issues, the department started collecting multiple (six) addresses, verification of contact numbers and making certain changes in the patient information sheet including road directions (and landmarks near) to patient's homes. In the year 2011, NCRP (ICMR) supported the registry with HBCR–DM software. The hospital registry has developed an aggressive follow-up programme that includes phone calls and home visits by field investigators. This Institute has registered a total number of 5,025 new and old cancer patients for the calendar year 2012-2014. Follow-up information is available for over 80% of patients treated at the hospital.

Currently registry staff are also engaged in preparing a report of all patients treated in the hospital from 2008 – 2010 with a 5 year follow-up and survival information.

The registry has applied to the NCRP for support to commence a Population Based Cancer Registry (PBCR) for the districts of Karimganj, Hailakandi and Dima Hasao.

Starro	r Reg	gistry
Research Officer cum Epidemiologist	::	Mr Amit Das
Research Officer (Non-medical)	:	Ms Gayatree Roy
Field Investigators	:	Mr Sagardeep Chakraborty
		Mr Premjit Kurmi
Social Investigators	:	Ms Anamika Chakraborty
		Mr Ajitesh Deb
		Ms Suma Biswas
		Mr Bijoy Pow Rongmei
		Ms Rupashree Mazumder
Data Entry Operator	:	Mr Sanjib Sutradhar
Registry General Duty Attendant	:	Mr Subash Kurmi
	:	Mr Sandeep Kr. Dhar

Table D.1 gives the total number of new cancers registered in hospital during the period of three years from 1st January 2012 to 31st December 2014. Accordingly, there were 4831 new cancers registered (2854 males and 1977 females).

Table D.2 indicates the number and proportion of specific sites of cancer associated with use of tobacco relative to all cancers.

The basis of diagnosis of cancers registered is shown in Table D.3. The proportion of microscopic confirmation was around 86% in males and 82% in females.

Table D.4 shows the details of microscopically verified cancers. The proportion of patients who were diagnosed by primary histology was around 64% in both sexes.

Table D.5 gives the number and relative proportion of cancer patients in diverse clinical extent of disease before treatment at the time of registering at the RI.

Table D.6 gives the number and relative proportion of cancer patients according to different treatment modality.

Males		Females		Females		Sox Datio	Total Casoo
#	%	#	%	שלא המווט			
2854	59.1	1977	40.9	144	4831		

Table D.1: Number (#) and Proportion (%) according to Sex and Sex Ratio Percent

Table D.2: Number (#) and Proportion (%) of Tobacco RelatedCancers (TRC) Relative to All Sites of Cancer

Sites of Cancer	Ма	les	Females	
	#	%	#	%
Lip	14	0.5	5	0.3
Tongue	156	5.5	45	2.3
Mouth	218	7.6	159	8.0
Oropharynx	45	1.6	14	0.7
Hypopharynx	283	9.9	48	2.4
Pharynx	30	1.1	-	-
Oesophagus	316	11.1	147	7.4
Larynx	92	3.2	22	1.1
Lung	431	15.1	117	5.9
Urinary Bladder	51	1.8	17	0.9
TRC	1636	57.3	574	29.0
All Sites	2854	100.0	1977	100.0

Table D.3: Number (#) and Relative Proportion (%) of CancersBased on Different Methods of Diagnosis

Method of Diagnosis	Males		Females	
	#	%	#	%
Microscopic	2463	86.3	1629	82.4
All Imaging Techniques	45	1.6	44	2.2
Clinical	286	10.0	275	13.9
Others	60	2.1	29	1.5
Unknown	-	-	-	-
Total	2854	100.0	1977	100.0

Table D.4: Number (#) and Relative Proportion (%) of Cancersbased on Different Types of Microscopic Diagnosis

Types of Microscopic Diagnosis	Ма	les	Females	
	#	%	#	%
Primary Histology	1576	64.0	1039	63.8
Secondary Histology	10	0.4	14	0.9
Primary Cytology	444	18.0	303	18.6
Secondary Cytology	375	15.2	244	15.0
Blood Film	10	0.4	3	0.2
Bone Marrow	48	1.9	26	1.6
All Microscopic	2463	100.0	1629	100.0

Table D.5: Number (#) and Relative Proportion (%) of CancerPatients according to Clinical Extent of Disease(Excluding Patients Previously Treated)

Clinical Extent	Ма	les	Females	
	#	%	#	%
Localised (L)	1357	53.2	895	52.4
Regional (R)	702	27.5	451	26.4
L+R	2059	80.7	1346	78.8
Distant	238	9.3	219	12.8
Others	249	9.8	141	8.3
Unknown	5	0.2	3	0.2
All Stages	2551	100.0	1709	100.0

Table D.6: Number (#) and Relative Proportion (%) of CancerPatients according to Any Specific Treatment Relative to AllTreatment Procedures (Treatment Only at RI)

Treatments	Males		Females	
	#	%	#	%
Any Surgery	280	24.6	239	30.0
Any Radiotherapy	417	36.7	262	32.9
Any Chemotherapy	438	38.5	295	37.0
Any Hormone Therapy	2	0.2	1	0.1
Any Others	-	-	-	-
Unknown	-	-	-	-
Total	1137	100.0	797	100.0