



# Impact of the 2018 Solid Tumour Rules for Colorectal Cancer in Canada



## Canadian Council of Cancer Registries (CCCR) Data Quality Management Committee (DQMC):

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### Background

- The SEER 2007 Multiple Primary and Histology (MPH) rules were developed to promote consistency and standardization of cancer registrar coding.
  - These rules were in effect for cases diagnosed 2007 - 2017
- Effective for 2018 diagnosis, the rules, now called the Solid Tumour Rules (STR), were revised and expanded with detailed instructions and site-specific guidelines.
- This review was undertaken to assess the impact of these changes in Canada to colorectal cases.
- The Colon rules were chosen due to
  - Canada's collection of high grade dysplasia as in situ carcinoma
  - The discontinued use of the "in a polyp" codes
  - The rectum/rectosigmoid now being included in the colon module

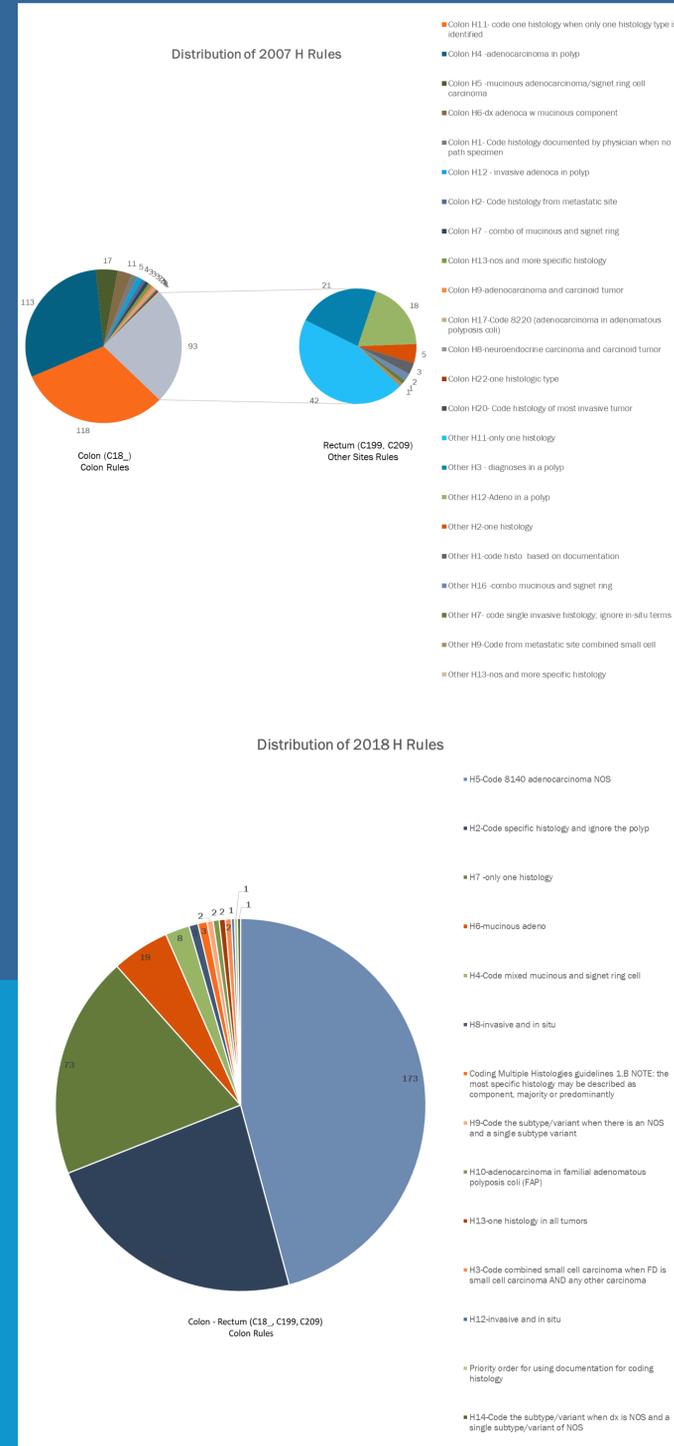
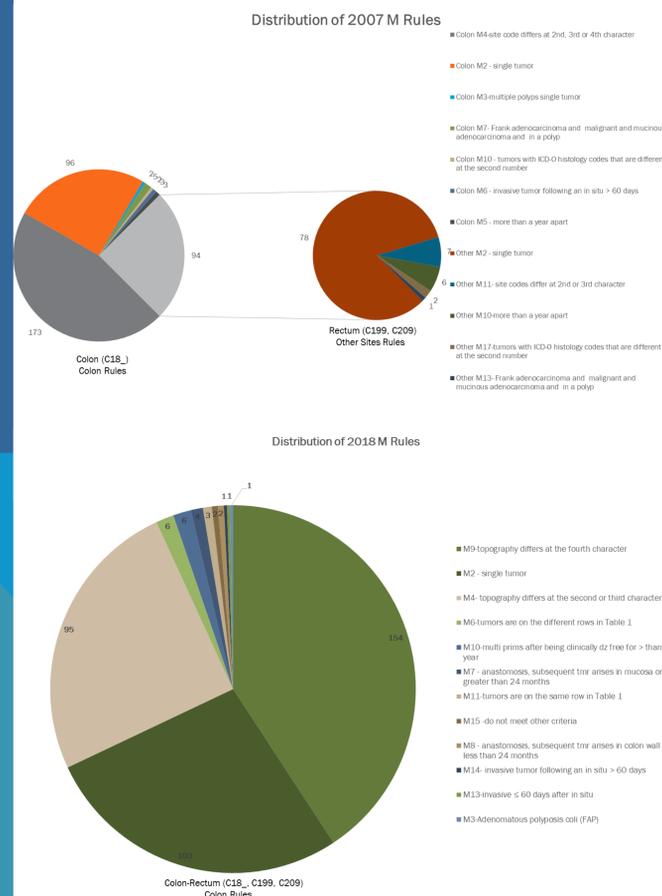
### Objectives

- To evaluate the effect of the new 2018 SEER Colon Solid Tumour Rules.
- To identify the potential impact of changing reportability rules for high grade dysplasia (HGD) to the Canadian Cancer Registry .
- To recognize additional demand put on registry staff.

### Method

- The Data Quality Management Committee of the Canadian Council of Cancer Registries (CCCR) gathered 234 patients (378 tumours) from eight Provincial Registries using the 2017 incidence.
- Both sets of rules, MPH and STR, were applied to the cases and the results were recorded and analyzed.

### Results



- Of 234 patients reviewed, only 2 cases (0.8%) resulted in a change from **multiple primaries to a single primary**
- 159/378 tumours (42%) had a change from **polyp histology to a more specific histology**
- Of those 159 cases:
  - 89/159 tumours (56%) changed to **adenocarcinoma**
  - 55/159 tumours (35%) changed to **high grade dysplasia histology**
  - 15/159 tumours (9%) changed to a **histology other than adenocarcinoma**

### Conclusion

- We see **no major** change to the number of primaries abstracted and coded.
- We see an increase in the use of the histology code 8148/2 for HGD in a polyp due to STR rule H2.
- HGD is reportable in Canada as in situ carcinoma. It was decided Canada would continue to collect as in situ, otherwise there will be a huge decline in the reporting of in situ neoplasms for the colon and rectum sites.
- Impact to registry staff is an increase in training and time to abstract cases; learning how to interpret and correctly apply the new rules as they are very detailed and comprehensive.