

AJCC Staging Moments

AJCC TNM Staging 8th Edition

Lung Case #3



AJCC

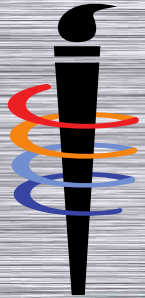
American Joint Committee on Cancer

Validating science. Improving patient care.

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Lung Case # 3

Presentation of New Case

- Newly diagnosed lung cancer patient
- Presentation at Cancer Conference for treatment recommendations and clinical staging



Lung Case # 3

History & Physical

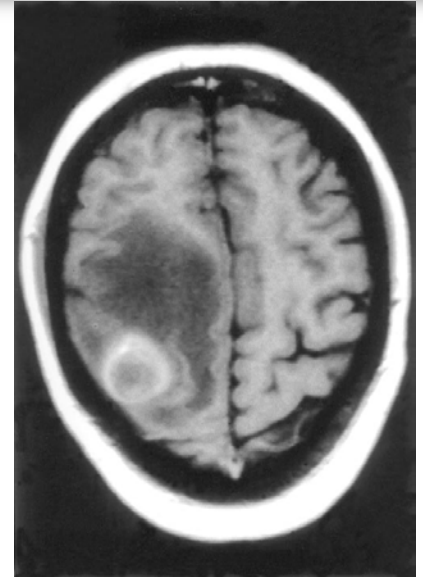
- 65 yr old female who presented with inappropriate behavior and thoughts
- Current smoker, using nicotine patch to quit



Lung Case # 3

Imaging Results

- Chest x-ray- infiltrate
- CT & MRI brain- 2cm mets in each right frontal & right occipital lobes
- CT chest- 2.4cm LUL lung mass, bilateral mediastinal nodes



Used with permission. Schuchert M, Luketich J: Solitary Sites of Metastatic Disease in Non-Small Cell Lung Cancer. *Current Treatment Options in Oncology*. 4(1):65-79. Current Science, Inc.



Lung Case # 3

Diagnostic Procedure

- Procedure
 - CT guided biopsy LUL lung
- Pathology Report
 - Adenocarcinoma



Lung Case # 3

Clinical Staging

- Clinical staging
 - Uses information from physical exam, imaging, and diagnostic biopsy
- Purpose
 - Select appropriate treatment
 - Estimate prognosis



Lung Case # 2

Clinical Staging

- Synopsis: patient with 2.4cm LUL lung mass, bilateral mediastinal nodes, and brain mets
- What is the clinical stage?
 - T_____
 - N_____
 - M_____
 - Stage Group_____



Lung Case # 2

Clinical Staging

- Clinical Stage correct answer
 - cT1c
 - cN3
 - cM1b
 - Stage Group IV
- Based on stage, treatment is selected
- Review treatment guidelines for this stage



Lung Case # 3

Clinical Staging

- Rationale for staging choices
 - cT1c for ca $>2\text{cm}$ but $\leq 3\text{cm}$
 - cN3 because contralateral mediastinal nodes were clinically positive on imaging
 - cM1b because distant metastases (brain) were found on imaging; if additional mets were suspected, appropriate tests would be performed before developing a treatment plan



Lung Case # 3

Treatment Options

- Review treatment guidelines for this stage
- Discuss appropriate treatment plans for this patient



Lung Case # 3

Posttherapy Staging

- Treatment chosen based on 2.4cm LUL lung mass, bilateral mediastinal nodes, and brain mets, Stage IV (clinical staging) is combination of
 - Immunotherapy (based on results of ALK, ROS1 and EGFR) and
 - Radiation to chest and brain
- Posttherapy y-clinical staging may be assigned at completion of therapy

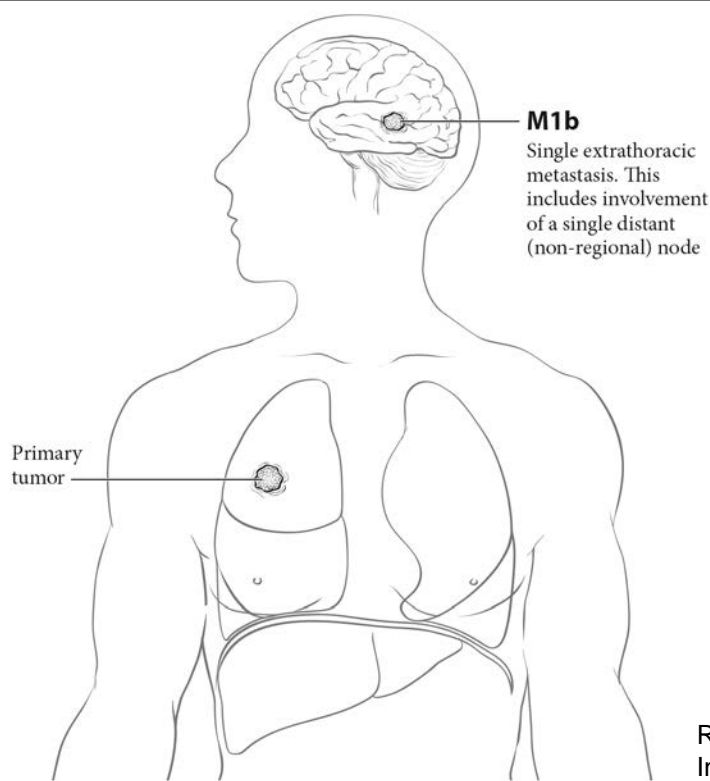


Prognostic Factors/Registry Data Collection

- Applicable to this case
 - Separate tumor nodules: none
 - Visceral and parietal pleural invasion: none



M1b



M1b defined as single extrathoracic metastasis in a single organ (including involvement of a single nonregional node)

Rami-Porta, Asamura, Travis, and Rusch. Lung.
In Amin, M.B., Edge, S.B., Greene, F.L., et al. (Eds.) AJCC Cancer Staging Manual. 8th Ed., 2017



Lung Case # 3

Recap of Staging

- Summary of correct answers
 - Clinical stage cT1c cN3 cM1b Stage Group IV
 - Posttherapy y-clinical stage (yc) unknown
- The staging classifications have a different purpose and therefore can be different. Do not go back and change the clinical staging based on further information.



Staging Moments Summary

- Review site-specific information if needed
- Clinical Staging
 - Based on information before treatment
 - Used to select treatment options
- Posttherapy y-clinical Staging
 - Based on clinical history & physical examination and any imaging studies after completion of therapy
 - Assesses response to treatment

