

[Lacrimal Gland Tumor - Stages and Grades](#) [1]

This section has been reviewed and approved by the [Cancer.Net Editorial Board](#) [2], 08/2015

ON THIS PAGE: You will learn about how doctors describe a cancer's growth or spread. This is called the stage. This section also covers grading which describes the composition of cells. To see other pages, use the menu on the side of your screen.

Staging is a way of describing where a tumor is located, whether 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.

The staging below describes lacrimal gland carcinomas. For more information on the staging of ocular non-Hodgkin lymphoma, see the [Guide to Non-Hodgkin Lymphoma](#) [3].

TNM staging system

One tool that doctors use to describe the stage is the TNM system. Doctors use the results from diagnostic tests and scans to answer these questions:

- **Tumor (T):** How large is the primary tumor? Where is it located?
- **Node (N):** Has the tumor spread to the lymph nodes? If so, where and how many?

- **Metastasis (M):** Has the cancer metastasized to other parts of the body? If so, where and how much?

The results are combined to determine the stage of cancer for each person. There are five stages: stage 0 (zero) and stages I through IV (one through four). The stage provides a common way of describing the cancer, so doctors can work together to plan the best treatments.

Here are more details on each part of the TNM system for lacrimal gland cancer:

Tumor (T)

Using the TNM system, the "T" plus a letter and/or number (0 to 4) is used to describe the size and location of the tumor. Some stages are also divided into smaller groups that help describe the tumor in even more detail. Specific tumor stage information is listed below:

TX: The primary tumor cannot be evaluated.

T0 (T plus zero): There is no tumor.

T1: The tumor is 2 centimeters (cm) or smaller and may or may not extend outside of the lacrimal gland to the orbital soft tissue.

T2: The tumor is between 2 cm and 4 cm and likely extends to the orbital soft tissue.

T3: The tumor is greater than 4 cm and likely extends to the orbital soft tissue.

T4: The tumor has invaded the periosteum (the membrane of connective tissue that covers the bone) or the orbital bone.

T4a: The tumor has invaded the periosteum.

T4b: The tumor has invaded the orbital bone.

T4c: The tumor has extended beyond the orbit to adjacent structures, including the brain and sinuses.

Node (N)

The "N" in the TNM staging system stands for lymph nodes, the tiny, bean-shaped organs that help fight infection. Lymph nodes near the lacrimal gland are called regional lymph nodes. Lymph nodes in other parts of the body are called distant lymph nodes.

NX: The regional lymph nodes cannot be evaluated.

N0 (N plus zero): There is no regional lymph node metastasis.

N1: There is regional lymph node metastasis.

Metastasis (M)

The “M” in the TNM system indicates whether the cancer has spread from the lacrimal glands to other parts of the body, called distant metastasis.

MX: Distant metastasis cannot be evaluated.

M0 (M plus zero): There is no distant metastasis.

M1: There is metastasis to other parts of the body.

Grade (G)

Doctors also describe this type of cancer by its grade (G), which describes how much cancer cells look like healthy cells when viewed under a microscope. The doctor compares the cancerous tissue with healthy tissue. Healthy tissue usually contains many different types of cells grouped together.

If the cancer looks similar to healthy tissue and contains different cell groupings, it is called differentiated or a low-grade tumor. If the cancerous tissue looks very different from healthy tissue, it is called poorly differentiated or a high-grade tumor.

The cancer’s grade may help the doctor predict how quickly the cancer will spread. In general, the lower the tumor’s grade, the better the prognosis.

GX: The tumor grade cannot be identified.

G1: Describes cells that look more like healthy tissue cells (well differentiated).

G2: The cells are somewhat different (moderately differentiated).

G3: The tumor cells look very much alike (poorly differentiated).

G4: The cells barely resemble normal cells (undifferentiated).

Recurrent: Recurrent cancer is cancer that has come back after treatment. If the cancer does return, there will be another round of tests to learn about the extent of the recurrence. These tests and scans are often similar to those done at the time of the original [diagnosis](#) [4].

Used with permission of the American Joint Committee on Cancer (AJCC), Chicago, Illinois. The original source for this material is the AJCC Cancer Staging Manual, Seventh Edition, published by Springer-Verlag New York, www.cancerstaging.net [5].

Information about the cancer’s stage will help the doctor recommend a specific treatment plan.

The [next section in this guide is Treatment Options](#). [6] Or, use the menu on the side of your screen to choose another section to continue reading this guide.

Links

[1] <http://www.cancer.net/cancer-types/lacrimal-gland-tumor/stages-and-grades>

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

[3] <http://www.cancer.net/node/31269>

[4] <http://www.cancer.net/node/18987>

[5] <http://www.cancerstaging.net/>

[6] <http://www.cancer.net/node/18989>