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## Gestational Trophoblastic Disease - Stages and Groups [1]

This section has been reviewed and approved by the [Cancer.Net Editorial Board \[2\]](#), 07/2014

**ON THIS PAGE:** You will learn about how doctors describe the disease's growth or spread. This is called the stage. To see other pages, use the menu on the side of your screen.

Staging is a way of describing where the tumor is located, if it is cancerous, if or where it has spread, and whether it is affecting other parts of the body. Doctors use diagnostic tests to find out the tumor's stage, so staging may not be complete until all the tests are finished. Knowing the stage helps the doctor to decide what kind of treatment is best and can help predict a patient's prognosis, which is the chance of recovery. There are different stage descriptions for different types of tumors. For GTD, here is the staging system developed by the Federation Internationale de Gynecologie et d'Obstetrique, or FIGO.

### FIGO Anatomic Staging

- [Stage I](#): Disease confined to the uterus
- [Stage II](#): GTD extends outside the uterus, but is limited to the genital structures
- [Stage III](#): GTD extends to the lungs, with or without known genital tract involvement
- [Stage IV](#): All other metastatic sites

### World Health Organization (WHO) Risk Score as Adapted by FIGO

The table below shows how the risk score staging factor is determined. Low risk is a score of 6 or less, and high risk is a score of 7 or more. Women with a low-risk tumor means the prognosis is good, even if cancer has spread, because treatment is usually very effective. Women with a high-risk tumor may require more intense treatment even if the tumor has not spread.

	Risk Score			
Prognostic Factor	0	1	2	4
Age	Younger than 40	40 and/or older	-	-

Previous pregnancy	Hydatidiform mole	Abortion	Full-term pregnancy	-
Months since last pregnancy	Less than 4	4 to 6	7 to 12	More than 12
Pretreatment hCG (IU/ml)	Less than $10^3$	Greater than or equal to $10^3$ to $10^4$	$>10^4$ to $10^5$	Greater than or equal to $10^5$
Largest tumor size, including uterus	Less than 3 cm	3 to <5 cm	Greater than or equal to 5 cm	-
Site of spread	Lung	Spleen or kidney	Gastrointestinal tract	Brain, liver
Number of tumors that have spread*	Zero	1 to 4	5 to 8	More than 8
The number of drugs used to treat the tumor that have not worked	None	None	Single drug	Two or more drugs

\*For lung metastases, chest x-ray (not CT scan) is used to count the number of metastases

To stage and determine a risk factor score, a patient's diagnosis is assigned to a stage as represented by a Roman numeral I, II, III and IV. This is then separated by a colon from the sum of all the actual risk factor scores expressed in Arabic numerals, such as Stage II:4 or Stage IV:9. This stage and score will be given for each patient.

For people with PSTT/ETT only the stage will be given (risk factor score is not applicable).

**Recurrent:** Recurrent GTD is a tumor that has come back after treatment. If there is a recurrence, the tumor may need to be staged again (called re-staging) using the system above.

*Information about the GTD's stage and risk group will help the doctor recommend a treatment plan. The next section helps explain the treatment options for this type of tumor. Use the menu on the side of your screen to select Treatment Options, or you can select another section, to continue reading this guide.*

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**Links:**

[1] <http://www.cancer.net/cancer-types/gestational-trophoblastic-disease/stages-and-groups>

[2] <http://www.cancer.net/about-us>