

DIRECTIONS in RESIDENCY

boards fodder



A Publication of the American Academy of Dermatology | Association

Melanoma and mycosis fungoides AJCC staging

By Parin Pearl Rimtepathip, MD, and Janna Mieko Vassantachart, MD

American Joint Committee on Cancer (AJCC) 8th Ed. - Melanoma Staging

Clinical staging				
Stage 0	Tis	NO	MO	
Stage 1A	T1a	NO	MO	
1B	T1b, T2a	-	-	
Stage 2A	T2b, T3a	NO	M0	
2B	T3b, T4a	-	-	
2C	T4b	-	-	
Stage 3	Any T	≽ N1	M0	
Stage 4	Any T	Any N	M1	

/	Pathologic staging (only differs for stage 3)			
3A	T1a/b, T2a	N1a, N2a	MO	
3B	T0, T1a/b, T2a	N1b/c	-	
	T1a/b, T2a	N2b	-	
	T2b, T3a	N1a-c, N2a/b	-	
3C	ТО	N2b/c, N3b/c	-	
	T1a/b, T2a/b, T3a	N2c, N3a-c	-	
	T3b, T4a	Any N	-	
•	T4b	N1a-c, N2a-c	-	
3D	T4b	N3a-c	-	



Parin Pearl Rimtepathip, MD, is a PGY-2 dermatology resident at Loma Linda University.



Janna Mieko Vassantachart, MD, is a PGY-2 dermatology resident at Loma Linda University .

	30	I 4D INJA-C -
	Definitions	
Primary Tumor (T)	Thickness (mm)	Ulceration
тх	Primary tumor cannot be assessed	
ТО	No evidence of primary tumor	
Tis	Melanoma in situ	
Τ1	≤1.0	a: Breslow < 0.8 mm w/o ulceration b: Breslow 0.8-1.0 mm w/o ulceration or <1.0 mm w/ ulceration
T2	1.1-2.0	
Т3	2.1-4.0	— a: w/o ulceration
Τ4	>4.0	— b: w/ ulceration
Regional Lymph Nodes (N)	Number of regional nodes	Microsatellite instability (MSI)* status, clinically detectable
NX	Nodes cannot be assessed	
NO	No regional metastases detected	d
N1	0-1 node	a: no MSI, clinically occult b: no MSI, clinically detected c: MSI present, 0 nodes
N2	2-3 nodes	a: no MSI, clinically occult b: no MSI, clinically detected
	1 node	c: MSI present, detectable or occult
N3	>3 nodes	a: no MSI, all occult b: no MSI, ≥ 1 detected or matted
	>1 node	c: MSI present, detectable or occult
Distant Metastasis (M)	Site of metastases	Serum LDH
M0	No distant metastases detected	
M1a-d	(a) Skin/subcutaneous/distant	Not assessed
M1a-d (0)	node, (b) lung, (c) other visceral	Normal
M1a-d (1)	sites, (d) brain	Elevated

*MSI refers to any satellite, locally recurrent, or in transit lesions.

Quick tips for melanoma staging:

- 8^{th} Ed omits mitosis status and T1a is <0.8 mm rather than <1.0mm
- Clinical and pathologic staging (TNM) is the same except for stage 3
- Nodal involvement → at least stage 3
- Distant metastases \rightarrow stage 4

boards fodder

Melanoma and mycosis fungoides AJCC staging (cont.)

By Parin Pearl Rimtepathip, MD, and Janna Mieko Vassantachart, MD

Mycosis fungoides staging

Staging Classification				
Stage 1A	T1	NO	MO	
1B	T2	NO	MO	
Stage 2A	T1-2	N1	MO	
2B	Т3	N0-1	MO	
Stage 3A	Τ4	NO	MO	
3B	Τ4	N1	MO	
Stage 4A	T1-4	N0-3	MO	
4B	T1-4	N0-3	M1	

	Definitions
Skin Tumor (T)	
Τ1	Limited patch/plaque (involving <10% of total skin surface)
T2	Generalized patch/plaque (involving >10% of total skin surface)
Т3	Tumor(s)
Τ4	Erythroderma (>90% BSA)
Regional lympl	n node (N)
N0	No enlarged lymph nodes
N1	Enlarged lymph nodes, histologically uninvolved
N2	Enlarged lymph nodes, histologically involved (nodal architecture unaffected)
N3	Enlarged lymph nodes, histologically involved (nodal architecture effaced)
Visceral involv	ement (M)
M0	No visceral involvement
M1	Visceral involvement
Blood (B)*	
В0	No circulating atypical (Sezary) cells or <5% of lymphocytes
B1	Low blood tumor burden (>5% of lymphocytes are Sezary cells, but not B2)
B2	High blood tumor burden (1000/mL Sezary cells and positive clone)

* Is not part of stage classification for AJCC (useful in ACS and EORTC)

Quick tips for MF staging:

- Nodal involvement \rightarrow at least stage IIA
- Cutaneous tumors \rightarrow at least stage IIB
- Erythroderma \rightarrow at least stage IIIA
- Visceral involvement \rightarrow stage IVB

References:

Amin, Mahul, et al. AJCC Cancer Staging Manual, 8th Ed. Springer International Publishing, 2017.

Copyright © 2018 by the American Academy of Dermatology and the American Academy of Dermatology Association. "All Rights Reserved." Reproduction or republication is strictly prohibited without prior written permission.