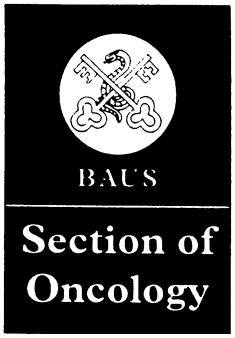

THE BRITISH ASSOCIATION OF UROLOGICAL SURGEONS

SECTION of ONCOLOGY

BAUS Cancer Registry
Analyses of Minimum data set for Urological cancers
January 1st – 31st December 2008

October 2009

MEMBERS OF THE EXECUTIVE COMMITTEE

M Aitchison	G Boustead	J Crew	D R Greene
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PRODUCED FOR BAUS SECTION OF ONCOLOGY
by

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BAUS Cancer Registry Manager

CONTENTS

INTRODUCTION

The registry has now reached its 12th year of data collection. The last year has seen significant changes with the introduction of the new web based database. While the original database has served BAUS and the section well, our hope is that Nuvola will improve access and capture rates as well as simplify data returns demanded for revalidation and licensing.

The format of the annual report has been changed slightly to reflect the maturity and size of the database, which now holds data on over 270 000 new cancers. This year we have attempted to look at trends over the last decade, using reference years due to the large amount of data. In a number of instances this has revealed evidence of significant stage migration. In line with the theme of this year's Section meeting, we have also included some analyses of the whole dataset on bladder cancer over the last decade, as well as data on cystectomy over the last 5 years.

Returns from 2008 are marginally up on last year, but unfortunately the quality of the submissions has declined. The reasons for this appear to be data entered by a variety of people apart from consultants or SpR's, including data managers, CNS's, MDT co-coordinators to mention a few. In addition the increasing use of in-house systems to populate our datasets has led to some large gaps in completion. The old adage of "rubbish in, rubbish out" applies so please impress upon those in your departments who do data entry the importance of accuracy and completeness.

The most notable trends detected in the latest analysis, shows continuing age and stage migration in prostate cancer, with the median age at diagnosis declining further and more localized disease being detected. Of most interest is the marked stage migration in renal cancer, with T1 tumours increasing significantly and steadily over the past decade, while T2 tumours declined and T3/4 cancers remaining steady. As always this results in many more questions than answers. The initial analysis of 70 000 bladder cancers has given us excellent insight into bladder cancer therapy in the UK. While the BCR holds valuable epidemiological data, meaningful outcome date is lacking.

On behalf of the Section of Oncology, I would like to thank Mr Gregor McIntosh for his hard work over the last five years overseeing the registry. As always a huge thank you goes to Sarah Fowler for all her hard work, particularly in relation to the move from the Access based registry to Nuvola, which has created lots of additional work.

Finally, the Executive committee would like to see regular publications and updates appearing in the peer reviewed literature, to raise the profile and awareness of the BCR, as well as utilize the valuable information it holds. Anyone is free to apply with a simple application form and instructions available on the website.

Greg Boustead
October 2009

AUDIT RESULTS SUMMARY January 1st – 31st December 2008

Who took part?

391 consultant urologists from 107 hospital centres in England, Wales, Scotland and Northern Ireland provided data for this study submitting data on 25,839 newly presenting urological tumours from 1st January to 31st December 2008. These figures represent approximately 46% of the total UK tumours registered in 2006/2007 (56,096) (the most recent years available). 1.2% (318/25839) are the private patients of 65 consultants.

How were the data analysed?

Information obtained from consultants was entered into the computer database using unique identifying numbers for individual consultants or, if they preferred, a centre number. Twelve centres returned data under a centre number only (29 consultants in total).

Data could be returned either in electronic format using either an Access (Microsoft) database, the new web-based database launched in June 2009 or "in-house" database (23,767 – 92% of returns) designed for the purpose or by completion of a pro forma for each patient (8% of returns). The pro formas were entered directly into an Access database, at which time validation comprising mainly of checks for duplicate entries and on dates and sex of patient could be carried out. 103 tumours were registered twice as a tertiary referral from another centre or another consultant in the same centre. They were only included once in all the analyses using the data from the primary site for all analyses except those relating to staging and treatment when the tertiary site data was used. In addition 28 benign tumours were registered but these have been excluded from all analyses.

The data presented here are a summary of the data received up to 4th September 2009 and relate to diagnoses made during the whole of 2008. The following data was included (this includes the total returns):

a. Patients for who the date of diagnosis fell within the time period. (01/01/2008 to 31/12/2008). 25,215 registrations (97.1%).
b. Patients for whom the date of diagnosis was either not included or the patient was a tertiary referral, but the referral date fell within the study period. (01/01/2008 to 31/12/2008) 685 registrations (2.6%).
c. Patients for whom the diagnosis and referral dates were either not included or the patient was a tertiary referral, but the date of first consultation fell within the study period. (01/01/2008 to 31/12/2008). 58 (0.2%).

For the ranked charts (1, 2 & 4) the individual consultant or centre identification numbers were removed and replaced with rank numbers starting at 1. A unique, confidential "Ranking Sheet" was prepared for each surgeon to enable them to identify their rank in every chart. For those charts where overall figures for the entire database are shown the ranking sheet displays the consultant's individual figures. No one else can identify the results of an individual consultant. The ranked comprise single bars, with in addition the 25, 50, and 75 percentiles and are ranked from left to right in the ascending order of the data item being measured. Where percentages are included figures have been rounded up to one decimal point. Unless otherwise stated all analyses represent the 2008 dataset.

A personal ranking sheet for each consultant registering three or more tumours was issued individually to go with this chartbook.

Sarah Fowler
BAUS Cancer Registry (BCR) Manager

October 2009

A. Participants and Overall Figures

The number of centres using their own in-house systems to return data has increased yet again but unfortunately the completeness of data returned by many of these systems remains less so than when returned using the specially designed Microsoft Access database making validation and analyses more complicated. It is to be hoped that many these problems will be resolved as the switch to the new web-based database becomes mandatory from January 2010.

As in previous years we have incorporated comparison with National Cancer Statistics from 2006/2007 – the latest years available. Comparison with the national data does suggest that our data are representative of the UK as a whole. However when comparing our data with that of the national data we should bear in mind the following:

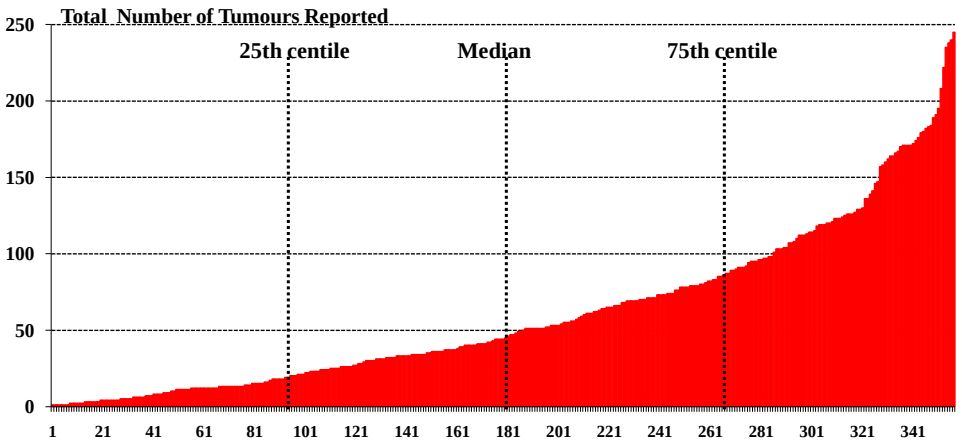
- Our data are only being collected by urologists. We have no way of estimating the number of urological cancers that are not being seen or diagnosed by urologists. In the case of kidney cancer, it seems that a substantial number are never seen by a urological surgeon.
- These data are being presented within ten months of the completion of the year of data collection and being compared to projected national figures from 2006/2007, which are the latest to be published.
- For the majority of participants, there is no specific funding for data collection and the analysis and presentation is entirely funded by the Section of Oncology.

BAUS - Register of Newly Presenting Urological Tumours
January 1st - December 31st 2008
Who took part

- **390 Consultants from 107 Centres provided data on 25,839 newly presenting urological tumours.**
- **1.2% (318/25839) were from the private patients of 65 Consultants**
- **Range of Consultants per Centre = 1 - 12, (Median 4)**
- **Median number of tumours per Consultant = 44, Range 1 - 239**
- **Median number of tumours per Centre = 212, Range 3 - 952**
- **92% (23767/25839) of the data were returned electronically**

Chart 1

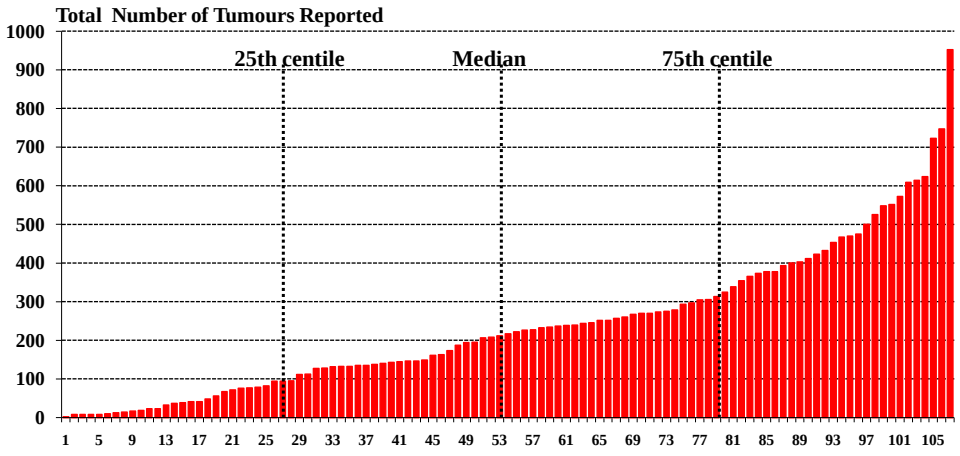
Total Number of Newly Presenting Tumours Reported per Consultant
Median: 44 (Interquartile Range 17 - 83)



N.B. Excludes data returned by centres as a whole

Chart 2

Total Number of Newly Presenting Tumours Reported per Centre
Median: 212 (Interquartile Range 112 - 325)



N.B. Excludes private patients

Chart 3

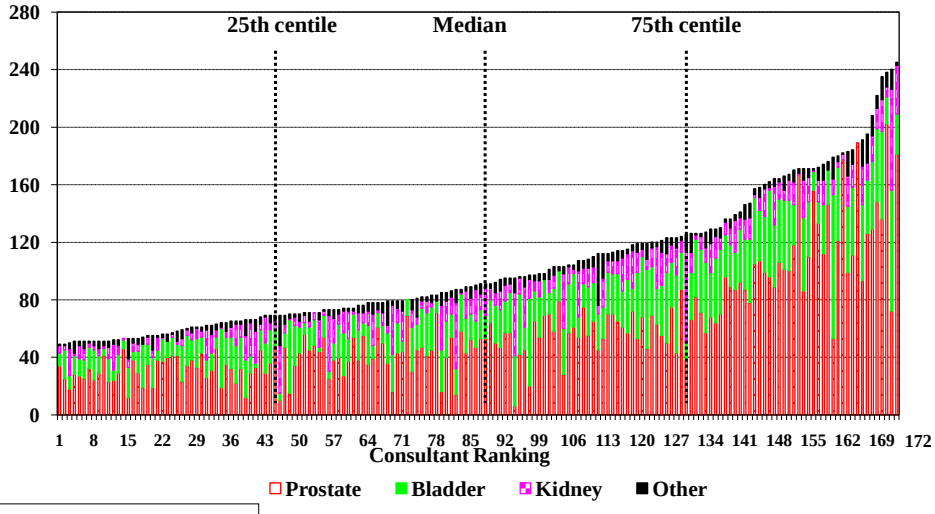
Number of Newly presenting Tumours by Organ per Consultant
391 Consultants reported 25, 839 Tumours
Median Total per Consultant = 44

Organ	Total Number Reported	Median per Consultant	Range
Prostate *	14625	23	0 - 202
Bladder	6736	11	0 - 100
Kidney	2900	3	0 - 70
Testis	791	1	0 - 14
Pelvis/Ureter	440	1	0 - 11
Penis	221	0	0 - 33
Urethra	19	0	0 - 2
Prostatic Urethra	8	0	0 - 2

* Includes 78 registrations with High Grade PIN only

Chart 4

Total Number of Newly Presenting Tumours Reported per Consultant
by Organ where n >=44 (i.e. the median reported per consultant)



N.B. Excludes data returned by centres as a whole

Chart 5

Overall Data by Organ

Organ	Number Recorded	Percentage of Total (25839)	Mean Age at Diagnosis	Age Range	Males	Females
Prostate *	14625	56.6	71.1	29 - 105	14625	
Bladder	6736	26.1	72.4	17 - 103	5002	1674
Kidney	2900	11.2	66.7	16 - 99	1765	1111
Testis	791	3.1	39.1	16 - 88	791	
Pelvis/Ureter	440	1.7	71.9	31 - 101	278	158
Penis	221	0.9	64.6	29 - 95	221	
Urethra	19	0.1	65.7	34 - 84	13	6
Prostatic Urethra	8	0.0	69.1	54 - 85	8	
Other	41	0.2	66.4	36 - 94	30	10
Not recorded	58	0.2	69.4	33 - 89	43	12

*** Includes 78 registrations with High Grade PIN only**

Chart 6

Overall Data by Organ by Year

Organ	2008 Number Recorded	*% of Total (25,839)*	2004 Number Recorded	*% of Total (24,532)*	1999 Number Recorded	*% of Total (19,009)*
Prostate	14625*	56.6	14858#	*60.6*	9277	*48.8*
Bladder	6736	26.1	6073	*24.8*	6584	*34.6*
Kidney	2900	11.2	2104	*8.6*	1661	*8.7*
Testis	791	3.1	750	*3.1*	838	*4.4*
Pelvis/Ureter	440	1.7	291	*1.2*	281	*1.5*
Penis	221	0.9	196	*0.8*	165	*0.9*
Urethra	19	0.1	29	*0.1*	-	
Prostatic Urethra	8	0.0	15	*0.1*	-	
Other	41	0.2	29	*0.1*	120	*0.6*
Not recorded	58	0.2	187	*0.8*	85	*0.4*

Including registrations with High Grade PIN only:
*** 78; # 84**

Chart 7

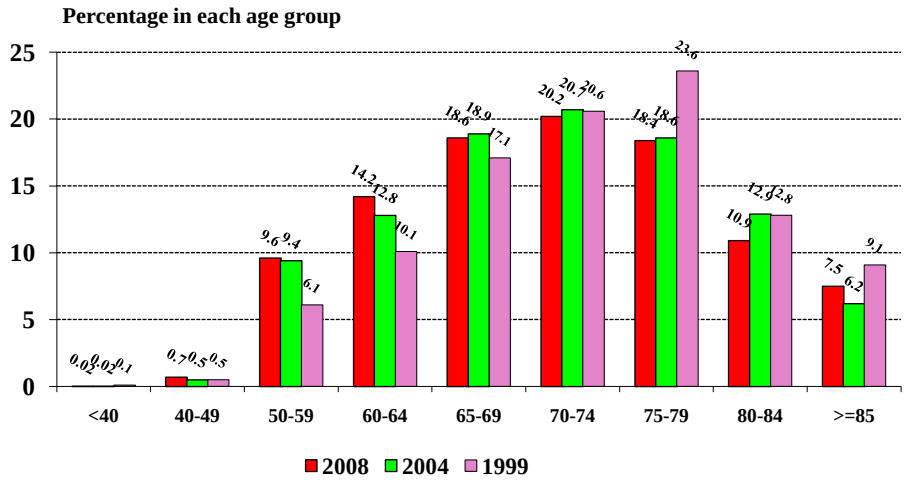
Total Registrations per Country
Prostate, Bladder, Kidney, Testis, Pelvis/Ureter & Penile Tumours*

Region	2008 Total Registrations* BAUS	National figures**	2008 BAUS % National	2004 BAUS % National	1999 BAUS % National
England	21642	46743	*46.3*	*50.8*	*44.0*
Scotland	1837	4138	*44.4*	*18.8*	*17.4*
Wales	2035	3908	*52.1*	*53.3*	*35.5*
Northern Ireland	192	1307	*14.7*	*37.6*	*24.5*
Total UK	25706	56096	*45.8*	*48.1*	*40.7*

**England : cancer statistics - registrations of cancer diagnosed in 2006, England. Series MBI no. 37 – 2009
Wales: Welsh Cancer Intelligence & Surveillance Unit - 2007
Scotland:Scottish Cancer Registry,Scottish Cancer Intelligence Group, ISD Scotland - 2006
Northern Ireland:Northern Ireland Cancer Registry - 2006 - www.qub.ac.uk/nicr

Chart 8

Percentage Age Distribution - Prostate Tumours
BAUS 2008 median: 71 Years; Range 29 -105 (n= 14,115*)
BAUS 2004 median: 72 Years; Range 21 -103 (n= 14,665*)
BAUS 1999 median: 73 Years; Range 21 -100 (n= 8,870*)



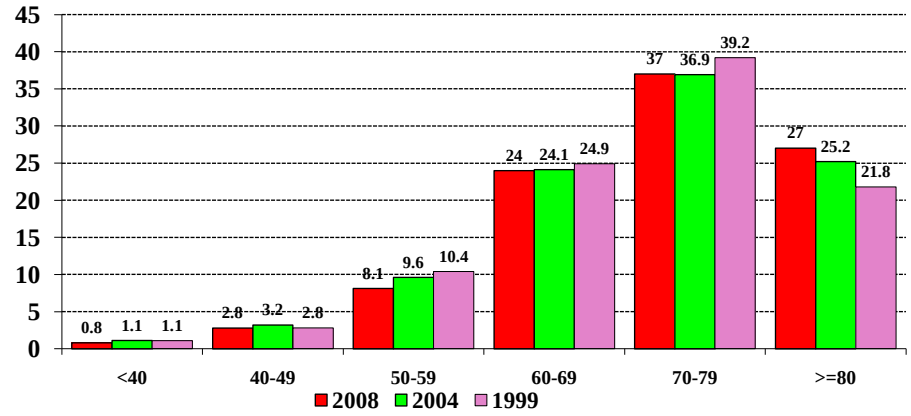
•Age could be calculated when both date of birth and diagnosis date were recorded
•The reductions in age at diagnosis over the years are significant at the 95% CI

Chart 9

Percentage Age Distribution - Bladder Tumours - Males

BAUS 2008 median: 73 Years; Range 19 -103 (n= 4,814*)
BAUS 2004 median: 73 Years; Range 20 -101 (n= 4,470*)
BAUS 1999 median: 72 Years; Range 6 - 99 (n= 4,664*)

Percentage in each age group



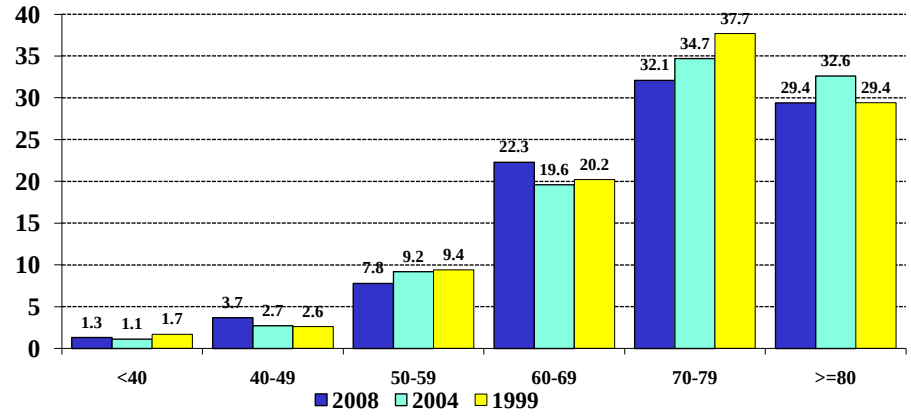
* Age could be calculated when both date of birth and diagnosis date were recorded

Chart 10

Percentage Age Distribution - Bladder Tumours - Females

BAUS 2008 median: 73 Years; Range 19 -103 (n= 4,814*)
BAUS 2004 median: 73 Years; Range 20 -101 (n= 4,470*)
BAUS 1999 median: 75 Years; Range 2 - 98 (n= 1,590*)

Percentage in each age group



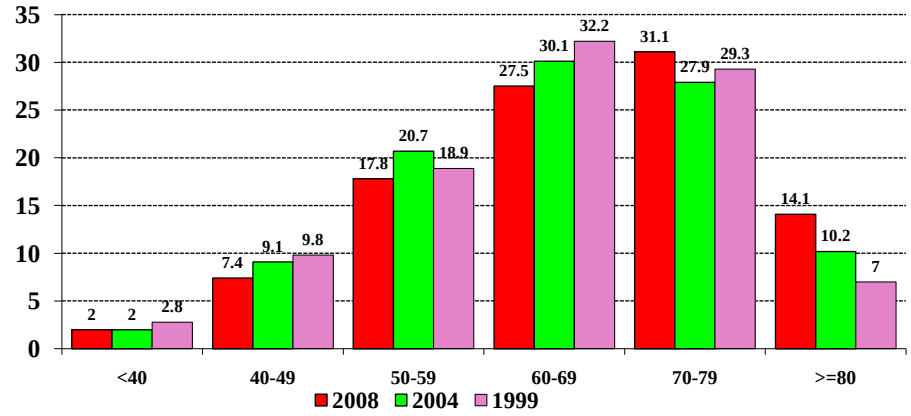
* Age could be calculated when both date of birth and diagnosis date were recorded

Chart 11

Percentage Age Distribution - Kidney Tumours - Males

BAUS 2008 median: 68 Years; Range 20- 99 (n= 1,661*)
BAUS 2004 median: 66 Years; Range 21 -102 (n= 1,323*)
BAUS 1999 median: 65 Years; Range 24 - 95 (n= 1,000*)

Percentage in each age group



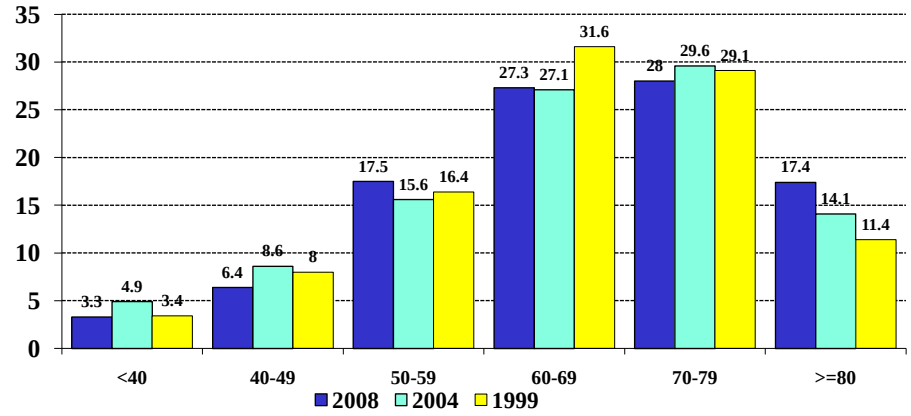
* Age could be calculated when both date of birth and diagnosis date were recorded

Chart 12

Percentage Age Distribution – Kidney Tumours - Females

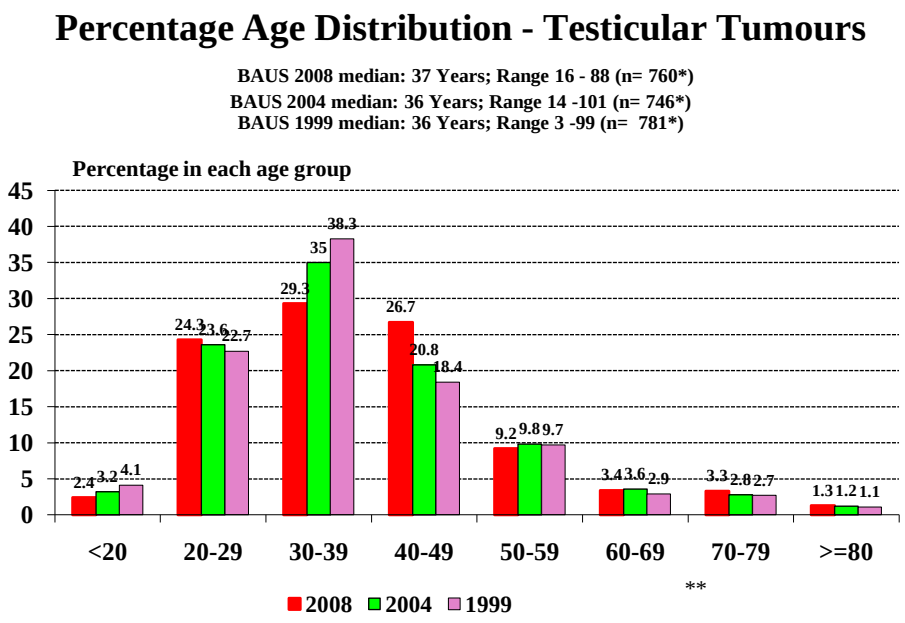
BAUS 2008 median: 68 Years; Range 16 - 96 (n= 1,062*)
BAUS 2004 median: 67 Years; Range 20 - 98 (n= 742*)
BAUS 1999 median: 67 Years; Range 21 - 97 (n= 585*)

Percentage in each age group



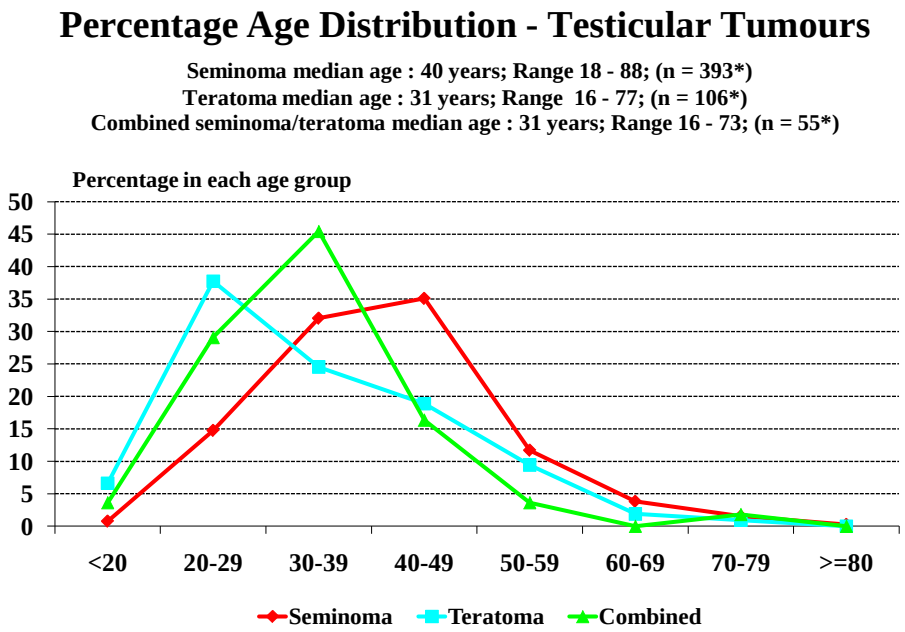
* Age could be calculated when both date of birth and diagnosis date were recorded

Chart 13



* Age could be calculated when both date of birth and diagnosis date were recorded

Chart 14

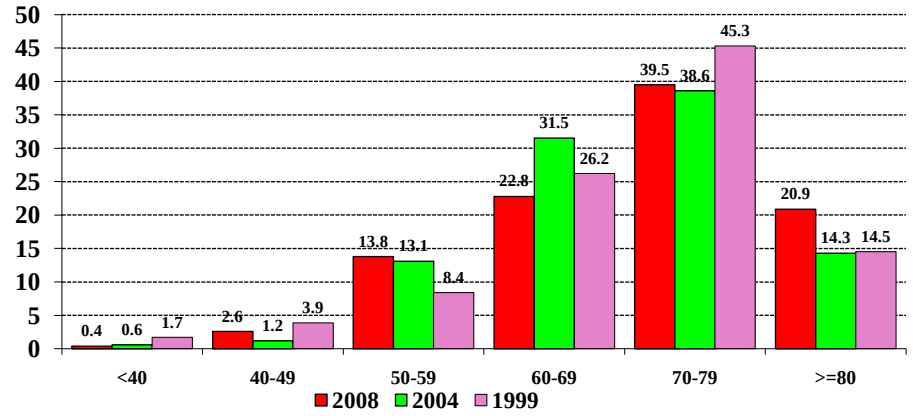


* Age could be calculated when both date of birth and diagnosis date were recorded = 760/791 (96%).
Histology was reported in 685 of these tumours. (685/760 = 90.1%), 127 of these were histologies other than the above groups

Chart 15

Percentage Age Distribution – Pelvic / UretericTumours – Males

BAUS 2008 median: 72 Years; Range 31 - 93 (n= 268*)
BAUS 2004 median: 70 Years; Range 19 - 91 (n= 168*)
BAUS 1999 median: 71 Years; Range 36 - 89 (n= 179*)

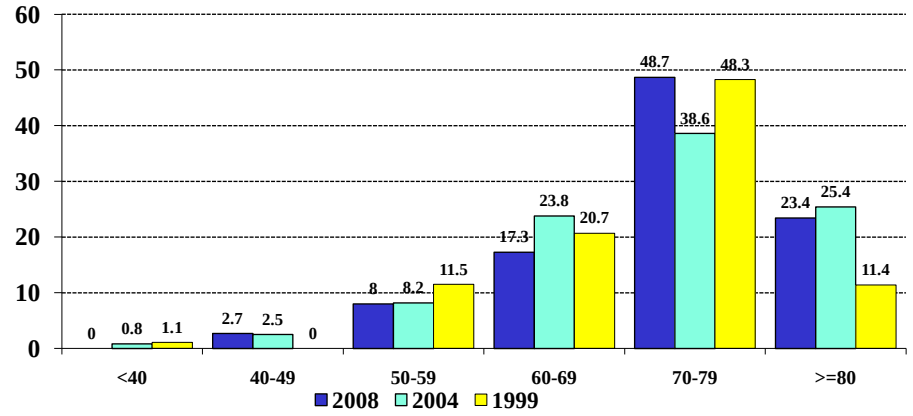


* Age could be calculated when both date of birth and diagnosis date were recorded

Chart 16

Percentage Age Distribution – Pelvic / UretericTumours – Females

BAUS 2008 median: 76 Years; Range 41 - 101 (n= 150*)
BAUS 2004 median: 73 Years; Range 19 - 94 (n= 122*)
BAUS 1999 median: 74 Years; Range 39 - 89 (n= 74*)

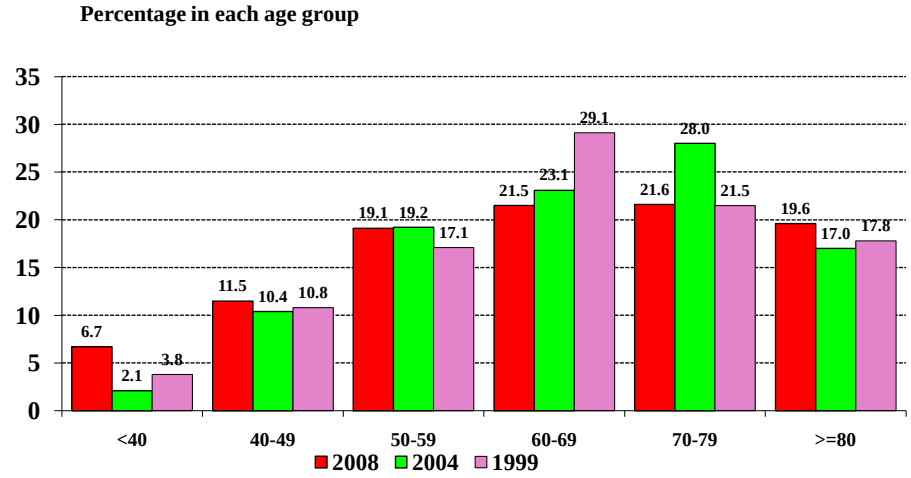


* Age could be calculated when both date of birth and diagnosis date were recorded

Chart 17

Percentage Age Distribution – Penile Tumours

BAUS 2008 median: 64 Years; Range 29- 88 (n= 209*)
BAUS 2004 median: 66 Years; Range 28 - 93 (n= 182*)
BAUS 1999 median: 66 Years; Range 31 - 95 (n= 158*)



* Age could be calculated when both date of birth and diagnosis date were recorded

B. Times between referral, consultation, diagnosis and treatment

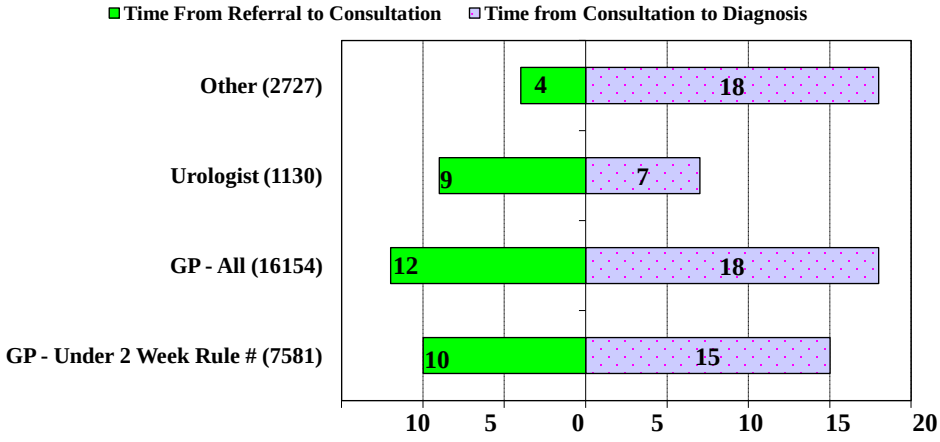
In this section we have included charts from the 2004 dataset to allow for comparisons.

The overall time from referral to diagnosis has fallen significantly from 2004 and is now the shortest since data collection started in 1999.

Recording of date of definitive treatment remains a problem with only 71% of returns including this item and interpretation must still be cautious. In some cases, the date of definitive treatment was recorded as being before the date of diagnosis! Any negative times between diagnosis and definitive treatment date were treated as 0 i.e. definitive treatment date = date of diagnosis.

Chart 18

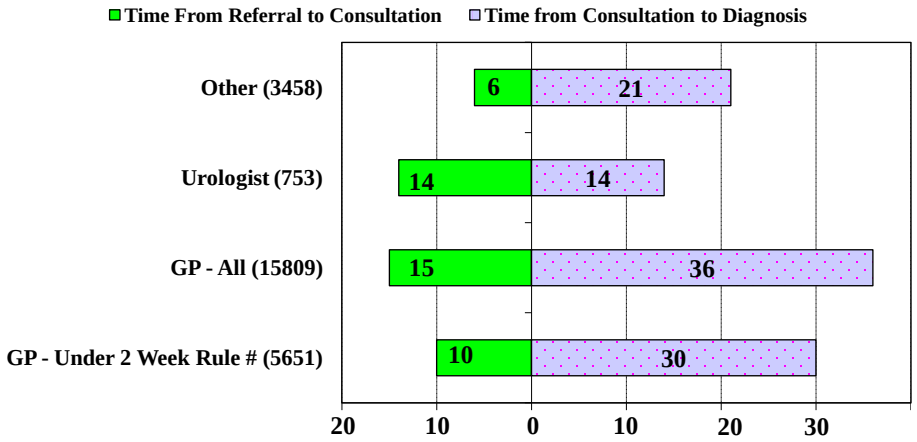
Median Time to First Consultation and Diagnosis in Days by Referral Source in Days Excluding tumours diagnosed before Referral* - 2008



* Times were calculated when dates of referral, consultation and diagnosis were known and diagnosis date was not before referral date (N = 20,125/25,839 = 78% tumours)
Referral Source was recorded in 20,011/20,125 (99%) cases
Referral priority was recorded in 91% (12717/13990) GP referrals in England where 2 week rule operates

Chart 19

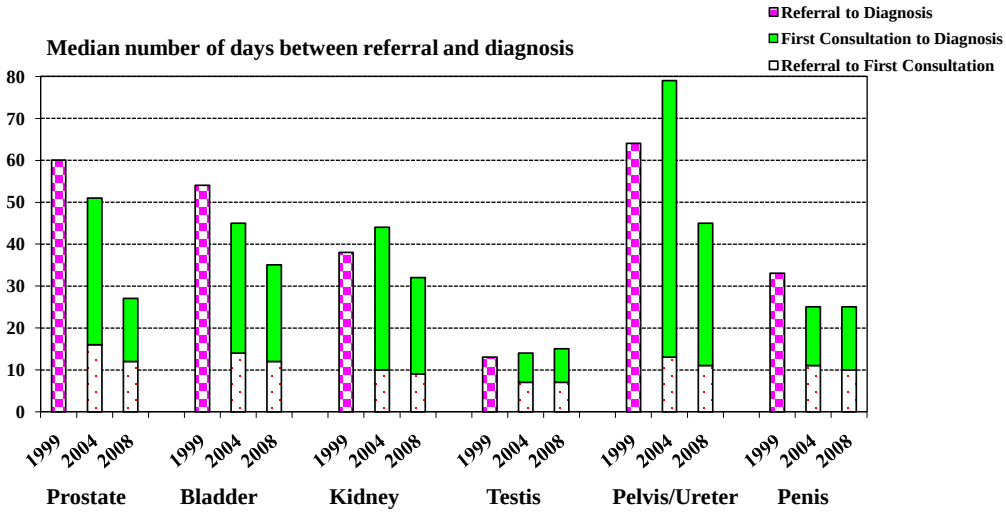
Median Time to First Consultation and Diagnosis in Days by Referral Source in Days
Excluding tumours diagnosed before Referral* - 2004



* Times were calculated when dates of referral, consultation and diagnosis were known
and diagnosis date was not before referral date (N = 20,189/24,532 = 82% tumours)
Referral Source was recorded in 20,020/20,189 (99%) cases
Referral priority was recorded in 96% (14601/15152) GP referrals in England where 2 week rule operates

Chart 20

Median Time to First Consultation and Diagnosis in Days by Organ
Excluding tumours diagnosed before Referral*



* Times were calculated when dates of referral, consultation and diagnosis were known
and diagnosis date was not before referral date . Date of first consultation not recorded in 1999

Chart 21

Median Total Times to Diagnosis in Days - All Referrals
Excluding Patients Diagnosed before Referral

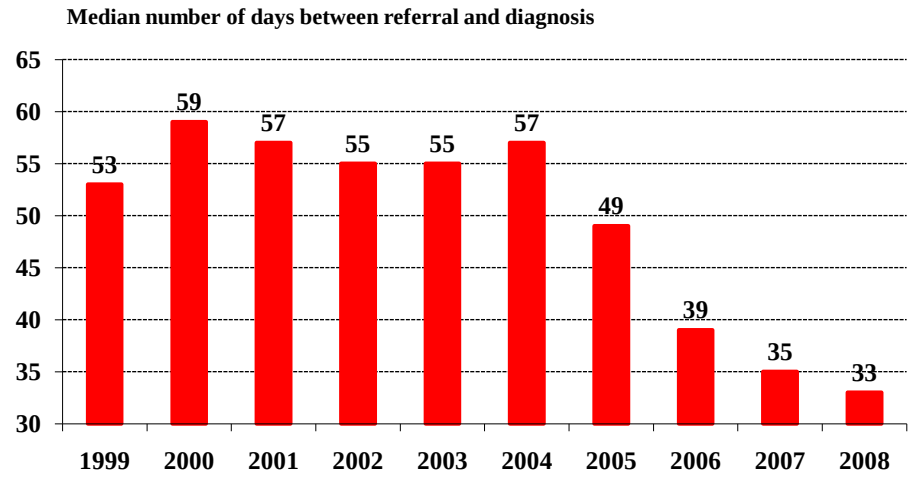


Chart 22

Times to Definitive Treatment in Days by Organ – 2008 and 2004
Excluding tumours diagnosed or treated before referral

Organ	Median Time between Referral and Definitive Treatment in days		Median Time between Diagnosis and Definitive Treatment in days	
	2004	2008	2004	2008
Prostate	112	64	31	26
Bladder	63	41	0	0
Kidney	65	55	0	9
Testis	16	17	0	0
Pelvis/Ureter	117	75	6	8
Penis	41	42	15	0

Definitive treatment date was recorded in 69% tumours (16923/24532) in 2004 and 71% in 2008 (18,429/25,839)

C. Histology and Staging

Histological confirmation was available in 84% of all tumours. This has decreased steadily since 1999 and may be a reflection of the increasing number of returns using in-house data collection systems. Every effort should be made to record data on patients seen in clinics and on the wards, where there is no histological diagnosis.

Participants were asked to return both clinical and, where appropriate, pathological* TNM categories using the 2002 version of the TNM classification for Urological tumours which were included in the data dictionary sent to all participants.

In order to make interpretation of the resultant information easier each patient was staged, wherever possible, using the classifications as shown in the following charts. If the pathological TNM categories were given and appropriate then these were used for the staging, failing this clinical TNM categories were used.

The number of returns having either the full pathological TNM or clinical TNM categories has decreased significantly since 1999. (A substantial proportion of returns do not include any N and M categories or these were recorded as "X" – Cannot be assessed.) A plea for more accurate data recording is given and the suggestion that the BCR data may be more fully recorded if completed during the relevant Multi Disciplinary Team meeting.

The data on the following staging charts should therefore be regarded with caution.

*The pathological assessment of the primary tumour (pT) entails a "resection of the primary tumour or biopsy adequate to evaluate the highest pT category"

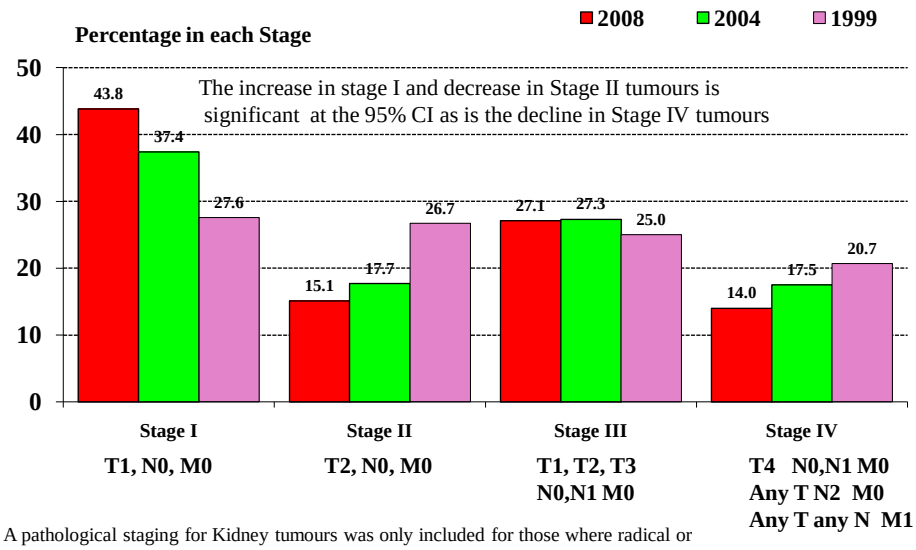
Chart 23

Known Histological Confirmation of Diagnosis by Organ

Organ	2008 N	2008 %	2004 N	2004 %	1999 N	1999 %
Prostate	12774	*88.3*	13881	*95.3*	8605	*94.4*
Bladder	5861	*88.3*	5689	*96.5*	6344	*97.8*
Kidney	1588	*57.0*	1425	*70.1*	1436	*88.0*
Testis	656	*84.2*	685	*93.6*	815	*99.4*
Pelvis/Ureter	304	*70.5*	235	*83.0*	272	*97.8*
Penis	200	*92.6*	186	*98.9*	162	*98.8*
Urethra	17	*89.5*	28	*100.0*	-	
Prostatic Urethra	8	*100.0*	15	*100.0*	-	
Other or Not Recorded	57	*67.9*	80	*30.4*	185	*94.9*
Totals	21465	*84.4*	22224	*92.6*	17819	*95.3*

Chart 24

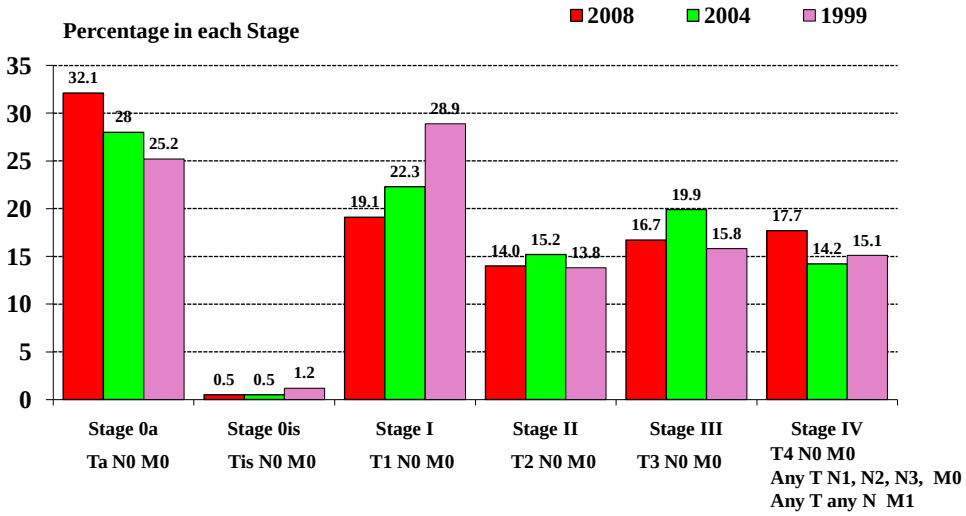
Staging of Kidney Tumours
Staging could be estimated in 56.7% in 2008, 75.4% in 2004 and 92% in 1999



N.B. A pathological staging for Kidney tumours was only included for those where radical or organ conserving surgery was performed

Chart 25

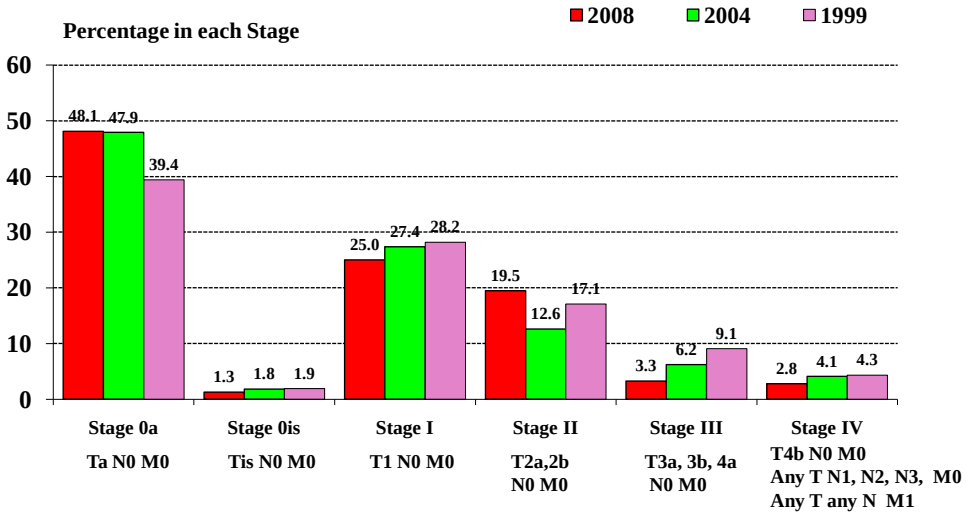
Staging of Pelvis / Ureteric Tumours
Staging could be estimated in 46.4% in 2008, 72.5% in 2004 and 87.5% in1999



N.B. A pathological staging for Pelvis / Ureteric tumours was only included for those where radical or organ conserving surgery was performed

Chart 26

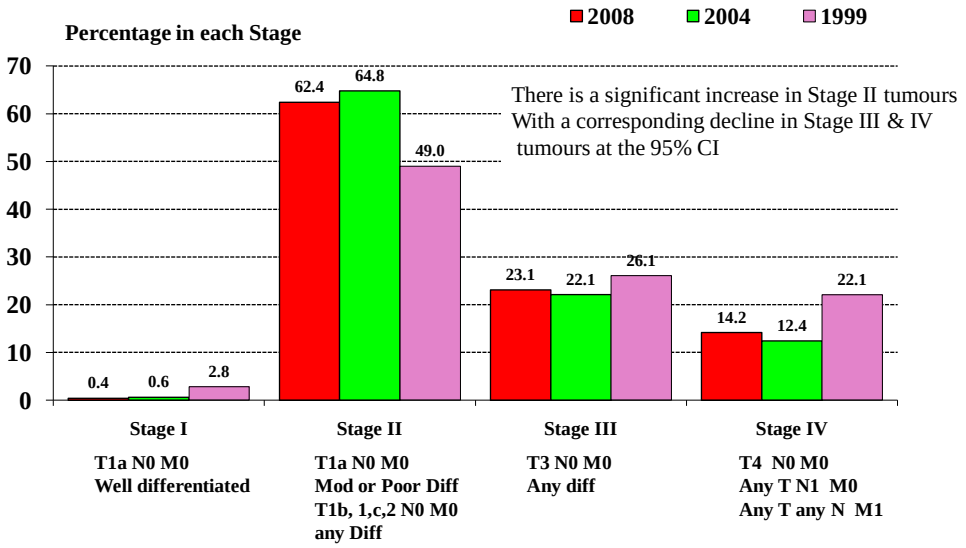
Staging of Bladder Tumours
Staging could be estimated in 67% in 2008, 80.5% in 2004 and 94.2% in1999



N.B. A pathological staging for Stage II, III or IV Bladder tumours was only included for those where radical surgery was performed

Chart 27

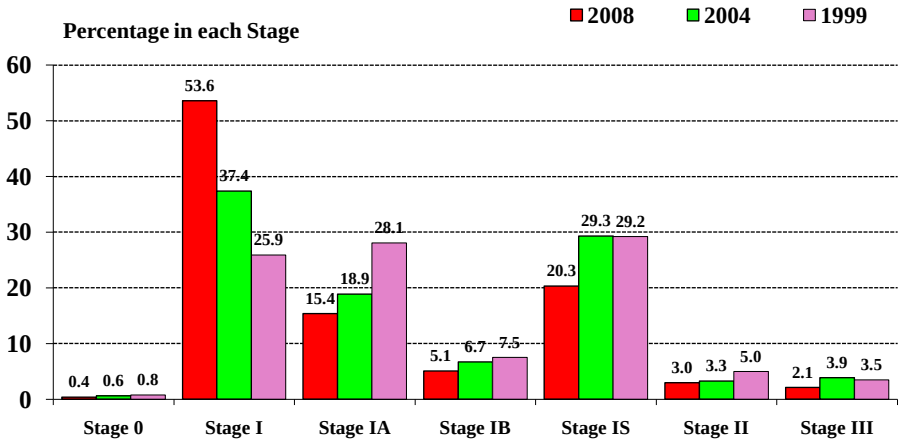
Staging of Prostate Tumours
Staging could be estimated in 56.3% in 2008, 67.6% in 2004 and 81.5% in1999



N.B. A pathological staging for Prostate tumours was only included for those where radical surgery was performed

Chart 28

Staging of Testicular Tumours
Staging could be estimated in 59.2% in 2008, 69.2% in 2004 and 86.2% in1999

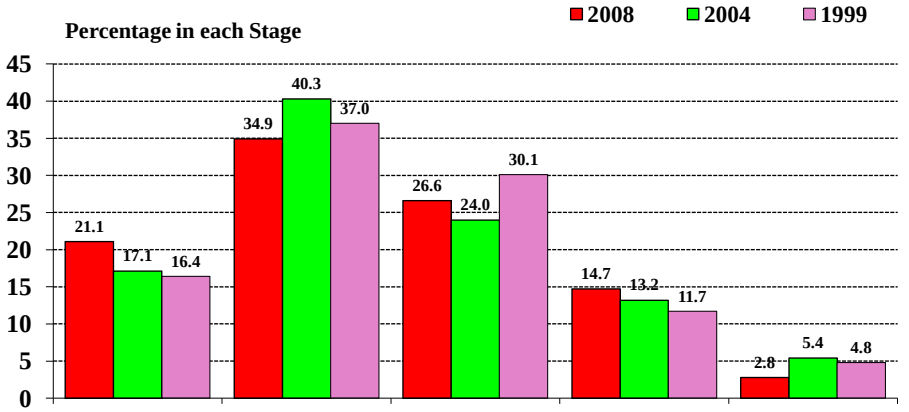


Stage 0 = Tis N0 M0 S0,SX
Stage I = T1,2,3,4 N0 M0 SX
Stage IA = T1, N0 M0 S0
Stage IB = T2, 3, 4, N0 M0 S0

Stage IS = Any T N0 M0 S1, 2, 3
Stage II = Any T, N1, 2, 3, M0, SX, 0, 1
Stage III = Any T, Any N, M1, 1a, SX, 0, 1,2, 3
Any T, N1, 2, 3, M0, S2, 3
Any T, Any N, M1b, Any S

Chart 29

Staging of Penile Tumours
Staging could be estimated in 49.3% in 2008, 65.8% in 2004 and 90.1% in1999



D. Treatment Intention & Laparoscopic procedures

Chart 30

Initial Treatment Intention by Organ
Percentage & Total of Known Intent - 2008

Organ (Number Known)	Curative N	%	Palliative N	%	No active anti-cancer treatment N	%	% of Total Tumours Reported
Prostate (9938)	4662	*46.9*	3446	*34.7*	1830	*18.4*	*67.9*
Bladder (4646)	4207	*90.6*	389	*8.4*	50	*1.1*	*68.9*
Kidney (1983)	1419	*71.6*	295	*14.9*	269	*13.6*	*68.3*
Testis (590)	577	*97.8*	11	*1.9*	2	*0.3*	*74.6*
Pelvis/Ureter (303)	230	*75.9*	52	*17.2*	21	*6.9*	*68.9*
Penis (136)	120	*88.2*	9	*6.6*	7	*5.1*	*61.5*
Urethra (17)	14	*82.4*	3	*17.6*	0	-	*89.5*
Prostatic Urethra (4)	2	*50.0*	2	*50.0*	0	-	*50.0*

Chart 31

Initial Treatment Intention by Organ
Percentage & Total of Known Intent - 2004

Organ (Number Known)	Curative N	%	Palliative N	%	No active anti-cancer treatment N	%	% of Total Tumours Reported
Prostate (11615)	5131	*44.2*	4750	*40.9*	1734	*14.9*	*78.2*
Bladder (5132)	4574	*89.1*	450	*8.8*	108	*2.1*	*84.5*
Kidney (1765)	1273	*72.1*	332	*18.8*	160	*9.1*	*83.9*
Testis (620)	613	*98.9*	6	*1.0*	1	*0.2*	*82.7*
Pelvis/Ureter (234)	189	*80.8*	32	*13.7*	13	*5.6*	*80.4*
Penis (146)	132	*90.4*	9	*6.2*	5	*3.4*	*74.5*
Urethra (25)	15	*60.0*	7	*28.0*	3	*12.0*	*86.2*
Prostatic Urethra (11)	7	*63.6*	2	*18.2*	2	*18.2*	*73.3*

Chart 32

Initial Treatment Intention by Organ
Percentage & Total of Known Intent - 1999

Organ (Number Known)	Curative N	%	Palliative N	%	Surveillance N	%	% of Total Tumours Reported
Prostate (8291)	2465	*29.7*	4483	*54.1*	1343	*16.2*	*69.1*
Bladder (6105)	5096	*83.5*	820	*13.4*	189	*3.1*	*73.4*
Kidney (1579)	1191	*75.4*	307	*19.5*	81	*5.1*	*70.6*
Testis (789)	764	*96.8*	8	*1.0*	17	*2.2*	*70.9*
Pelvis/Ureter (268)	230	*85.8*	30	*11.2*	8	*3.0*	*75.8*
Penis (153)	136	*88.9*	15	*9.8*	2	*1.3*	*64.7*

Chart 33

Laparoscopic Procedures Performed as Percentage of Total Procedures reported*

Organ	2008			2004			2001		
	Open	Lap	Lap as % open	Open	Lap	Lap as % open	Open	Lap	Lap as % open
Prostate	1592	500	*23.9*	2709	290	*9.7*	3838	45	*1.2*
Kidney	1153	446	*27.9*	1345	169	*11.2*	1632	31	*1.9*
Pelvis / Ureter	187	70	*27.2*	187	34	*15.4*	295	6	*2.0*
Bladder	5019	23	*0.5*	5232	4	*0.1*	6854	7	*0.1*

* Laparoscopic procedures not recorded until 2001

Chart 34

Laparoscopic Surgery by Organ and Stage
Total Numbers recorded

Staging	Prostate			Bladder			Kidney			Pelvis/Ureter		
	2008	2004	2001	2008	2004	2001	2008	2004	2001	2008	2004	2001
Stage 0a	N/A	N/A	N/A	5	1	1	N/A	N/A	N/A	13	9	2
Stage I		-	-	1	2	-	199	107	22	6	6	3
Stage II	350	247	40	1	1	3	47	14	3	7	5	
Stage III	58	21	3	4	-	2	74	12	1	6	2	1
Stage IV	5	-	2	-	-	-	17	4	-	4	-	
Not Recorded	87	22	-	13	-	1	109	32	6	34	12	-
Totals	500	290	45	24	4	7	446	169	32	70	34	6

E. Clinical Trial Status and discussion at MDT meeting

Chart 35

Clinical Trial Status

Trial Status	2008		2004		2002*	
	N	%	N	%	N	%
Patient eligible, consented to and entered trial	298	1.2	554	2.3	597	2.1
Patient eligible for trial but declined entry	127	0.5	148	0.6	144	0.5
Patient ineligible for trial	810	3.1	1231	5.0	1088	3.8
Patient not considered for trial	6281	24.3	7839	32.0	8746	30.8
Clinical trial status unknown	10457	40.5	4452	18.1	4879	17.2
Not Recorded	7866	30.4	10308	42.0	12897	45.5

*** First year recorded**

Chart 36

Was the Patient discussed at an MDT meeting with formation of a management plan?

Response	2008		2003*	
	N	%	N	%
Yes	20009	77.4	14967	55.0
No	4852	18.8	9414	34.6
Not Known or Not Recorded	978	3.8	2844	10.4

*** First year recorded**

F. Completeness of Data

Chart 37

Completeness of Data -1
Percentage and numbers of Total Returns unknown

Data Item	2008 Number Unknown	*% of Total Returns 25839*	2004 Number Unknown	*% of Total Returns 24532*	1999 Number Unknown	*% of Total Returns 22309*
Centre no or Cons no	6	*0.02*	0	*0*	9	*0.04*
Hospital number	*323	*1.3*	**760	*3.1*	***257	*1.4*
NHS number	739	*2.9*	2975	*12.1*	6946	*36.5*
Postcode	1770	*6.9*	948	*3.9*	1319	*6.9*
Sex	48	*0.2*	113	*0.5*	118	*0.6*
Date of Birth	345	*1.3*	244	*1.0*	217	*1.1*
Organ	28	*0.1*	181	*0.7*	83	*0.4*
Date of Diagnosis	691	*2.7*	84	*0.3*	604	*3.2*
Referral Source	1600	*6.6*	1592	*6.5*	1096	*5.8*
Priority of GP Referrals	1744/18138	*9.6*	776/17123	*4.5*	-	-
Date of Referral	3044	*11.7*	2419	*9.9*	1820	*9.6*
Date of First Consultation	2595	*10.0*	2101	*8.6*	-	-
Date of Definitive Treatment	7451	*28.9*	7707	*31.4*	-	-
Delay to Diagnosis	2348	*9.1*	2738	*11.2*	-	-
Histological confirmation	418	*1.6*	593	*2.4*	321	*1.7*
Basis of diagnosis if no Histology	240/3976	*6.0*	175/1713	*10.2*	71/875	*8.1*

includes private patients (pp), * includes 22 pp and 255 from 2 centres not extracting hospital numbers; ** includes 160 pp + 220 from 1 centre with data extraction problems ; * includes 198 pp**

Chart 38

Completeness of Data -2
Percentage and numbers of Total Returns unknown

Data Item	2008 Number Unknown	*% of Total Returns 25839*	2004 Number Unknown	*% of Total Returns 24532*	1999 Number Unknown	*% of Total Returns 19009*
Histology	783/21445	*3.7*	787/22226	*3.5*	258/17813	*1.4*
Differentiation	8167/21445	*38.1*	5230/22226	*23.5*	2220/17813	*12.4*
Clinical T Category	7962	*30.8*	2669	*10.9*	3357	*17.7*
Clinical N Category	9914	*38.4*	4057	*16.5*	6555	*34.5*
Clinical M Category	10019	*38.8*	4453	*18.2*	6467	*34.0*
Pathological T Category*	9111/21445	*42.5*	9158/22226	*41.2*	6223/17813	*34.9*
Pathological N Category*	10731/21445	*50.0*	9920/22226	*44.6*	9061/17813	*50.9*
Pathological M Category*	10754/21445	*50.1*	9930/22226	*44.7*	9055/17813	*50.8*
PSA at time of Diagnosis	2533/14625	*17.3*	2276/14858	*15.3*	1071/9277	*11.5*
Gleason Scores	2950/14625	*20.2*	2102/14858	*14.1*	-	-
Testicular S Category	580/791	*73.4*	436/750	*58.1*	307/838	*36.6*
Treatment Intention	8024	*31.2*	4949	*20.2*	1646	*8.7*
Treatment Type	1043/15481	*6.7*	703/17559	*4.0*	331/15714	*2.1*
Clinical Trial Status	7866	*30.4*	10705	*43.6*	-	-
Discussed at MDT	483	*1.9*	1907	*7.8*	-	-
Pathological Ref. No.	11003	*42.6*	6322	*25.8*	-	-

G. Bladder Cancers – 1999 to 2008

The BAUS Cancer Registry (BCR) currently has data on over 270,000 new urological cancers diagnosed since 1998. We have undertaken an ad hoc analysis of all bladder cancer entries between 1999 and 2008 inclusive. This is estimated to represent between 40 and 50% of all new bladder cancer registrations during this time period.

Chart 39

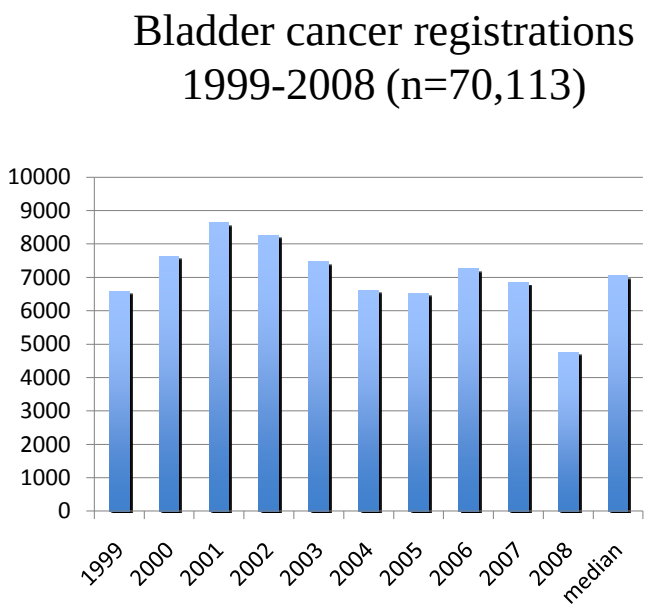
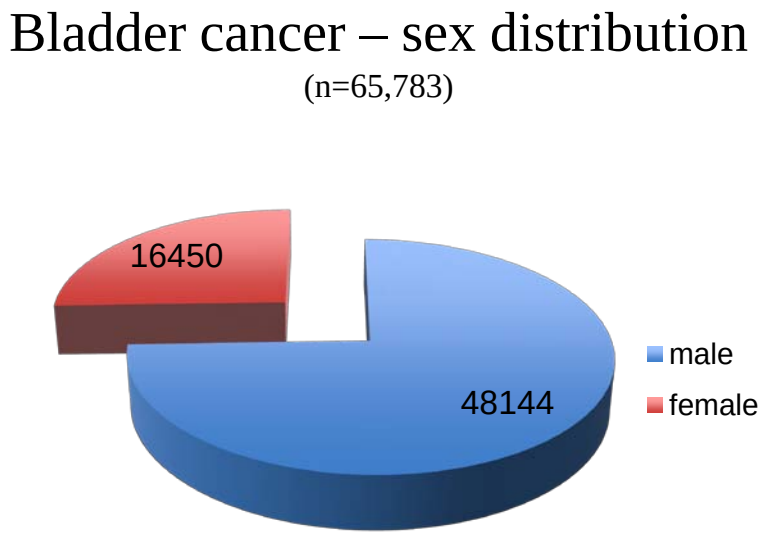


Chart 40



Male: Female ratio 3:1

Chart 41

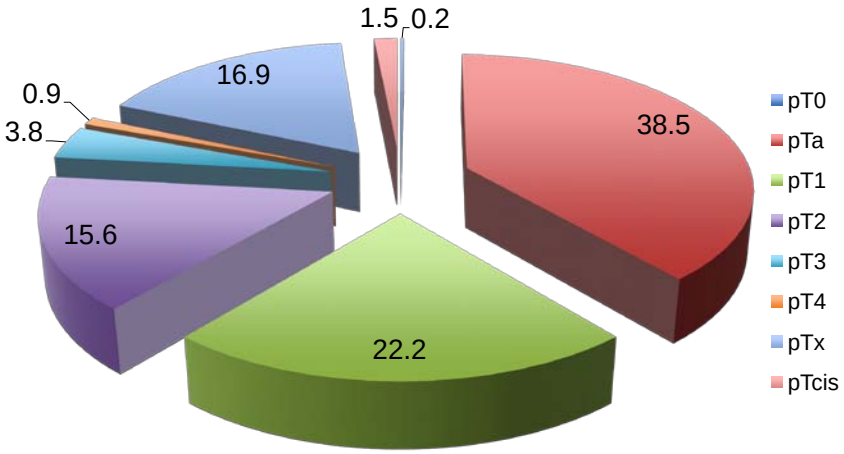
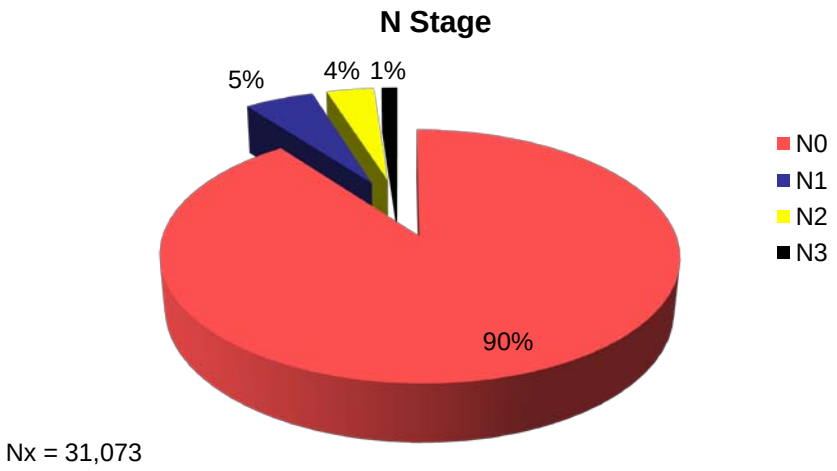


Chart 42

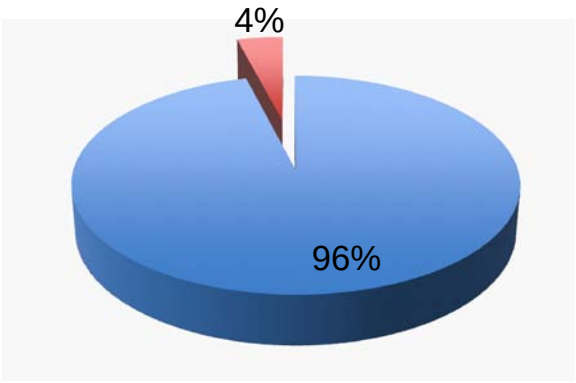
Pathological N stage (n = 40,211)



Nx = 31,073

Chart 43

Pathological M stage (n=8,724)



In most cases of superficial TCC, M stage assigned was Mx = 31,179

Chart 44

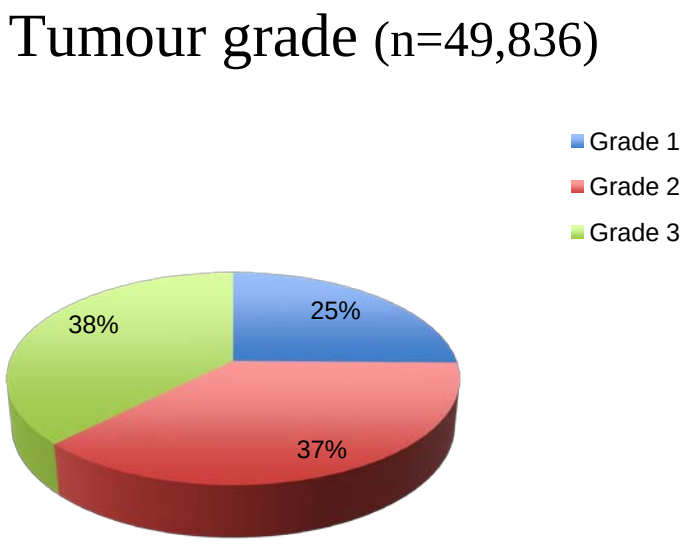


Chart 45

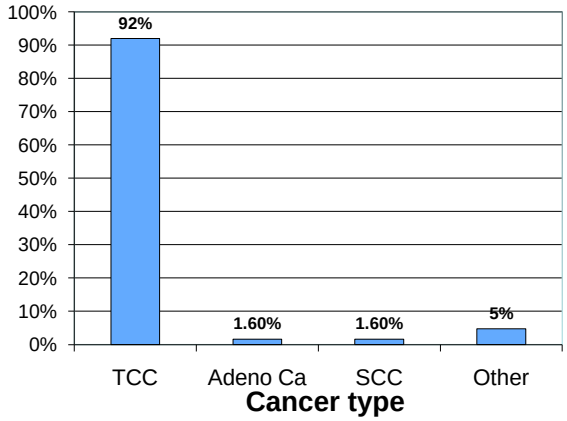


Chart 46

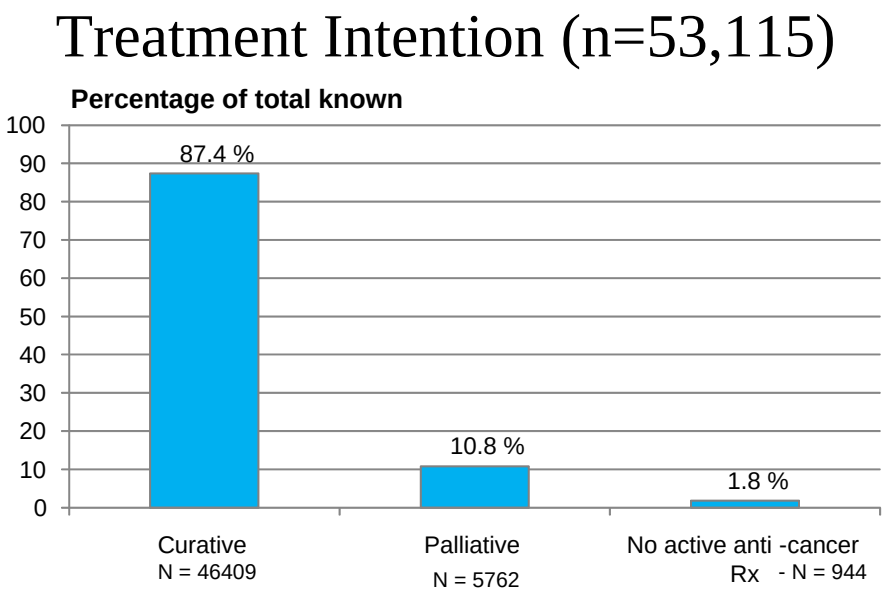
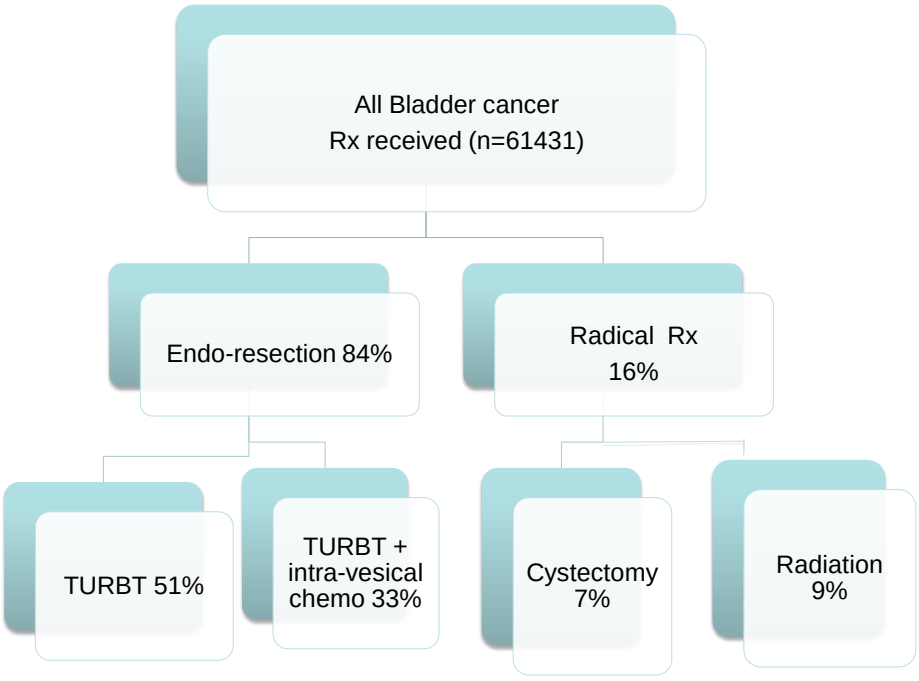


Chart 47



H. Complex operations database – Cystectomy – 2004 - 2008

Data has been collected since January 2004 and we have performed an ad hoc analysis on all data collected between 2004 and 2008 inclusively. HES data indicate that between 1000 and 1200 cystectomies are performed annually. Analysis of our dataset provides valuable information on demographic and peri-operative variables but highlights the lack of useful, robust outcome data

Chart 48

Cystectomy – sex distribution (n=2816)

Sex	Frequency	%
Male	2014	72
Female	721	26

Missing 81

Chart 49

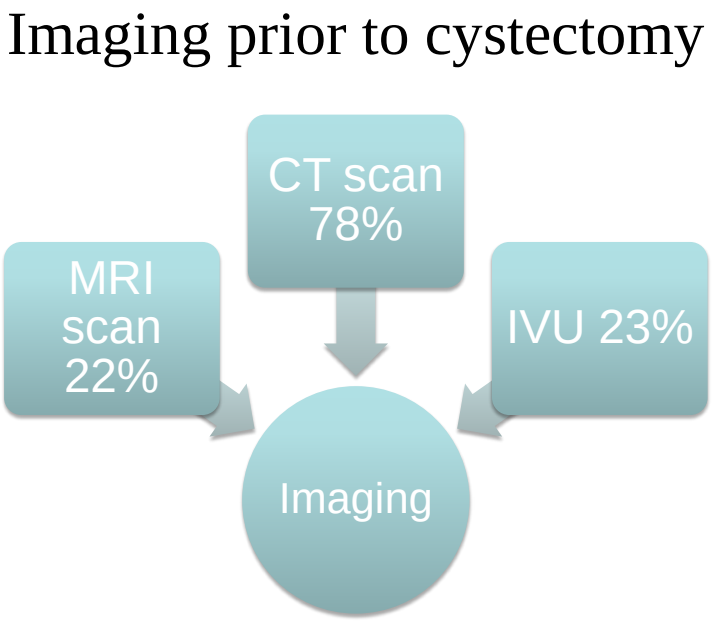


Chart 50

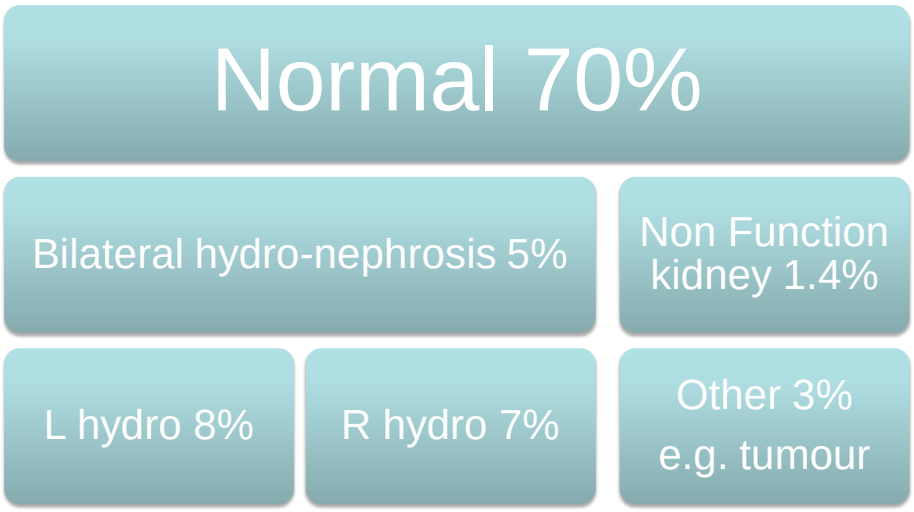


Chart 51

Peri-operative variables

Variable	
Operative time (median)	279 mins (95% CI = 275-344)
Blood loss (median)	1200ml (95% CI = 1466-1587ml)
Transfusion rate (mean)	59%
Blood transfused	2.9 units (95% CI = 0.9-5)
Intra-operative complications	9%
Post-operative complications	23%
Hospital stay (median)	14 days (95% CI =18-23)

Chart 52

Intra-operative complications

Complication	Incidence %	Frequency (N)
Bleeding	2.3	64
Cystectomy abandoned	0.36	10
Rectal injury	0.4	11
Cardio-pulmonary	0.32	9
Colon/small bowel procedure	0.82	23
Vascular injury	0.18	5
Nerve injury	0.18	5
Death in OR	0.04	1

Chart 53

Post op complication	Incidence %	Frequency (N)
Bowel obstruction	0.5	13
Wound dehiscence	0.9	25
Bowel fistula	0.4	12
C. Difficile	0.3	9
Wound infection	1.5	43
Ileus	2.3	66
Urine leak	0.7	20
Sepsis	0.8	22
Cardiac arrythmia	0.4	10
PE	0.3	8
Septicaemia	0.2	7
CVA	0.1	4
Myocardial infarction	0.3	9
Bleeding	0.4	11
Death	0.2	5
GI bleed	0.5	15
Nerve injury	0.1	3

Chart 54

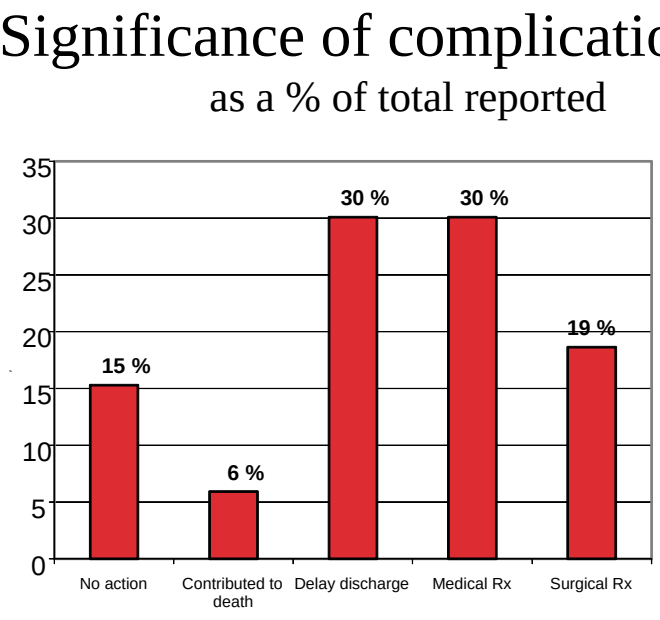
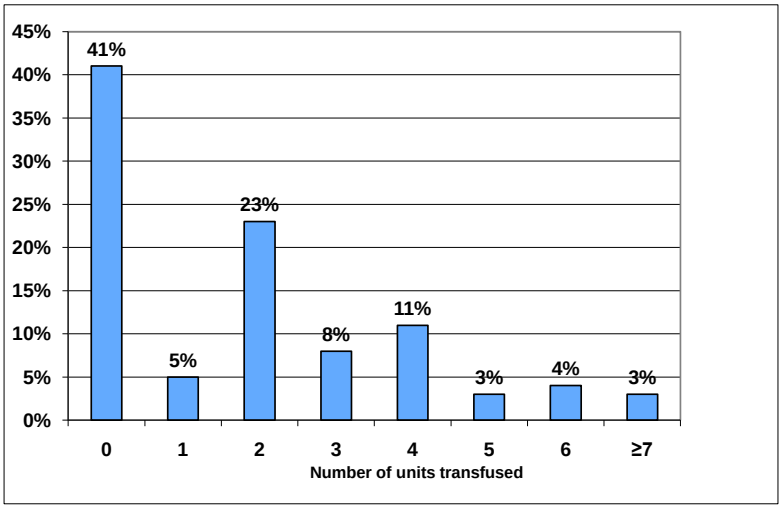


Chart 55

Blood transfused n=2814



Missing 702

Chart 56

Type of urinary diversion

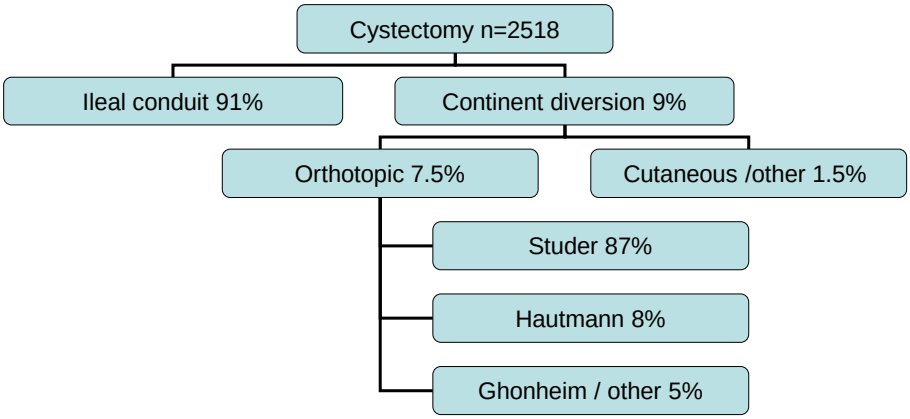


Chart 57

Survival (n=2816)

Follow up (mean)	40.9 months (95% CI = 38.5 – 43)
Deaths	215 (7.6%)
Time to death	5.4 months (95% CI= 4.3-6.5)

Appendix – Participants over the Years

The following table displays a list of all Hospitals contributing data to the BCR during the pilot period 1st April to 30th September 1998 and the ten consecutive 12 month periods from January 1999 to December 2008. The final 5 columns show those contributing data for the complex operations dataset for the calendar years 2004 - 2008.

N.B. Not all consultants from each participating hospital have contributed data

	BAUS CANCER REGISTRY – MINIMUM DATASET											COMPLEX OPERATIONS				
HOSPITAL	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2004	2005	2006	2007	2008
Aberdeen Royal Infirmary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					✓
Addenbrooke's Hospital	✓	✓				✓	✓			✓						
Airedale General Hospital	✓	✓	✓	✓	✓	✓	✓	✓					✓	✓		
Alexandra/ Kidderminster/Worcester Hospitals	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓
Altnagelvin Area Hospital		✓					✓	✓	✓	✓	✓	✓	✓	✓	✓	
Antrim Hospital			✓	✓	✓	✓										
Arrowe Park Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓
Ayr Hospital		✓	✓	✓	✓	✓	✓		✓	✓	✓	✓		✓	✓	✓
Balfour Hospital				✓												
Barnet & Chase Farm Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Barnsley DGH		✓	✓	✓							✓					
Basildon Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Battle Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Bedford Hospital	✓	✓	✓	✓	✓	✓	✓			✓	✓			✓	✓	✓
Belfast City Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Belford Hospital				✓	✓											
Birmingham Heartlands Hospital	✓	✓		✓	✓	✓										
Bolton Royal Infirmary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Borders General Hospital				✓	✓	✓										
Bradford Royal Infirmary		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Bromley Hospital		✓	✓	✓	✓	✓	✓	✓	✓				✓	✓		
Bronglais Hospital	✓	✓	✓	✓	✓	✓	✓	✓								
Broomfield Hospital	✓		✓	✓			✓	✓	✓						✓	✓
Castle Hill Hospital, Hull		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Central Middlesex		✓														
Cheltenham General Hospital	✓	✓	✓	✓		✓										
Chesterfield & North Derbyshire	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓		✓		✓	
Christie Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓
Churchill Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
City Hospital NHS Trust	✓	✓	✓	✓	✓		✓									
Colchester General Hospital		✓	✓	✓	✓	✓	✓	✓		✓	✓	✓				
Cookridge Hospital		✓	✓	✓												
Darent Valley Hospital		✓	✓	✓	✓	✓	✓	✓	✓							
Dept of Urology				✓	✓	✓	✓	✓				✓	✓			
Derby City General Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Derriford Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Diana, Princess of Wales Hospital		✓	✓	✓	✓	✓										
Doncaster & Bassetlaw Hospitals NHS Trust	✓	✓	✓				✓	✓	✓	✓	✓		✓		✓	✓

	BAUS CANCER REGISTRY – MINIMUM DATASET											COMPLEX OPERATIONS				
HOSPITAL	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2004	2005	2006	2007	2008
Dorset County Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Dr Gray's Hospital				✓	✓	✓										
Dumfries & Galloway Royal Infirmary				✓	✓	✓										
East Lancashire Hospitals NHS Trust		✓	✓	✓	✓	✓	✓		✓							
East Lancashire Hospitals NHS Trust			✓	✓	✓	✓			✓	✓	✓					✓
East Sussex Hospitals NHS Trust		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Edith Cavell Hospital	✓	✓	✓	✓	✓		✓	✓								
Epsom General Hospital	✓	✓	✓	✓	✓	✓	✓			✓	✓					
Freeman Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓
Furness General Hospital	✓	✓	✓	✓	✓	✓	✓	✓				✓	✓			
Gartnavel General Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓
George Eliot Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Glan Clwyd Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Glasgow Royal Infirmary		✓	✓	✓	✓	✓			✓	✓	✓			✓	✓	✓
Gloucestershire Royal Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓				✓
Good Hope Hospital NHS Trust		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Guy's Hospital		✓	✓	✓	✓		✓	✓			✓	✓		✓	✓	✓
Hairmyres Hospital											✓					✓
Halton General Hospital								✓								
Hammersmith Hospital	✓	✓														
Harold Wood Hospital		✓	✓	✓												
Harrogate District Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hereford Hospitals NHS Trust	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hillingdon Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Homerton Hospital						✓	✓	✓	✓		✓					
Huddersfield Royal Infirmary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				
Inverclyde Royal Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓						✓
James Cook University Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓				✓
James Paget Hospital	✓	✓	✓	✓	✓	✓	✓	✓				✓	✓			
Kent and Sussex Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓			
Kettering General Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				✓	✓
King George Hospital	✓	✓	✓	✓	✓	✓	✓	✓				✓	✓		✓	
King's College Hospital	✓	✓	✓	✓	✓	✓	✓	✓								
King's Mill Hospital	✓	✓	✓	✓	✓	✓	✓				✓					✓
Kingston Hospital		✓	✓	✓	✓		✓	✓								
Leicester General Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓
Leighton Hospital	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓					✓
Lincoln & Louth NHS Trust		✓	✓	✓		✓	✓				✓	✓				
Lister Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Lorn & Islands District General Hospital				✓	✓	✓			✓	✓						
Luton & Dunstable Hospital		✓			✓	✓										
Maidstone Hospital					✓	✓	✓	✓								
Manchester Royal Infirmary				✓	✓	✓	✓	✓	✓	✓	✓					
Mayday University Hospital	✓	✓	✓	✓	✓	✓							✓			
Medway Maritime Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Mid Ulster Hospital						✓										
Milton Keynes General Hospital			✓	✓	✓	✓	✓	✓			✓					✓
Monklands District General Hospital				✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

	BAUS CANCER REGISTRY – MINIMUM DATASET											COMPLEX OPERATIONS				
HOSPITAL	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2004	2005	2006	2007	2008
Morriston Hospital	✓	✓	✓	✓	✓		✓	✓								
Mount Vernon & Watford Hospitals	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓
Nevill Hall Hospital			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
New Cross Hospital			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ninewells Hospital			✓	✓	✓	✓									✓	
Noble's Isle of Man Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Norfolk & Norwich Hospital		✓	✓	✓	✓	✓				✓	✓					
North Devon District Hospital						✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
North Hampshire Hospital	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓			✓
North Middlesex Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
Northampton General Hospital		✓		✓	✓	✓	✓	✓	✓	✓	✓		✓			
Northwick Park Hospital	✓	✓										✓				
Nottingham City Hospital	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓	✓	✓	✓
Ormskirk District General Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Perth Royal Infirmary		✓	✓	✓	✓	✓										
Pilgrim Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓			
Pinderfields Hospital	✓	✓	✓	✓	✓											
Prince Philip Hospital				✓	✓		✓	✓	✓	✓	✓					
Princess Alexandra Hospital	✓	✓	✓	✓	✓		✓	✓	✓				✓			
Princess Margaret Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓				
Princess Of Wales Hospital		✓				✓	✓									
Queen Elizabeth Hospital, B'ham	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓
Queen Elizabeth Hospital, King's Lynn		✓	✓	✓	✓						✓					
Queen Elizabeth Hospital, Woolwich		✓	✓	✓	✓	✓	✓	✓		✓						
Queen Margaret Hospital		✓	✓	✓	✓	✓	✓					✓				
Queen's Hospital, Burton	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓
Raigmore Hospital				✓	✓	✓		✓					✓			
Rotherham District General Hospital	✓	✓	✓	✓	✓	✓	✓					✓				
Royal Alexandra Hospital (Paisley)		✓	✓	✓	✓	✓	✓	✓	✓	✓						✓
Royal Bournemouth Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Royal Cornwall Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					✓
Royal Devon and Exeter Hospital	✓	✓	✓	✓	✓	✓	✓	✓						✓	✓	✓
Royal Free Hospital	✓	✓	✓		✓	✓	✓									
Royal Glamorgan Hospital	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓					✓
Royal Gwent Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Royal Hallamshire Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓		✓
Royal Hampshire County Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Royal Lancaster Infirmary	✓	✓														
Royal Liverpool University Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				✓	✓
Royal Orthopaedic Hospital		✓	✓			✓		✓	✓	✓	✓					
Royal Preston Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Royal Shrewsbury Hospital	✓	✓	✓	✓	✓	✓	✓									
Royal Surrey County / Frimley Park Hospital		✓	✓	✓	✓	✓			✓	✓	✓			✓	✓	✓
Royal Sussex County Hospital	✓	✓	✓			✓	✓	✓		✓	✓					
Royal United Hospital, Bath	✓	✓	✓	✓	✓	✓	✓									

	BAUS CANCER REGISTRY – MINIMUM DATASET											COMPLEX OPERATIONS				
HOSPITAL	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2004	2005	2006	2007	2008
Royal West Sussex NHS Trust, St Richard's Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Salford Royal Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Salisbury District Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sandwell District General Hospital	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓					
Scarborough Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				
Southampton General Hospital						✓	✓		✓	✓	✓	✓	✓	✓	✓	
Southend Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Southern General Hospital				✓	✓	✓			✓	✓	✓			✓	✓	✓
Southmead Health Services Trust	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓
St Bartholomew's Hospital		✓	✓	✓	✓	✓		✓	✓		✓					
St George's Hospital	✓	✓	✓	✓	✓	✓					✓	✓	✓			
St Helier Hospital			✓	✓	✓	✓	✓	✓		✓	✓					✓
St James' Hospital, Dublin	✓	✓	✓	✓	✓											
St James's University Hospital	✓	✓	✓	✓	✓	✓	✓		✓	✓						✓
St John's Hospital				✓	✓	✓			✓							
St Mary's Hospital, IOW	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓
St Mary's Hospital, IOW		✓	✓	✓	✓	✓	✓		✓	✓	✓			✓	✓	✓
St Mary's Hospital, London		✓	✓													
St Peter's Hospital		✓		✓	✓											
St Vincents Hospital		✓		✓												
Stafford District General Hospital	✓	✓	✓	✓												
Stepping Hill Hospital		✓	✓	✓		✓	✓	✓								
Stirling Royal Infirmary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Stobhill Hospital			✓	✓	✓	✓	✓		✓	✓	✓				✓	✓
Stoke Mandeville Hospital					✓											
Stracathro Hospital		✓	✓	✓	✓	✓										
Sunderland Royal Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Taunton And Somerset Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					✓
The Countess of Chester Hospital							✓	✓	✓	✓	✓					
The Ipswich Hospital	✓	✓	✓	✓	✓	✓	✓					✓		✓	✓	
The Royal Oldham Hospital		✓	✓	✓	✓	✓	✓	✓			✓					
Torbay Hospital		✓	✓	✓	✓	✓		✓	✓	✓	✓		✓	✓	✓	✓
Trafford General Hospital											✓					
Ulster Hospital Dundonald		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
United Bristol Health Care Trust	✓	✓	✓	✓	✓	✓	✓	✓		✓			✓			
University Hospital of North Durham		✓	✓		✓	✓	✓	✓	✓		✓					✓
University Hospital of North Stafford	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓		✓	✓	✓
University Hospital Of Wales	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓
Vale of Leven Hospital				✓	✓											
Walsall Manor Hospital N H S Trust	✓	✓	✓	✓	✓	✓	✓	✓				✓				
Walsgrave Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Wansbeck General Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Warrington District General Hospital	✓	✓	✓	✓	✓											
Warwick Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
West Cumberland Hospital	✓	✓	✓	✓												

	BAUS CANCER REGISTRY – MINIMUM DATASET											COMPLEX OPERATIONS				
HOSPITAL	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2004	2005	2006	2007	2008
West Suffolk Hospital	✓	✓	✓	✓	✓	✓	✓	✓								
West Wales General Hospital		✓	✓	✓	✓		✓	✓	✓	✓	✓		✓			
Western General Hospital, Edinburgh		✓	✓	✓	✓	✓			✓			✓	✓			✓
Western Isles Hospital				✓	✓											
Weston - Super - Mare General Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				✓	✓	
Wexham Park Hospital				✓		✓	✓	✓	✓	✓	✓					
Whipps Cross Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓
Whiston Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Wigan Infirmary					✓	✓										
Wishaw General Hospital					✓	✓					✓					
Withington Hospital											✓					
Worthing Hospital	✓	✓	✓	✓	✓		✓	✓	✓	✓						
Wrexham Maelor Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Wycombe General Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓		
Yeovil District Hospital		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓					
York District Hospital	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓			
Ysbyty Gwynedd Hospital	✓	✓	✓	✓	✓		✓	✓	✓		✓	✓	✓	✓		