The World Health Organisation have recently made a number of additions and changes to cancer histology codes which are impacting cancer registries. We are fortunate that the registry was designed so that it is extremely easy to make modifications when required. In addition, in 2015 we completed one page tumour group summaries for our most common childhood cancers to make it simpler for entering new cases. Annual reviews by designated consultants ensure that the information being collected by the NZCCR meets their requirements for patient health passports and future research.

In December Kirsten Ballantine presented the adolescent and young adult (AYA) cancer incidence and survival analysis at the Inaugural International AYA Congress in Sydney. This study, undertaken at the request of the AYA Advisory Group, was a replication of the 2000-2009 NZCCR analysis and her attendance was funded by the National Child Cancer Network.

Following the AYA Congress, the NZCCR received an invitation to attend the Asia-Pacific Cancer Leaders Summit to be held in Brisbane in April 2016. As the NZCCR only recently joined the International Association of Cancer Registries, this will be an excellent opportunity to network and learn from experts in cancer registration from across the region. We will also be presenting a paper on the unique integration of the NZCCR with the Late Effects online clinical tool. The NZCCR has been generously awarded a travel grant by the William Rudder Memorial Fund to attend the three day summit.

Please feel free to share this report with your colleagues who have an interest in childhood cancer. If you have any questions about the registry or wish to find out more about how to request registry data, please contact us using the email addresses below.

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154 New Zealand children under the age of 15 were diagnosed with cancer in 2015, 88 males (57%) and 66 females (43%). Nearly half were under the age of five at the time of diagnosis. 48 patients (31%) participated in an international collaborative clinical trial.

By prioritised ethnicity, 20% of children diagnosed in 2015 were Maori, 12% Pacific Peoples, 14% Asian, 2% African/Middle Eastern, and 52% NZ European/Other European.

Leukaemia was the most commonly diagnosed childhood cancer for 2015 followed by central nervous system (CNS) tumours. However, this varied considerably by age and gender. A higher number of males were diagnosed with lymphoma (18 vs. 3 cases) and renal tumours (7 vs. 2 cases). Older children were more likely to be diagnosed with bone and soft tissue sarcomas, germ cell tumours and carcinomas.