

POPULATION BASED CANCER REGISTRY, MUMBAI

Indian Cancer Society, Mumbai

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The Mumbai Population Based Cancer Registry was established in 1964 before the inception of the National Cancer Registry Programme (NCRP), a unit of Indian Council of Medical Research (ICMR) in 1982. Until 1964 no continuous survey had been ever undertaken anywhere in India. It is the first Population Based Cancer Registry in India established by Indian Cancer Society (ICS) with the aim to generate reliable cancer incidence and mortality data in a defined population of Greater Mumbai.

Recently, Mumbai Cancer Registry has completed 50 years of contribution to cancer control programme of Govt. of India. The registry has been known for completeness and reliability of records and the data have been included in *Cancer Incidence in Five Continents (CI 5 Vol X)*, a scientific publication of International Agency of Research on Cancer, (IARC), Lyon France, since Vol. II.

Mumbai Cancer Registry collects the data by active method. Till now, we have been receiving full co-operation from all the sources but we have realized an emerging issue of privacy and confidentiality due to which registry is facing challenges in receiving data from few hospitals.

As a feather to our cap, we are now receiving unconditional support from the Mumbai Municipal Corporation to obtain all-cause mortality data which has improved the completeness.

Staff

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Main Sources of Registration of Incident Cases of Cancer: 2012
Mumbai

Name of the Institution	Number	%
T.M.H.	3211	24.0
Private Doctor	1146	8.6
Other Small Hospital	844	6.3
BMC	691	5.2
National	639	4.8
Kokilaben Dhirubhai Ambani	606	4.5
Nanavati	515	3.9
Ismail Gen. (Pak)	455	3.4
K.E.M.	409	3.1
Jaslok	374	2.8
S.L. Raheja	360	2.7
Bombay Hospital	346	2.6
L.T.M.G, Sion	344	2.6
NAIR	334	2.5
Lilavati	269	2.0
Breach Candy	256	1.9
Hol Spirit	244	1.8
Saifee	211	1.6
Cama And Albless	174	1.3
Shanti Avedna	164	1.2
J.J.	161	1.2
Others	1604	12.0
Total	13357	100.0

1. Institutions listed have registered at least one percent of all cases in the registry for Selected Year.
2. 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.