

Evaluation of data accuracy of the Prostate Cancer Registry at the Singapore General Hospital

*Dr Hong Hong Huang
Dr Norwin Tan Uy
Dr Hong Gee Sim
Dr Tsung Wen Chong
Dr John Yuen
A/P Christopher Cheng
A/P Weber Lau*

Outline

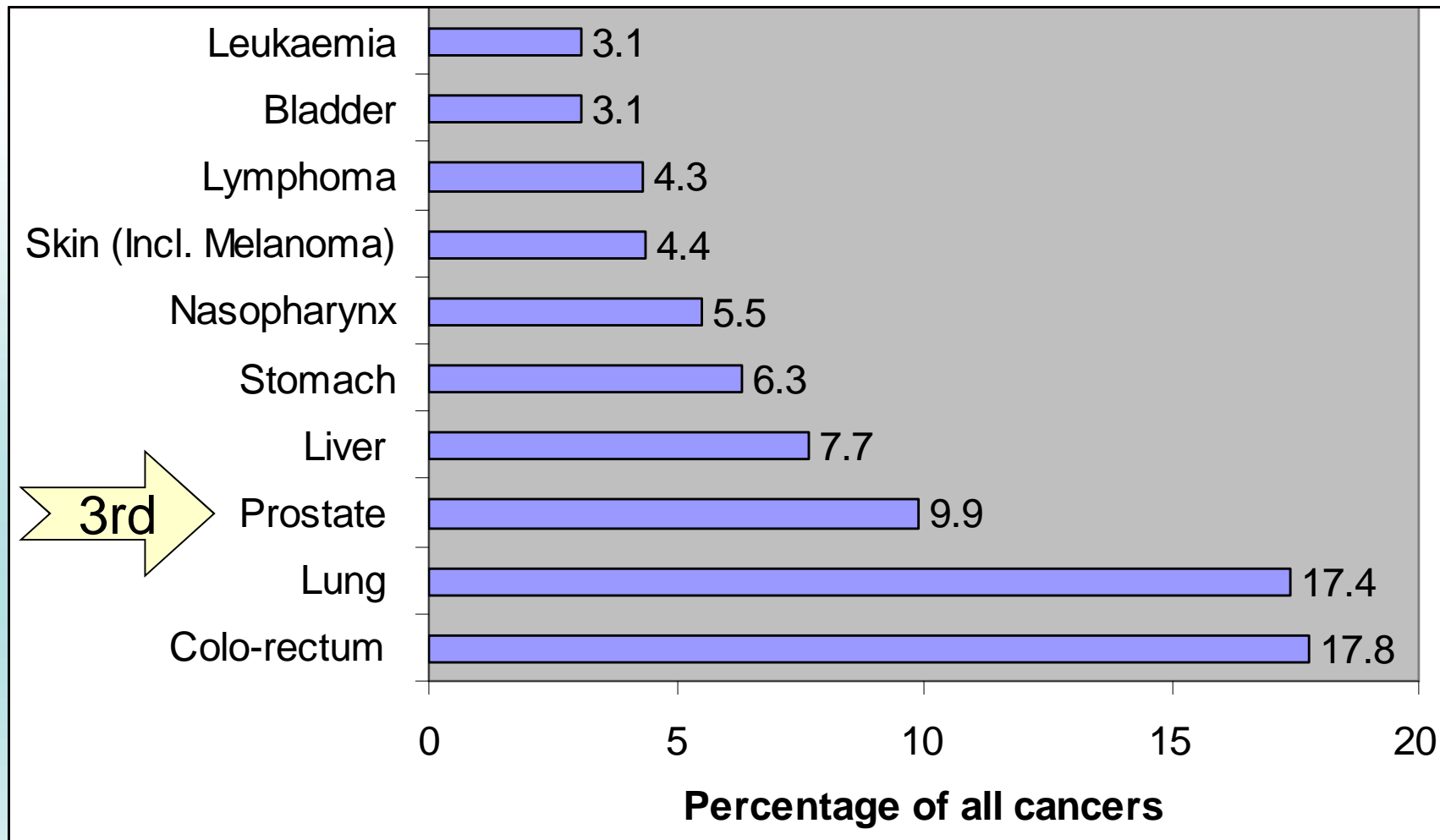
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2. Development of the Prostate Cancer Registry
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 - Objectives
 - Methods
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Singapore

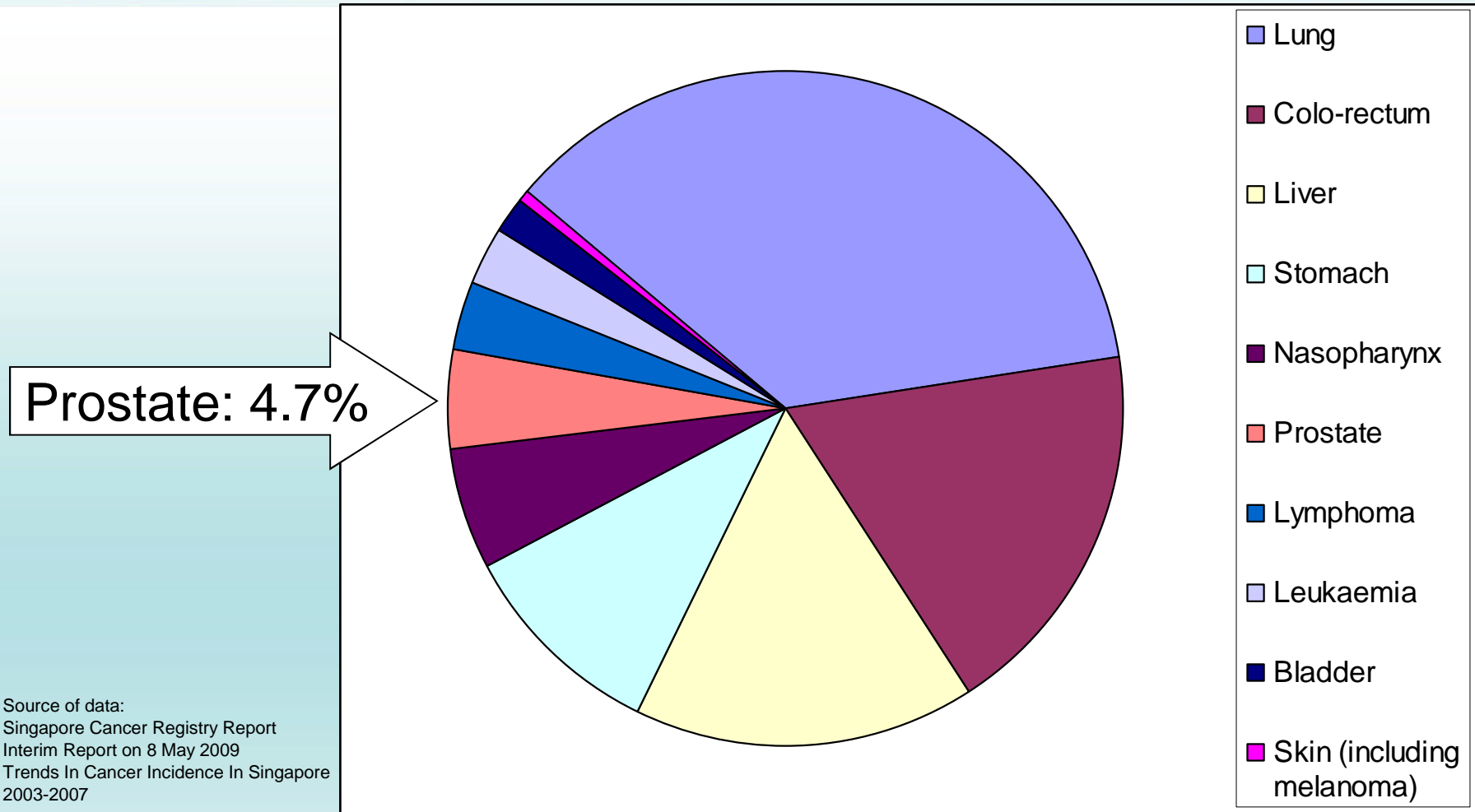


South-east Asia 682.7km² 4 million people (2000 census)
Main island of Singapore & several offshore islands

Ten Most Frequent Cancers in Males in Singapore, 2003 -2007



Mortality Rates for Ten Most Frequent Cancers in Males in Singapore, 2003 -2007



Source of data:
Singapore Cancer Registry Report
Interim Report on 8 May 2009
Trends In Cancer Incidence In Singapore
2003-2007

Development of the Prostate Cancer Registry

- Department of Urology Uro-oncology database since 1980's
- Standardized the prostate cancer dataset in Year 2008
 - Standards: CoC & NAACCR
- Started data quality control exercises from Year 2009

Evaluation of data accuracy

Objectives:

- To estimate rates of data accuracy of the prostate cancer registry
- To evaluate its compliance to CoC standards
- To identify problems in data collection and interpretation

Evaluation of data accuracy

Methods:

- Re-abstracting audits
- By an Urologist and a CTR who are not the original abstractors

Table 1: Define the scope of the evaluation

Total prostate cancer cases from 1980 to 2007	No of cases evaluated	% of caseload evaluated	CoC minimum requirement
2360	257	10.9%	10.0%

Evaluation of data accuracy

Results:

Table 2: Data accuracy of the prostate cancer registry at Department of Urology, SGH (1980 to 2007)

Data item	UCR performance	CoC recommendations
Date of birth	99.6%	90.0%
Date of diagnosis	98.8%	90.0%
Pre-op PSA	96.5%	90.0%
Gleason score at 1st positive biopsy for prostate cancer	94.6%	90.0%
Clinical staging	88.3%	90.0%
Cancer status at last follow-up	97.3%	90.0%
Survival status	100.0%	90.0%

Evaluation of data accuracy

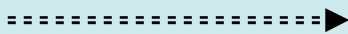
Conclusions:

- Majority of accuracy rates: exceeded the CoC requirement
- Clinical staging: not meet the CoC requirement
 - Not Urologists' staging
 - Abstractors: not trained in staging
 - No full time cancer registry staff (inconsistency)

Evaluation of data accuracy

Improvements:

- Urologists' staging (collaborations)
 - Biopsy reports
 - Operation reports
- CTR
- Full time cancer registrars
- Education
 - Qualifications of Cancer Registrars (MBBS)
 - Principles of Oncology for Cancer Registry Professionals
 - Cancer Registry conferences and workshops



100% accuracy rate



Summary

Key points to achieve high data accuracy rates:

- Collaborations
 - HOD / Director of Oncology / Director of Research
 - Urologists, Radiation / Medical Oncologists
 - Cancer Registrars
- Full time cancer registrars
- Education & Qualifications of Cancer Registrars

Thank you

Hong Hong Huang
MBBS, CTR
Research Scientist
Email: huang.hong.hong@sgh.com