Resource Summary Report

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Surveillance Epidemiology and End Results

RRID:SCR_006902
Type: Tool

Proper Citation

Surveillance Epidemiology and End Results (RRID:SCR_006902)

Resource Information

URL: http://seer.cancer.gov/

Proper Citation: Surveillance Epidemiology and End Results (RRID:SCR_006902)

Description: SEER collects cancer incidence data from population-based cancer registries covering approximately 47.9 percent of the U.S. population. The SEER registries collect data on patient demographics, primary tumor site, tumor morphology, stage at diagnosis, and first course of treatment, and they follow up with patients for vital status.There are two data products available: SEER Research and SEER Research Plus. This was motivated because of concerns about the increasing risk of re-identifiability of individuals. The Research Plus databases require more rigorous process for access that includes user authentication through Institutional Account or multiple-step request process for Non-Institutional users.

Abbreviations: SEER

Synonyms: Surveillance Epidemiology and End Results (SEER) Program, Surveillance Epidemiology End Results, Surveillance Epidemiology End Results (SEER) Program

Resource Type: report, narrative resource, data set, database, data or information resource

Keywords: cancer, statistics, epidemiology, registry, mortality, cancer mortality, african-american, hispanic, american-indian, alaska native, asian, hawaiian, pacific islander, demographic, tumor site, tumor morphology, stage, treatment, follow-up, vital status, FASEB list

Related Condition: Cancer, Leukemia

Funding: NCI

Resource Name: Surveillance Epidemiology and End Results

Resource ID: SCR_006902

Alternate IDs: nif-0000-21366

Record Creation Time: 20220129T080238+0000

Record Last Update: 20250428T053256+0000

Ratings and Alerts

No rating or validation information has been found for Surveillance Epidemiology and End Results.

No alerts have been found for Surveillance Epidemiology and End Results.

Data and Source Information

Source: SciCrunch Registry

Usage and Citation Metrics

We found 5908 mentions in open access literature.

Listed below are recent publications. The full list is available at FDI Lab - SciCrunch.org.

Zhang XE, et al. (2025) Medicaid coverage continuity is associated with lymphoma stage among children and adolescents/young adults. Blood advances, 9(2), 280.

Ouellette N, et al. (2025) Race and ethnicity dynamics in survival to 100 years in the United States. Journal of internal medicine, 297(1), 2.

Mueller AK, et al. (2025) Importance of reference group selection in the evaluation of cancer incidence. Scientific reports, 15(1), 270.

Jin S, et al. (2025) Prognosis of invasive encapsulated follicular variant and classical papillary thyroid carcinoma: a propensity score-matched study using the SEER database. Scientific reports, 15(1), 413.

Wang H, et al. (2025) The presence of pleural effusion is an independent prognostic factor in patients with malignant pleural mesothelioma. Scientific reports, 15(1), 392.

Sultan I, et al. (2025) Trends in childhood cancer: Incidence and survival analysis over 45 years of SEER data. PloS one, 20(1), e0314592.

Akinyemi OA, et al. (2025) Medicaid Expansion and Survival Outcomes Among Men With Prostate Cancer. Cureus, 17(1), e77434.

Liu Y, et al. (2025) Prognostic value of adjuvant chemotherapy for hormone receptor-negative T1a and T1bN0M0 breast cancer patients. Scientific reports, 15(1), 2260.

Degnim AC, et al. (2025) Changes in breast cancer risk associated with benign breast disease from 1967 to 2013. JNCI cancer spectrum, 9(1).

Bradley CJ, et al. (2025) High-Cost Cancer Drug Use in Medicare Advantage and Traditional Medicare. JAMA health forum, 6(1), e244868.

Dong J, et al. (2025) Prediction of Distant Metastasis of Renal Cell Carcinoma Based on Interpretable Machine Learning: A Multicenter Retrospective Study. Journal of multidisciplinary healthcare, 18, 195.

Li NHY, et al. (2025) Incidence Rate Trends of Breast Cancer Overall and by Molecular Subtype by Race and Ethnicity and Age. JAMA network open, 8(1), e2456142.

Chen C, et al. (2025) Developing a novel model for predicting overall survival in late-onset colon adenocarcinoma patients based on LODDS: a study based on the SEER database and external validation. Discover oncology, 16(1), 99.

Li G, et al. (2025) Association between surgery and increased survival in primary central nervous system lymphoma: a retrospective cohort study. Scientific reports, 15(1), 3816.

Berg AR, et al. (2025) Risk factors for metastatic disease at presentation with chordoma and its prognostic value. North American Spine Society journal, 21, 100566.

Sun Y, et al. (2025) Machine learning-based prognostic model for patients with anaplastic thyroid carcinoma. Discover oncology, 16(1), 70.

Mullins MA, et al. (2025) Implantable cardioverter defibrillators in people dying with cancer: A SEER-Medicare analysis of ICD prevalence and association with aggressive end-of-life care. Cancer, 131(1), e35640.

Jia Y, et al. (2025) Prognostic prediction for inflammatory breast cancer patients using random survival forest modeling. Translational oncology, 52, 102246.

Alshwayyat S, et al. (2025) Personalized treatment strategies for breast adenoid cystic carcinoma: A machine learning approach. Breast (Edinburgh, Scotland), 79, 103878.

Hu Z, et al. (2025) Analysis of the Clinicopathological Characteristics, Genetic Phenotypes, and Prognostics of Primary Pulmonary and Bronchial Adenoid Cystic Carcinoma. Thoracic cancer, 16(2), e15526.