# End-user recommendations for advancing registry-based cancer research

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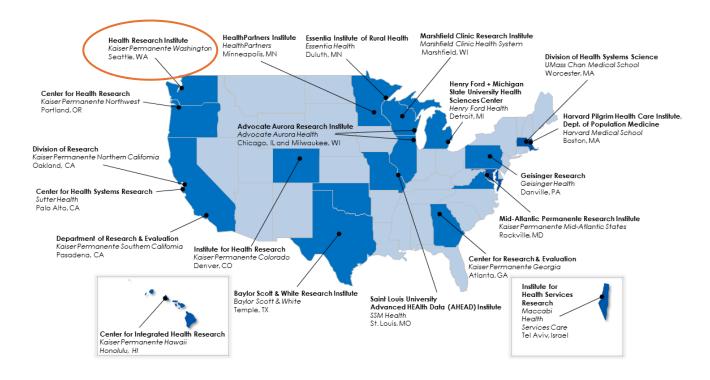
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# Disclosures

- I receive funding from the National Institutes of Health
- Opinions are my own and do not represent those of Kaiser Permanente

# Perspective of a registry end-user

- Based at Kaiser Permanente Washington
- Part of Health Care Systems Research Network (HCSRN)



# Linked data areas within the HCSRN

- Enrollment
- Demographics
- Pharmacy
- Encounters
- Procedures
- Diagnoses
- Vital signs
- Tumor
- Death
- Census
- And more!

## Recommendations to advance registry-based cancer research

- 1. Ease data sharing restrictions
- 2. Require and fund inclusion of recurrence in cancer registries

## 1. Ease data sharing restrictions

- Linkages between registries and health care systems data are critical for cancer research
  - Health care systems have rich longitudinal data
- Challenges
  - Data Use Agreements are often for specific projects
  - Limits on further sharing (e.g., into data repositories)
- Solutions
  - Regulatory

## 2. Require and fund inclusion of recurrence in cancer registries

- Possible approaches
  - Medical records abstraction
  - Medical claims
  - Imaging and pathology feeds
  - Patient report
- Challenges
  - Distinguishing recurrence vs. progression (Thompson et al.)
  - Coverage
  - Accuracy
  - Cost
- Solutions
  - Multi-pronged data collection
  - Financial
  - Regulatory