

Questions from the May 5, 2022 SEER*Stat Tools Webinar:

Multiple Primary- Standardized Incidence Mortality Ratios

Definition of Multiple Primaries

1. What is the definition of multiple primary and how do you identify them in a cancer registry?

Answer - The patient has more than one primary based on the Solid Tumor Rules. Each primary is identified by sequence number. The first primary has a sequence number of 01. Subsequent primaries have sequence numbers of 02, 03, etc.

Some resources are:

<https://seer.cancer.gov/tools/solidtumor/>

<https://seer.cancer.gov/tools/heme/>

2. Can a patient have a dual primary malignancy in the breast at the same time? Should it be considered a double malignancy if there are two separate tumors at same time in both breasts?

Answer - Bilateral breast tumors diagnosed at the same time or separately are multiple primaries. Each primary is assigned a different sequence number.

3. Is there a "fixed" accepted "latency" period to decide whether a cancer is a multiple cancer or recurrence for the same kind of cancer site?

Answer - Time intervals differ by site group. For example, for colon primaries, the period of NED (no evidence of disease) is three (3) years, meaning a new tumor that occurs greater than 3 years after the first primary is new primary. For breast, the NED period is 5 years.

4. Is there any role that circulating tumor cells from the primary cancer play in the multiple secondary cancers? considering the importance of impact of treatments on immune systems?

Answer - We are consulting with specialty matter experts on the accuracy of liquid biopsies and circulating cells to determine reportable primaries and assigning histology.

5. Is the treatment information in the Research Plus data in the MP-SIR session still only for the first primary case?

Answer - The treatment information in the Research Plus data is all first course treatment information for that primary tumor. If a person has multiple primaries tumors, each tumor would have treatment information specific to the first course of treatment for that particular primary tumor.

SEER*Stat

1. Is survival and follow up information in the case listing session of SEER*Stat?

Answer - Yes survival months, cause of death and vital status are available in the MP-SIR case listing.

2. In SEER*stat, do the sequence numbers 0 and 1 select primary cancers BUT sequence number 2 and above will determine multiple cancers and its cancer site?

Answer - Sequence numbers 0 and 1 are typically used and recommended for index tumors selections (cohort selection) for MP-SIR/SMR. Sequence number = 0 means it is the patients only federally reportable primary, sequence number = 1 means it is the 1st of 2 or more primaries tumors. Events (subsequent primaries in MP-SIR) would generally be sequence numbers 2-59 (2nd or later federally reportable tumor). Each primary tumor will have information about that primary (including the cancer site).

3. Do the calculations using the research data use months in its calculation? Would the results from Research and Research Plus be the same if the same variables are used?

Answer - Yes, the results will match exactly. While users can access the calendar months fields in the Research Data, the software does have access to them and uses them for the calculations.

4. Can the referent rate be stratified by stage?

Answer - Yes the referent rates can be stratified by stage. The referent rates can only include one stratification variable that is not population defining (e.g. not race, sex, age, year) and that field would be the event variable. It could be cancer site or stage or other non-population defining field. It can also be a merged variable, created from multiple fields (e.g. site and laterality, or site and stage).

5. Do you need to update the software whenever you use it?

Answer - The software needs to be updated when a new version is released. We try to limit software releases to once or twice a year.