# POPULATION BASED CANCER REGISTRY, AURANGABAD Indian Cancer Society

#### Dr Purvish Parikh

Hon. Secretary & Managing Trustee & Principal Investigator (from Nov. 2012)

### Dr A.P. Kurkure

Hon. Secretary & Managing Trustee & Principal Investigator (till July 2012)

Dr B.K. Shewalkar, Hon. Secretary of ACRD

Mrs Shravani Koyande, Executive In-charge and Co-Investigator

With the experience of Mumbai and Poona Cancer Registry, the Indian Cancer Society established another satellite registry at Aurangabad City in year 1978. The aim was to identify the difference in the site patterns and incidence rates of cancer amongst various communities living in different geographical areas, exposed to different climatic conditions, dietary habits and social customs. Aurangabad Registry covers an area of 50.96 sq. kms.

Registration of cancer cases is done by active method. Information on cancer patients is obtained from various Govt. hospitals, private hospitals, nursing homes and diagnostic centres. Mortality information is collected from Vital Statistics Division of the Municipal Corporation of Aurangabad and the registry enjoys good co-operation from all the health care facilities.

The reliability of the data and quality has considerably improved over the years. The percentage of cases microscopically confirmed and cases diagnosed through Death Certificate is 92.2% and 3.3% respectively for the period 2009-2010 whereas the percentage of microscopically confirmed cases was 84% and Death Certificate was 6.1% for the period 1995-2004.

## Staff of Aurangabad Cancer Registry

Mr A.M. Waghmare : Medical Social Worker

Mr Sayed Ayub Ali : Part time Clerk-cum-Typist

## Main Sources of Registration of Incident Cases of Cancer: 2009-2010 - Aurangabad

Name of the Institution	Number	%
Government Hospital	576	55.2
Lokmanya Hospital	218	20.9
Dhoot Radiotherapy	106	10.2
TMH Mumbai	69	6.6
Unmatch	34	3.3
Other Small Hospital	20	1.9
Pune Hospital	15	1.4
Others	6	0.6
Total	1044	100.0

- Institutions listed have registered at least one percent of all cases in the registry for the combined years 2009-2010.
- The numbers and proportion listed are the minimum number of cases. Institutions could have registered/ reported more cases, since duplicate registrations and non-resident/registry cases are not included.