ABSTRACTS

XI INTERNATIONAL CANCER CONGRESS

CONFERENCES SYMPOSIA WORKSHOPS EPIDEMIOLOGY OF LUNG CANCER IN

PR BULGARIA

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In terms of intensive and standardized indices incidence rates of lung cancer in PR Bulgaria are discussed for the period 1961-1972-in general as well as after groups of .population and districts in the country. An attempt is made to elucidate the occurrence of lung cancer in associ ation with cigarette smoking and air polution carcinogens.

Statistical data record an increaze of morbidity rates of lung cancer from 17,3 in 1962 to 30,02 in 1972, men being substantially more afflicted than women, in a ratio of 5,6 :1.Urban population suffers more / predominautly males , which is attributed to greater. cigarette smoking as well as working in offices with smokers and biological sex differences. Comparisons bettowns and villages ween smokers in reveal equal morbidity rates in botts groups. This fact gives grounds for the assumption that cigarette smoking is the leading carcinogenic factor as compared to air pollution carcinogens in our country.

MULTIPLE PRIMARY CANCERS AS RECORDED BY THE CANCER REGISTRY OF SLOVENIA -A PROBLEM OF RELIABILITY

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The cases recorded by the Slovene Cancer Registry in the past years as new cancers occuring synchronously or nonsynchronously with one or more other primary cancers in the same individual, have been thoroughly reviewed. According to the preliminary data for the year 1971, e.g. among the total of 3959 new cancers registered in this year, 137 (3,5%) such cases were hound, 62 in males (3,1%) and 75 in females (3,8%).

Strictly applying the criteria established by Warren and Gates, and respecting the requirement of Moertel, i.e. to eliminate the cases verified by cytology only, the above given number and

rate of multiple cancer cases would be reduced to 81, i.e. 2.1% (1,5% in males and 2,7% in females) of the corrected total number of newly diagnosed cancers in the year 1971. The median age when the second primary cancer has been diagnosed was 70 years in males and 65 in females.

The incidence of multiple cancers in the populatian covered by the Registry, according to the site and tissue of origin, and the average interval between consecutive neoplasms will be presented and discussed.

Analysing the cases recorded as multiple primary neoplasms it was felt that in certain instances in selecting these cases for further studies one can rely also on the cytological findings and the clinical course of the disease.

SISTEMA NACIONAL DE CONTROLE DO CÂNCER

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The Federal office for cancer research and control in Brazil, presently develops a nationalwide program of detection of the desease, aiming at establishment of the establishment of the basic conditions for the control desease. This program, nomed SISTEMA NA-CIONAL DE CONTROLE De CANCER, is structured into the four sub-systems:

: SISTEMA DE DIAGNÓSTICO Diagnosis

DE CÂNCER;

Info-processing : SISTEMA DE REGISTRO DE

CÂNCER;

Epidemiology : SISTEMA DE EPIDEMIOLO -

GIA DE CÂNCER;

Therapeutic : SISTEMA DE TRATAMENTO

DE CÂNCER;

The system of Diagnosis is composed of diagnosis modules, spread the official and private entities according to operational agreeements.

The system of therapeutic, composed of a series of therapeutic mo dules, spread among the official and pri-