Completeness of reporting of basal cell carcinoma and squamous cell carcinoma to a pharmacovigilance register and the Health and Social Care Information Centre.

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Completeness of reporting of basal cell carcinoma and squamous cell carcinoma to a pharmacovigilance register and the Health and Social Care Information Centre.


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Table 1: Number of patients and cancers reported to each registry; n patients (n cancers)

<table>
<thead>
<tr>
<th>Registry</th>
<th>Incident Cancers</th>
<th>Previous Cancers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>BCC (n)</td>
<td>SCC (n)</td>
</tr>
<tr>
<td>BADBIR</td>
<td>53 (79)</td>
<td>39 (63)</td>
</tr>
<tr>
<td>HSCIC</td>
<td>15 (15)</td>
<td>16 (17)</td>
</tr>
<tr>
<td>Total</td>
<td>57 (83)</td>
<td>45 (69)</td>
</tr>
</tbody>
</table>

Figure 2: Overlap in incident (A) and previous (B) cancers reported to BADBIR and HSCIC

- 91 patients were recorded in both databases, but only 22 of 68 SAEs and 79 of 204 previous cancers were matched for these patients.

CONCLUSION

- The findings suggest that the reporting of SCCs and BCCs is more complete in BADBIR than in HSCIC.
- Since undertaking this piece of work, it was identified that HSCIC in England record the first SCC and/or BCC per patient1; this accounts for a substantial proportion of BCCs and SCCs missed by HSCIC, but not for the discrepancy in patients with a cancer.
- Failure to use linked sources may lead to biased estimates of the incidence of SCCs and BCCs.

REFERENCES


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Disclosures

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