

Figures: data quality

Technical Aspects

Trace-back was not possible for the Childhood Cancer Registry (ChCR) prior to 2018. Trace-back would have allowed the ChCR to retrieve documents (e.g. pathology reports) to confirm the diagnoses and find out the incident date of cases captured through linkage with the mortality data of the Federal Statistical Office (FSO), i.e. notified by death certificate. Death-certificate-notified (DCN) patients were most likely to be registered as death-certificate-only (DCO), if they were diagnosed in cantons without a cantonal cancer registry (CCR) and at an age older than 15 years. The ChCR performs linkages with the CCRs where CCRs exist. The ChCR retrieved any additional available information about DCNs diagnosed in these cantons through these linkages. Patients older than 15 years at cancer diagnosis could be mostly captured either through linkage with the CCRs or as DCNs, in contrast to younger cases who are reported directly by the SPOG (Swiss Paediatric Oncology Group) clinics. This means that it was highly unlikely for the ChCR to retrieve any information about DCN patients diagnosed in cantons without a CCR and at an age older than 15 years. This is the reason why we present two tables with DCO% and MV% for adolescents (15-19 years old); one including all diagnoses in Switzerland, and one including only the diagnoses in cantons with a CCR.

To calculate the M:I ratios, incidence and mortality are calculated as the number of new cases (incidence) or cancer deaths (mortality) per 100,000 children and adolescents (0-19 years old) per year, following the same methodology as that used for the Swiss Cancer Report (Schweizerischer Krebsbericht 2021 - Methodenbericht).

The reported indicators (DCO%, MV%, M:I ratios) are subjected to considerable random variation and should be interpreted with caution.