

## SWEDEN

### Breast Cancer Mortality in Malmö

An artificial decrease in registered breast cancer mortality has been uncovered by researchers from the Department of Surgery, Malmö University Hospital, University of Lund, Sweden.

Dr Jens Peter Garne and colleagues studied the validity of the officially registered cause of death in 2631 breast cancer patients dying in Malmö, Sweden 1964–1992. Of 2631 deaths, discordance was found as to underlying cause of death in 121 cases (4.6%). Of these, 94 were outright errors. In 27 there was doubt about the reported cause of death.

Write the researchers: “Two kinds of systematic bias were found. One was a tendency to report breast cancer as contributing cause of death in patients with clinical cure. The other was a practice at the Registry to register breast cancer as

underlying cause of death in cases with breast cancer reported as contributing cause of death. This practice was changed in 1981.”

In conclusion they state: “Taken together, these aberrations resulted in a falsely high registration of breast cancer as the underlying cause of death before 1981 and thus an artefactual downward trend in registered breast cancer mortality after this date.”

1. Garne JP, Aspegren K, Balldin G. Breast cancer as a cause of death. *Acta Oncol* 1996, 35, 671–675.

## NORWAY

### Women Smokers at Higher Risk of Lung Cancer than Males

Women in Norway are at higher risk of developing lung cancer than males, given similar smoking exposure, con-

cludes a study by Dr Anders Engeland of the Cancer Registry of Norway, Institute for Epidemiological Cancer Research, Oslo, Norway. This is in line with studies in other countries.

Dr Engeland explored trends in the risk of the most common smoking-associated cancers in Norway based on incidence data from the national population-based registry. Cancers studied were lung, urinary bladder, kidney and pancreas and a group of cancers of the upper digestive and respiratory tract.

The incidence of all the cancers studied increased in both genders during 1954–1993. The largest relative increase was observed in lung and bladder cancer. In female lung cancer, the risk increased dramatically by successive birth cohorts.

1. Engeland A. Trends in the incidence of smoking-associated cancers in Norway, 1954–93. *Int J Cancer* 1996, 68, 39–46.