AJCC Staging Moments

AJCC TNM Staging 8th Edition Supraglottic Larynx Case #2





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Larynx Case # 2 Presentation of New Case

Newly diagnosed larynx cancer patient

 Presentation at Cancer Conference for treatment recommendations and clinical staging



Larynx Case # 2 History & Physical

 73 yr old male who presented with chronic hoarseness, SOB, dysphagia

- Physical Examination
 - Mass involving left false vocal fold and ventricle with bilateral vocal cord mobility
 - Ipsilateral node is hard but mobile without skin or nerve involvement
- No smoking hx, no depression, 5 lb weight loss



Larynx Case # 2 Imaging & Endoscopy Results

CT neck

- Right laryngeal region mass with
- Extension to paraglottic space
- Prominent 1.4cm level III right neck node
- CT chest and CT brain
 - Negative

Laryngoscopy & bx

- Large tumor involving right false vocal cord extending to true vocal cord and medial wall of pyriform sinus on the same side
- Vocal cord is mobile
- No contralateral spread



Used with permission. Becker, M, Moulin G, Kurt A, et al. Atypical Sqamous Cell Carcinoma of the Larynx and Hypopharynx: Radiologic Features. *European Radiology.* 1998; 8:1544.



Larynx Case # 2 Diagnostic Procedure

• Procedure

- Biopsy right false vocal cord during laryngoscopy

Pathology Report

- Squamous cell ca
- Poorly differentiated, Grade 3

Human papillomavirus (HPV) – neg (recorded but doesn't change the stage)



Clinical staging

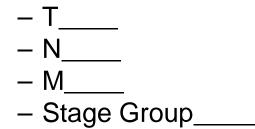
 Uses information from the physical exam, imaging, and diagnostic laryngoscopy

Purpose

- Select appropriate treatment
- Estimate prognosis



- Synopsis: patient with supraglottic lesion extending to glottis, medial wall of pyriform sinus with normal vocal cord mobility, clinically involved nodes
- What is the clinical stage?





Clinical Stage correct answer

- cT3
- cN1
- cM0
- Stage Group III
- Based on stage, treatment is selected
- Review treatment guidelines for this stage



Rationale for staging choices

- cT3
 - Invades more than one adjacent subsite
 - Invades region outside supraglottis (pyriform sinus)
 - Vocal cord is mobile (first three bullets would be T2)
 - Paraglottic space involvement makes it a T3
- cN1 because a single ipsilateral lymph node <3 cm was clinically positive on palpation and imaging studies without extranodal extension ENE on physical exam
- cM0 because there were no signs or symptoms to suggest distant metastases; if there were, appropriate tests would be performed before developing a treatment plan



Larynx Case # 2 Treatment Options

• Review treatment guidelines for this stage

• Discuss appropriate treatment plans for this patient



Larynx Case # 2 Posttherapy Staging

- This patient was recommended for radiation rx & chemotherapy, no surgery
- Posttherapy y-clinical staging may be assigned at completion of therapy



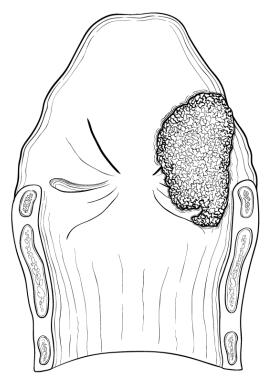
Prognostic Factors/Registry Data Collection

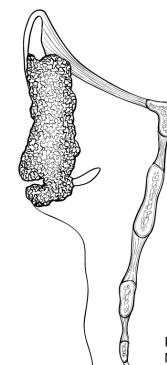
- Applicable to this case
 - Extranodal extension (ENE) clinical: negative
 - Human papillomavirus (HPV) status: negative



T3

T3





T3 for the supraglottis is defined as tumor limited to larynx with vocal cord fixation and/or invading any of the following: postericoid area, preepiglottis space, paraglottic space, and/or inner cortex of thyroid cartilage (shown here with invasion of the supraglottis and vocal cord with vocal cord fixation)

Patel, Lydiatt,, et al. Larynx. In Amin, M.B., Edge, S.B., Greene, F.L., et al. (Eds.) AJCC Cancer Staging Manual. 8th Ed., 2017

Larynx Case # 2 Recap of Staging

- Summary of correct answers
 - Clinical stage cT3 cN1 cM0 ENE(-) Stage Group III
 - 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

