

Country	Registry population	National population covered (%)	Overall period of diagnosis	Latest index date (Jan 1 st)	Maximum registration length at the latest index date in years	Number of cases included in analysis	Methods*			
							Step 1. Observed prevalence	Step 2. Completeness indexes	Step 3. Complete prevalence	Step 4. Projections
Denmark	National	100	1978-2014	2013	35	886,125	1	1	1	1
Finland	National	100	1978-2013	2013	35	696,079	1	1	1	1
Iceland	National	100	1978-2014	2013	35	34,731	1	1	1	1
Norway	National	100	1978-2016	2013	35	691,336	1	1	1	1
Northern Europe	-	100	-	2013	35	2,308,271	-	-	4	4
Austria	National	100	1983-2012	2013	30	936,173	1	1	1	1
Belgium	National	100	2004-2013	2013	9	573,206	1	-	1	1
France	Bas Rhin, Doubs, Haut-Rhin, Herault, Isere, Somme, Tarn	9.9	min 1995-2014 max 1990-2014	2013	18 - 23	568,240	1	-	2	1
Germany	Bremen, Common CR of 4 Federal States (Brandenburg, Mecklenburg-West Pomerania, Saxony-Anhalt, Thüringen), Hamburg, Saarland	17.2	min 2000-2013 max 1993-2012	2012 or 2013	11 - 19	969,990	1	-	2	2
Netherlands	National	100	1989-2013	2013	24	1,789,542	1	-	1	1
Switzerland	Geneva, Graubünden and Glarus, Eastern Switzerland, Ticino	20	min 2000-2012 max 1978-2013	2013	13 - 35	182,331	1	1 (Geneva)	2	1
Central Europe	-	30.4	-	2013	9-35	5,019,482	-	-	4	4
Bulgaria	National	100	1993-2013	2013	20	487,275	1	-	1	1
Czechia	National	100	1994-2013	2013	19	894,541	1	-	1	1
Estonia	National	100	1978-2012	2013	35	173,007	1	1	1	1
Latvia	National	100	2000-2013	2013	13	110,439	1	-	1	1
Lithuania	National	100	1993-2012	2013	20	262,530	1	-	1	1
Poland	National	100	2001-2013	2013	12	1,474,000	1	-	1	1
Slovakia	National	100	1978-2010	2011	33	514,700	1	-	1	3
Eastern Europe	-	100	-	2013	12-35	3,916,492	-	-	4	4
Croatia	National	100	2000-2012	2012	12	237,757	1	-	1	2

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European Pool	All 29 European countries contributing to EUROCARE-6 project	51.7	1978-2013	2013	9 - 35	19,538,317	-	-	4	4
EU27	27 Member States of the European Union	38.8	1978-2013	2013	9 - 35	13,123,066	-	-	4	4

* Description of methods

Step 1. Observed prevalence.

Estimation of registry-specific observed limited-duration prevalence up to max duration

1 Observed limited-duration prevalence was estimated with the counting method implemented in the SEER*Stat software by registry, cancer entity, sex, 5-years age group, index date and duration.

Step 2. Completeness indexes

Estimation of European prevalence completeness indexes

1 Registry included in the pool of historical cancer registries with at least 30 years of observation used to estimate completeness indexes. Completeness indexes by cancer entity, sex, 5-years age groups, index date and duration were estimated modelling cancer incidence and survival trends observed in the historical pool.

Step 3. Complete prevalence

Estimation of country-specific complete and limited duration prevalence up to the latest prevalence index date by cancer site, sex, duration and age

1 Country-specific (national registries) complete and limited-duration prevalence were estimated using completeness indexes by 5-years age groups. Estimates were then pooled into broader age groups (0-54, 55-64, 65-74, 75+).

2 Countries with local registries. Registry-specific complete and limited-duration prevalence were first estimated using completeness indexes by 5-years age groups and then pooled into broader age groups (0-54, 55-64, 65-74, 75+). Country-specific estimates were obtained by pooling registry-specific estimates and applying age-specific pooled estimates to the national resident population.

3 Italy. Registry-specific complete and limited-duration prevalence were first estimated using completeness indexes by 5-years age groups and then pooled into broader age groups (0-54, 55-64, 65-74, 75+). Country-specific estimates were obtained as the weighted averages of the estimates for two macro-areas

(N-C, i.e. Northern-Central Italy and S, i.e. Southern Italy) obtained by pooling registry-specific estimates and applying age-specific pooled estimates to the national resident population.

4 Area-specific complete and limited duration prevalence were obtained by pooling country-specific estimates and applying age-specific pooled estimates to the area-specific resident population.

5 Country-specific complete and limited duration prevalence proportions were assumed to be equal to that of the corresponding European area (Northern Europe for Sweden, Central Europe for Luxembourg, Eastern Europe for Hungary and Romania, and Southern Europe for Greece). Prevalence counts were then obtained by applying prevalence proportions to the population size of the country.

Step 4. Projections

Projections of country-specific complete and limited duration prevalence up to 2020

1 Trends of country-specific complete and limited-duration prevalence proportions over the years 2011-2013 by age (0-54, 55-64, 65-74, 75+) were projected up to 2020 through linear regression models. Projected proportions were then applied to the corresponding EUROSTAT country population to obtain prevalence counts at the national level.

2 Trends of country-specific complete and limited-duration prevalence proportions over the years 2010-2012 by age (0-54, 55-64, 65-74, 75+) were projected up to 2020 through linear regression models. Projected proportions were then applied to the corresponding EUROSTAT country population to obtain prevalence counts at the national level.

3 Trends of country-specific complete and limited-duration prevalence proportions over the years 2009-2011 by age (0-54, 55-64, 65-74, 75+) were projected up to 2020 through linear regression models. Projected proportions were then applied to the corresponding EUROSTAT country population to obtain prevalence counts at the national level.

4 Area-specific complete and limited duration prevalence up to 2020 were obtained by pooling country-specific projected estimates and applying the pooled projected estimates to the EUROSTAT area-specific resident population.

5 Country-specific complete and limited-duration projected prevalence proportions were assumed to be equal to that of the corresponding European area (Northern Europe for Sweden, Central Europe for Luxembourg, Eastern Europe for Hungary and Romania, and Southern Europe for Greece). Prevalence counts were then obtained by applying prevalence proportions to the EUROSTAT population size of the country.