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LONG-TERM HEALTH CONSEQUENCES OF THE CHERNOBYL DISASTER
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**SUBSYSTEM OF TRACING THE CONTACTS AND SCHEDULING SCREENING
EXAMINATION OF THE SUBJECTS OF CLINICAL-EPIDEMIOLOGICAL STUDY OF
THYROID CANCER AND OTHER THYROID PATHOLOGIES IN BELARUS FOLLOWING THE
CHERNOBYL ACCIDENT**

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The main task of the given study is to establish a cohort of 15 000 individuals from the subjects of existing data base of direct thyroid measurements. All the cohort members should be screened annually during following 25-30 years. The Operational Manual of the Project defines that prior the first visit an informational letter should be sent to each subject with invitation to participate in the study and the subject should give a consent to long term participation in the study. Further to keep the cohort it is planing to mail to the subjects reminding letters and invitations for next annual examinations. However a part of provisional cohort members immigrated from the republic, a part - died, a lot of subjects are in durable business trips or a military service or sometimes refuse from participation in the study for different reasons. In some cases subjects who have given consent do not visit screening center at scheduled time. That is why to provide a collection of information regarding the contacts outcomes a program-informational subsystem have been developed. This subsystem provides automatic print of letters, envelops, and post cards for the subjects, automatic conferment to each subject of appropriate informational-epidemiological status based on the result of contact with him (death, refusal, preliminary consent, non suitable age, immigrated from the republic, wrong address, no response for one month etc.), scheduling of subjects visits to the screening and further contacts with them. Finally creating data base of the outcomes of contacts and visits of subjects to the screening gives the possibility of dynamic tracing of different categories of subjects in order to improve the efficiency of cohort establishment and its keeping in the process of the study.