

[Salivary Gland Cancer - 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, as well as what the cancer cells look like under a microscope. This is called the stage and grade. To see other pages, use the menu on the side of your screen.

Staging is a way of describing where the cancer is located, if or where it has spread, and whether it is affecting other parts of the body. Doctors use diagnostic tests to find out the cancer's stage, so staging may not be complete until the doctor performs a biopsy. 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 cancer.

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 salivary gland cancer:

Tumor (T)

Using the TNM system, the "T" plus a letter 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: Indicates the primary tumor cannot be evaluated.

T0: No evidence of a tumor was found.

T1: Describes a small, noninvasive (has not spread) tumor that is 2 centimeters (cm) at its greatest dimension.

T2: Describes a larger, noninvasive tumor between 2 cm to 4 cm.

T3: Describes a tumor that is larger than 4 cm, but not larger than 6 cm, that has spread beyond the salivary glands but does not affect the seventh nerve, the facial nerve that controls expression, such as smiles or frowns.

T4a: The tumor has invaded the skin, jawbone, ear canal, and/or facial nerve.

T4b: The tumor has invaded the skull base and/or the nearby bones and/or encases the arteries.

Node (N)

The "N" in the TNM staging system is for lymph nodes. Lymph nodes near the head and neck are called regional lymph nodes. Lymph nodes in other parts of the body are called distant lymph nodes. There are many nodes located in the head and neck area, and careful evaluation of lymph nodes is an important part of staging cancer of the major salivary glands.

NX: Indicates the regional lymph nodes cannot be evaluated.

N0: There is no evidence of cancer in the regional nodes.

N1: Indicates that cancer has spread to a single node on the same side as the primary tumor, and the cancer found in the node is 3 cm or smaller.

N2: Describes any of these conditions:

- **N2a:** The cancer has spread to a single lymph node on the same side as the primary tumor and is larger than 3 cm, but not larger than 6 cm.
- **N2b:** The cancer has spread to more than one lymph node on the same side as the primary tumor, and none measure larger than 6 cm.
- **N2c:** The cancer has spread to more than one lymph node on either side of the body, and none measure larger than 6 cm.

N3: The cancer found in the lymph nodes is larger than 6 cm.

Metastasis (M)

The "M" in the TNM system describes cancer that has spread to other parts of the body, called distant metastasis.

MX: Indicates distant metastasis cannot be evaluated.

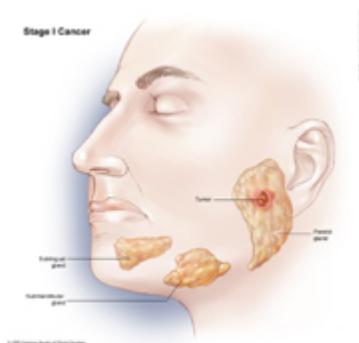
M0: Indicates the cancer has not spread to other parts of the body.

M1: Describes cancer that has spread to other parts of the body.

Cancer stage grouping

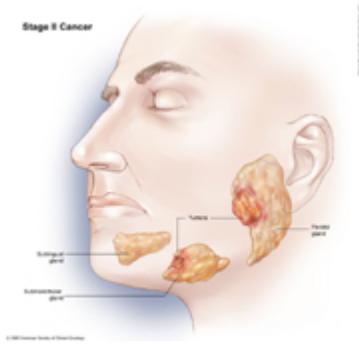
Doctors assign the stage of the cancer by combining the T, N, and M classifications.

Stage I: Describes noninvasive tumors (T1, T2) with no spread to lymph nodes (N0) and no distant metastasis (M0).



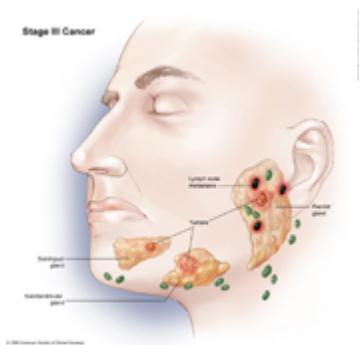
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Stage II: Describes an invasive tumor (T3) with no spread to lymph nodes (N0) or distant metastasis (M0).



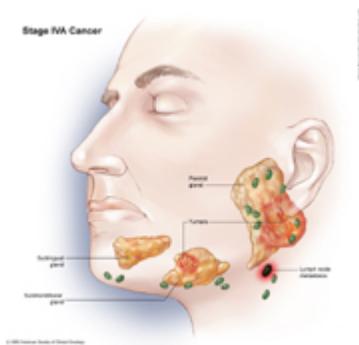
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Stage III: Describes smaller tumors (T1, T2) that have spread to regional lymph nodes (N1), but have no sign of metastasis (M0).



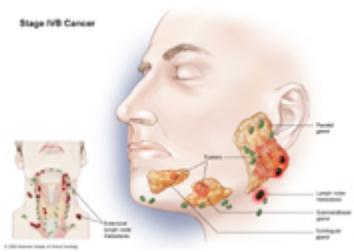
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Stage IVA: Describes any invasive tumor (T4a) with either no lymph node involvement (N0) or spread to only a single same-sided lymph node (N1), but no metastasis (M0). It is also used for a T3 tumor with one-sided nodal involvement (N1) but no metastasis (M0), or any tumor (any T) with extensive nodal involvement (N2).



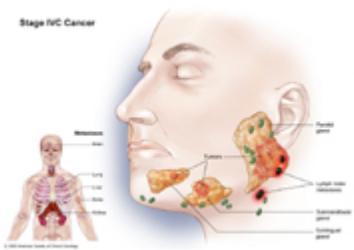
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Stage IVB: Describes any cancer (any T), with more extensive spread to lymph nodes (N2, N3), but no metastasis (M0).



[Larger image](#)

Stage IVC: Describes any cancer with distant metastasis (any T, any N, and M1).



[Larger image](#)

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](#) [3].

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 [4].

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.

Information about the cancer's stage and grade will help the doctor recommend a specific treatment plan. The [next section in this guide is Treatment Options](#) [5]. 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/salivary-gland-cancer/stages-and-grades>

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

[3] <http://www.cancer.net/node/19355>

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

[5] <http://www.cancer.net/node/19357>