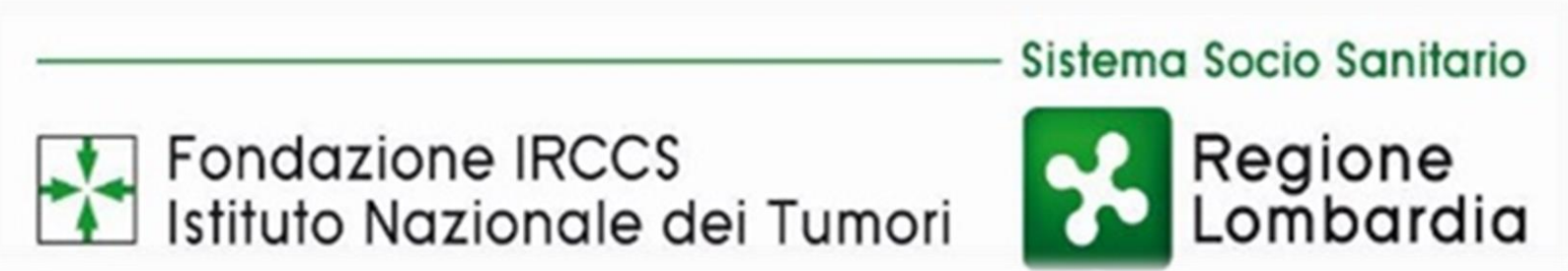


INTERNATIONAL VARIATION IN CHILD HEALTH SURVEILLANCE AND ACUTE CARE PRACTICES: A MIXED METHODS ANALYSIS

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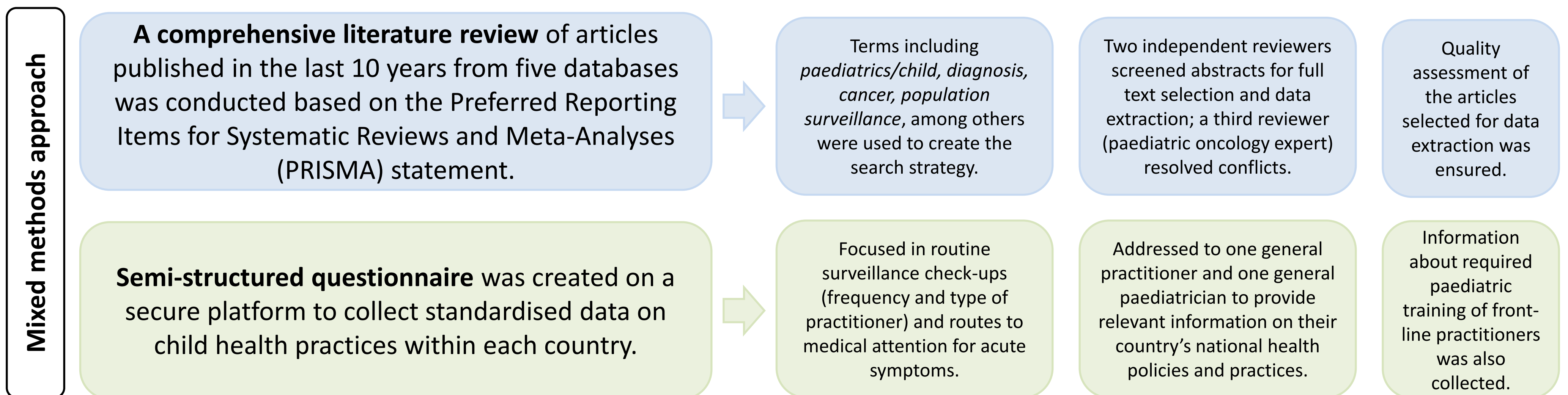
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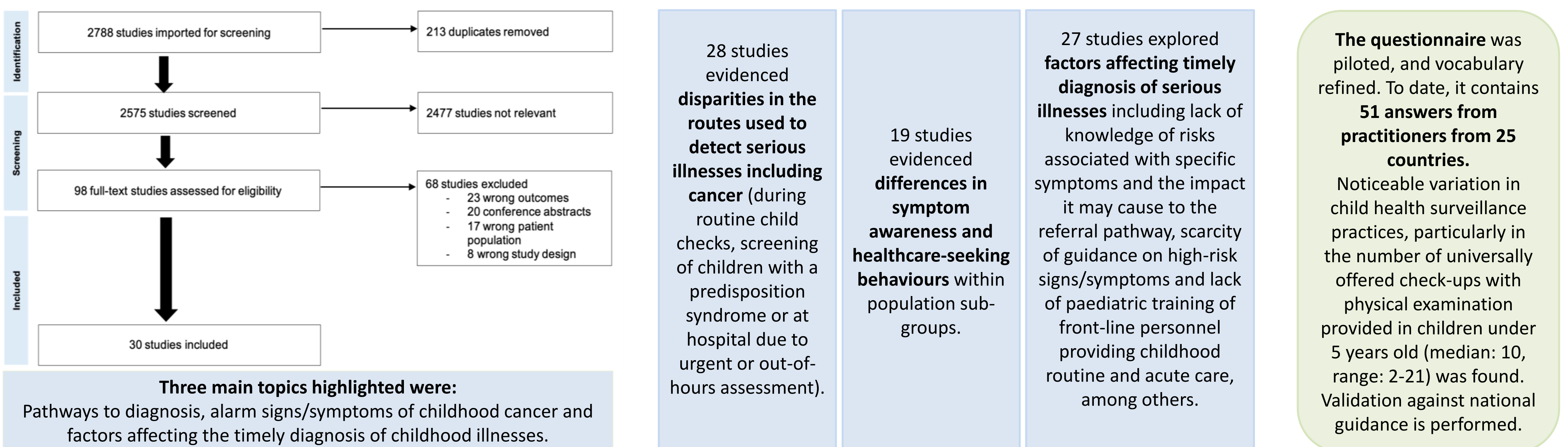
Introduction

Differences in pathways to medical attention and timely diagnosis for symptomatic children may explain some of the variation in childhood cancer survival rates observed between some countries. One aim of the BENCHISTA Project (International Benchmarking of Childhood Cancer Survival by Stage) is to assess current evidence in child health surveillance and acute care practices in relation to early diagnosis of childhood cancers and to perform a descriptive comparative analysis of child health practices across the participating countries (n=27). BENCHISTA is a collaboration between 65 population-based cancer registries that collect standardised data on tumour stage at diagnosis for six childhood solid tumours.

Method/Project description



Results



Discussion

There is evident variation between countries in frequency of routine child health surveillance and in access to assessment by a paediatrician for children with acute symptoms. Similar variation in available guidelines to raise awareness of childhood cancer 'alarm symptoms' exists. These data will be used to interpret any variation in tumour stage at diagnosis revealed by the BENCHISTA Project.

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