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Nasopharyngeal Cancer - Stages and Grades [1]

This section has been reviewed and approved by the Cancer.Net Editorial Board [2], 01/2014

ON THIS PAGE: You will learn about how doctors describe a cancer?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 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 all of the tests are finished. Knowing the stage and histologic grade, which is a measure of how much a tumor looks like healthy tissue when viewed under a microscope, helps the doctor to decide what kind of treatment to recommend and can help predict a patient?s prognosis, which is the chance of recovery. There are different stage descriptions for different types of cancer.

One tool that doctors use to describe the stage is the TNM system. TNM is an abbreviation for tumor (T), node (N), and metastasis (M). Doctors look at these three factors to determine the stage of cancer:

- How large is the primary tumor and where is it located? **(Tumor, T)**
- Has the tumor spread to the lymph nodes? **(Node, N)**
- Has the cancer metastasized to other parts of the body? **(Metastasis, M)**

The results are combined to determine the stage of cancer for each person. There are five stages of NPC: 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 NPC.

Tumor. 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: The primary tumor cannot be evaluated.

T0: No evidence of a tumor is found.

Tis: This describes a stage called carcinoma (cancer) in situ. This is a very early cancer where

cancer cells are found only in one layer of tissue.

T1: The tumor has not spread beyond the nasopharynx.

T2: The tumor extends into the soft tissue of the middle throat.

T3: The tumor extends into bony structure or into the area behind the nose.

T4: The tumor extends inside the head to an area of the brain or into the lower part of the throat.

Node. The ?N? in the TNM staging system is for lymph nodes, the tiny, bean-shaped organs that help fight infection. Lymph nodes near where the cancer started are called regional lymph nodes. Lymph nodes in other parts of the body are called distant lymph nodes.

In people with NPC, doctors examine lymph nodes in a triangle-shaped area formed by three points: where the neck meets the shoulder, where the collarbone joins the tip of the shoulder, and where the front half of the collarbone meets the base of the neck.

NX: The regional lymph nodes cannot be evaluated.

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

N1: Cancer has spread to lymph nodes above the triangular area described above. The lymph nodes are on the same side of the neck as the primary tumor, and the cancer found in the lymph nodes is 6 centimeters (cm) or smaller.

N2: Cancer has spread to lymph nodes on both sides of the neck, above the triangular area, but the cancer is 6 cm or smaller.

N3: Cancer found in lymph nodes is larger than 6 cm or is found in lymph nodes located in the triangle.

N3a: Cancer found in the lymph nodes is larger than 6 cm.

N3b: Cancer has extended to the triangle region.

Distant metastasis. The "M" in the TNM system indicates whether the cancer has spread to other parts of the body.

MX: Distant metastasis cannot be evaluated.

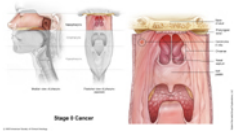
M0: Cancer has not spread to other parts of the body.

M1: Cancer 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 0: A carcinoma in situ (Tis) with no spread to lymph nodes (N0) or distant metastasis (M0).



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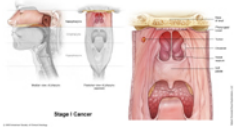
Stage I: A small tumor (T1) with no spread to lymph nodes (N0) and no distant metastasis (M0).



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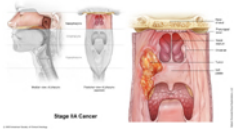
Stage IIA: A tumor that has extended beyond the nasopharynx (T2) but has not spread to lymph nodes (N0) or to distant parts of the body (M0).



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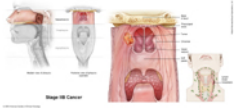
Stage IIB: A tumor (T1 or T2) that has spread to lymph nodes (N1) but has not metastasized (M0).



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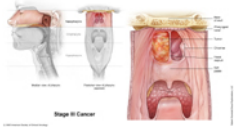
Stage III: A noninvasive or invasive tumor (T1 or T2) that has spread to lymph nodes (N1 or N2) but has not metastasized (M0). This stage may also describe a larger tumor (T3) with or without lymph node involvement (N0, N1, or N2) and no metastasis (M0).



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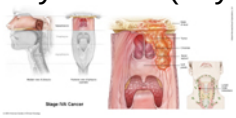
Stage IVA: This describes any invasive tumor (T4) with either no lymph node involvement (N0) or spread to only a single same-sided lymph node (N1) but no metastasis (M0). It is also used for any cancer (any T) with more significant lymph node involvement (N2) but no metastasis (M0).



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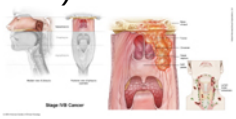
Stage IVB: This describes any tumor (any T) with extensive lymph node involvement (N3a or N3b) but no metastasis (M0).



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Stage IVC: This describes any tumor (any T, any N) when there is evidence of distant spread (M1).

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

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 can help the doctor predict how quickly the cancer will spread. In general, the lower the tumor?s grade, the better the prognosis.

GX: The grade cannot be evaluated.

G1: The tumor sample looks more like healthy tissue (well differentiated).

G2: The cells in the tumor are only moderately differentiated.

G3: The cells in the tumor don?t resemble those found in healthy tissue (poorly differentiated).

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

Links:
[1] http://www.cancer.net/cancer-types/nasopharyngeal-cancer/stages-and-grades
[2] http://www.cancer.net/about-us
[3] http://www.cancerstaging.net/