

CANCER REGISTRY REPORT

The Cancer Data Management System/Cancer Registry collects data on all types of cancer diagnosed or treated in an institution and is one of the four major components of an approved cancer program. From the reference or starting date of January 1, 1990, through December 31, 2004, GBMC's Cancer Registry has abstracted into its database the demographic, diagnostic, staging, treatment, and follow-up information on 28,485 cancer cases. To ensure accurate survival statistics, the Registry is required to follow these patients annually. GBMC's follow-up rate is 97%.

All data are reported quarterly to the Maryland Cancer Registry (MCR), which is part of the Maryland Department of Health and Mental Hygiene, and annually to the National Cancer Database (NCDB), the data management system for hospitals and programs approved by the Commission on Cancer. Co-sponsored by the American Cancer Society and the American College of Surgeons, the NCDB uses submitted data for comparative studies that evaluate oncology care and provides a Benchmark Summary of Cancer Care and Survival in the United States. The Cancer Committee at the Greater Baltimore Medical Center authorized our facility's 2003 data submission to the NCDB, which included site and stage data, to be posted to the American Cancer Society's web site (www.cancer.org). This Facility Information Profile System (FIPS) allows patients to view the types of cancers diagnosed and treated at a particular facility and can help patients make more educated decisions about their cancer care.

The MCR uses data to evaluate incidence rates for the entire state, and compares data by region and county; they also participate in national studies. In addition to required reporting, the Cancer Registry at GBMC provides data for physician studies and educational conferences. The Maryland Cancer Registry, the National Cancer Database and the Greater Baltimore Medical Center support web sites.

One part-time and 3 full-time Certified Tumor Registrars and a part-time follow-up clerk staff the Cancer Registry at GBMC. For additional information, call 443-849-8063.

ANALYSIS

The Cancer Registry accessioned 1,972 cases during calendar year 2004. Of these, 1,857 were analytic cases—those patients who were initially diagnosed at GBMC and/or received all or part of their first course of treatment at GBMC. The 115 non-analytic cases were initially diagnosed and treated at other facilities before referral to GBMC for additional treatment for recurrent disease or were initially diagnosed or treated at GBMC prior to January 1, 1990. Many of these non-analytic patients chose to be treated in one of the many clinical trials available at GBMC.

In 2004, the mean age at diagnosis for males at GBMC was 59.8; for females, it was 55.91.

The racial distribution of 1,972 cases includes 83.9% Caucasian, 14.5% African-American 1.6% Asian.

While 53.2% of patients diagnosed or treated at GBMC live in Baltimore County and 18.1% live in Baltimore City, patients come from 19 other Maryland counties, Pennsylvania, Delaware, the District of Columbia and other states and countries for treatment.

SITE DISTRIBUTION

Breast cancer continues to be the most frequently diagnosed and/or treated cancer at GBMC, with 542 analytic cases. The second most commonly treated cancer at GBMC is prostate cancer with 198 analytics, followed by lung (169 analytics), colon/rectum (163 analytics), and lymphoma and thyroid (82 analytics each). (See Table 1 and Table 2) The American Cancer Society's Surveillance Research estimated that 24,400 new cancer cases would be diagnosed in Maryland in 2004. That same year, GBMC diagnosed and/or treated an increased number of cancers of the bladder (72 compared to 58 in 2003); thyroid (82 compared to 74 in 2003); and soft tissue sarcomas (17 compared to 9 in 2003).

STAGING

To help the physician evaluate the patient's disease at diagnosis, estimate prognosis, guide treatment, evaluate therapy and access the results of early cancer detection, the American Joint Committee on

Cancer (AJCC) has established a TNM Staging Classification based on the premise that cancers of similar sites and histologies share similar patterns of growth and extension. In the TNM staging system, T relates to extent of the primary tumor, N relates to lymph node involvement and M indicates the presence of distant metastases. The combination of the TNM gives a stage group classification of Stage 0, 1,2,3,4, or unstageable. Cancers may be unstageable because no AJCC staging classification exists for the site. For example, leukemias, unknown primaries, and primary brain tumors cannot be staged using the AJCC criteria. Also patients may be unstageable because they choose to have no treatment or further testing needed to determine the appropriate stage. At diagnosis, 12.6% of GBMC's 1,857 analytic cases were Stage 0 (in situ), the earliest stage tumors. In general, the survival rates for in-situ cancers are higher than for those of invasive cancers. Of the invasive cancers, 29.2 % were Stage 1; 24% were Stage 2; 13.5% were Stage 3; 11.1% were Stage 4; and 9.1% had no AJCC stage for the site or were unstageable (Table 3).

Table 1

GBMC Site Distribution					
All Cases 2004					
Primary Site	Total Cases	Analytic	Non-Analytic	Male	Female
GENITOURINARY	350	318	32	313	37
Prostate	223	198	25	223	0
Renal	33	32	1	20	13
Bladder	77	72	5	56	21
Other GU	17	16	1	14	3
BREAST	564	542	22	6	558
GASTROINTESTINAL	246	228	18	123	123
Esophagus	6	6	0	5	1
Stomach	16	14	2	11	5
Colon/Rectum	175	163	12	83	92
Anal	12	11	1	6	6
Pancreas	25	24	1	13	12
Other GI	12	10	2	5	7
GYNECOLOGIC	197	191	6	0	197
Cervix Uteri	63	63	0	0	63
Corpus Uteri	68	68	0	0	68
Ovary	38	34	4	0	38
Other Gyn	28	26	2	0	28
HEAD AND NECK	181	172	9	83	98
Oral Cavity	22	21	1	12	10
Pharynx	34	31	3	21	13
Salivary Gland	8	8	0	4	4
Larynx	27	24	3	24	3
Thyroid	84	82	2	19	65
Other Head & Neck	6	6	0	3	3
LUNG	176	169	7	80	96
LYMPH NODES	90	82	8	38	52
BONE MARROW	44	40	4	22	22
SKIN*	55	49	6	37	18
SOFT TISSUE SARCOMA	17	17	0	7	10
CNS	12	11	1	4	8
OTHER	18	16	2	11	7
UNKNOWN PRIMARY	22	22	0	11	11
ALL SITES TOTAL	1,972	1,857	115	735	1,237

*Skin-Excludes basal/squamous skin cancers

Source:GBMC Cancer Registry Database

Table 2

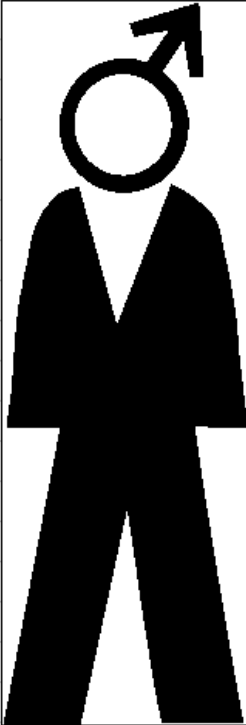
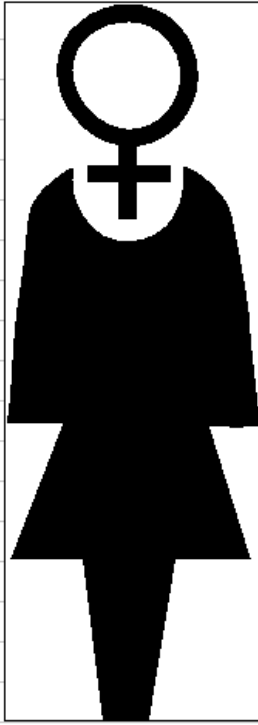
		678 (37%) Males	1,179 (63%) Females	
Melanoma	23 (3.4)			10 (0.8) Melanoma
Oral	28 (4.1)			18 (1.5) Oral
Lung	78 (11.5)			499 (42.3) Breast
Pancreas	11 (1.6)			87 (7.4) Lung
Stomach	8 (1.2)			12 (1.0) Pancreas
Colon/Rectum	75 (11.1)			87 (7.4) Colon//Rectum
				30 (2.5) Ovary
				114 (9.7) Uterus
Urinary	75 (11.1)			35 (3.0) Urinary
Prostate	198 (29.2)			
Leukemia & Lymphoma	53 (7.8)	65 (5.5) Leukemia & Lymphoma		
All Other	129 (19.0)	222 (18.8) All Other		
*Key ##### Number of Cases (##.##% of Column Total)				
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Table 3

AJCC Stage at Diagnosis (2004)

