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Reporting of National Cancer Registry Statistics in Europe: a scoping review

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Aims and Objectives

The European Cancer Information System reports cancer statistics across *Europe*. Yet, reports and interactive dashboards on *national* cancer burden are key tools to interpret findings and impact national cancer policies.

This scoping review aims to systematically identify and map the current practices in reporting national cancer statistics across countries covered by the European Network of Cancer Registries.

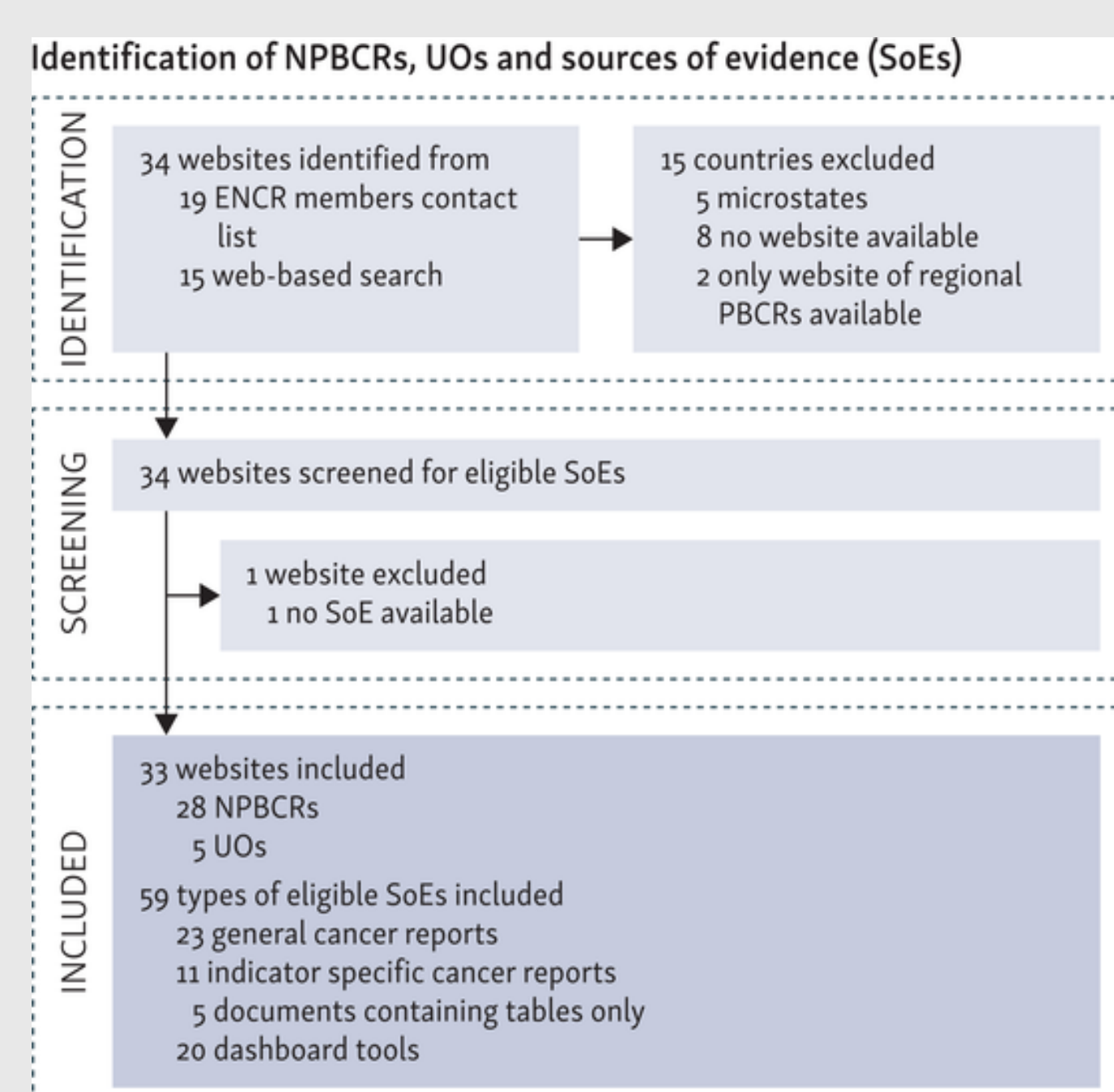
A better understanding of practices of reporting incidence, prevalence and survival may help to improve harmonization of the statistical indicators, foster collaboration between registries, and promote best practices.

Methods

Websites of all European National Population-Based Cancer Registries (NPBCRs) and cancer registry Umbrella Organizations (UOs) were identified. Website were screened for eligible sources of evidence (SoEs). The most comprehensive SoEs were included for each NPBCR or UO. Data were extracted on the reporting of incidence, prevalence and survival.

Results

33 European countries report national cancer statistics. For 11 countries in Europe (including three European Union member states, excluding microstates), no nationwide population-based cancer statistics could be identified.



Items	Incidence			Prevalence			Survival		
	Yes	No	Countries	Yes	No	Countries	Yes	No	Countries
Sex	46	2	33	25	4	19	27	3	22
Age	41	7	31	7	22	5	15	15	14
Cancer type	47	1	32	28	1	22	29	1	23
Stage at diagnosis	22	26	18	3	26	2	14	16	14
Geography	31	17	11	9	20	8	12	18	11
Future trend	7	41	6	NA	NA	NA	NA	NA	NA

Cancer incidence is reported across all 33 countries, but stratification by stage and geographic region is not commonly reported. The availability of national prevalence and survival statistics in reports and dashboards is less common. Heterogeneity was found regarding the depth of reporting incidence, prevalence, and survival.

Conclusions and Recommendations

The availability of national cancer burden statistics across Europe is not optimal. This limits the ability for countries to monitor and steer national cancer control policies. Varying depth of reporting of indicators compromises the ability to understand cancer inequalities within countries.

The review also identified countries with rich and well-designed reports and dashboard tools. Visual communication of health data, such as graphs, charts, and diagrams, are essential for accessible cancer statistics. The best practices identified in this study may support the reporting across Europe and internationally.

