Cancer is an important public health problem with 8 to 9 lakh cases occurring every year. At any point of time, it is estimated that there are nearly 25 lakh cases in the country. Every year about 4 lakh deaths occur due to cancer. 40% of the cancers in the country are related to tobacco use. Data from population based registries under the National Cancer Registry Programme indicate that the leading sites of cancer among men are cancer of oral cavity, lungs, oesophagus and stomach and among women are cancer of uterine cervix, breast and oral cavity. Cancers namely those of oral and lungs in males and cervix and breast in females account for over 50% of all cancer deaths in India.

**National Cancer Registry Programme (NCRP):**

For data base of cancer cases, National Cancer Registry Programme (NCRP) was initiated in 1982 by ICMR, which gives a picture of the magnitude and patterns of cancer. There are two types of registries; Population Based Cancer Registry and Hospital Based Cancer Registries, which was started in January 1982. The Population-based registries take the sample population in a geographically defined area while the Hospital-based registries take the data from patients coming to a particular health institution. At present we have 21 Population-based registries and 6 Hospital-based registries all over the country. In 2001, data from all cancer registries and all medical colleges were collated for the “Development of an Atlas of Cancer in India” ([www.canceratlas.india.org](http://www.canceratlas.india.org)) to have an idea of patterns of cancers in several other parts of the country, including those not covered under the NCRP.

**GOALS & OBJECTIVES OF NCCP**

1. Primary prevention of cancers by health education specially regarding hazards of tobacco consumption and necessity of genital hygiene for prevention of cervical cancer.

2. Secondary prevention i.e. early detection and diagnosis of cancers, for example, cancer of cervix, breast and of the oro-pharyngeal cancer by screening methods and patients’ education on self examination methods.

3. Strengthening of existing cancer treatment facilities, which are woefully inadequate.

4. Palliative care in terminal stage of the cancer.
Evolution of NCCP

1975-76  National Cancer Control Programme was launched with priorities given for equipping the premier cancer hospital/institutions. Central assistance at the rate of Rs.2.50 lakhs was given to each institution for purchase of cobalt machines.

1984-85  The strategy was revised and stress was laid on primary prevention and early detection of cancer cases.

1990-91  District Cancer Control Programme was started in selected districts (near the medical college hospitals).

2000-01  Modified District Cancer Control programme initiated.

2004  Evaluation of NCCP was done by National Institute of Health & Family Welfare, New Delhi.

2005  The programme was further revised after evaluation.

Existing Schemes under National Cancer Control Programme (NCCP) as on 1st June 2008 {w.e.f 1st January 2005}:

1. **Recognition of New Regional Cancer Centres** (RCCs): to enhance the cancer treatment facilities across the country and reduce the geographical gap in the country in the availability of cancer care facilities, New Regional Cancer centres are being recognized. A one-time grant of Rs. 5.00 crores is being provided for New RCC’s.

2. **Strengthening of existing Regional Cancer Centres**: A one-time grant of Rs.3.00 crores is provided to the existing Regional Cancer Centres to further strengthen the cancer care services.

3. **Development of Oncology Wing**: Government Hospitals & Government Medical Colleges are provided with a grant of Rs. 3.00 crores for the development of Oncology Wing.

4. **District Cancer Control Programme**: The DCCP will be implemented by a nodal agency, which may be a Regional Cancer Centre or Government Medical College or Government Hospital with radiotherapy facility. A cluster of 2-3 districts are taken up for prevention, early detection, minimal treatment and provision of supportive cancer care at district levels. A grant-in-aid of Rs. 90.00 lakhs spread over a period of 5 years is provided per DCCP proposal.

5. **Decentralized NGO Scheme**: A grant of Rs. 8000/- per camp will be provided to the NGOs for IEC activities. The funds are released through a Nodal agency which could be a Regional Cancer Centre or Government Medical College or Government hospital with radiotherapy facilities.