

CHAPTER 3

TNM staging

Colon cancer staging is performed according to the American Joint Committee on Cancer (AJCC) classification: AJCC/TNM, in its 8th edition (Tables 3.1 and 3.2). Evidence IB.¹⁻³ Below are only a few mentions regarding staging that are relevant to treatment. The current edition (8th) includes the M1c category for peritoneal implants,

clarifies the concept of tumor deposits (N1c), and highlights the importance of perineural and lymphovascular invasion, MSI, tumor budding, and mutations in the K-RAS, N-RAS, and BRAF genes, which have an impact on therapeutic decisions (Fig. 3.1 and Tables 3.1 and 3.2).¹

Staging system for colon cancer. TNM, AJCC, 8th edition, 2017.

TNM	Description
T	Primary tumor
Tx	Primary tumor cannot be evaluated
T0	No evidence of primary tumor
Tis	Carcinoma in situ, intramucosal carcinoma (involvement of the lamina propria without extension through the muscularis mucosae)
T1	Tumor invades the submucosa (through the muscularis mucosae but not into the muscularis propria)
T2	Tumor invades the muscularis propria
T3	Tumor invades through the muscularis propria into pericolic tissue
T4	Tumor invades the visceral peritoneum or invades or adheres to neighboring organs or structures
T4a	Tumor invades through the visceral peritoneum (includes gross perforation of the colon through the tumor or continued invasion of the tumor through areas of inflammation on the surface of the visceral peritoneum)
T4b	Tumor invades or adheres to adjacent organs or structures
N	Regional lymph node
Nx	Regional lymph node not evaluable
N0	No evidence of lymph node metastasis
N1	1 to 3 positive regional lymph nodes (tumor in lymph node \geq 0.2 mm) or any number of deposits Tumor present and identifiable if nodes are negative
N1a	1 regional lymph node is positive
N1b	2 or 3 regional lymph nodes are positive
N1c	No positive lymph nodes, but tumor deposits are present in the subserosa, mesentery, or nonperitoneal pericolic tissue or mesocolic tissues
N2	4 or more positive lymph nodes
N2a	4 to 6 positive lymph nodes
N2b	7 or more positive lymph nodes
M	Distant metastasis
M0	No distant metastasis, no evidence of tumor in distant sites or organs
M1	Distant metastasis in 1 or more organs or sites or peritoneal
M1a	Distant metastasis in 1 site without peritoneal metastasis
M1b	Distant metastasis in 2 or more sites without peritoneal metastasis
M1c	Peritoneal metastasis alone or associated with other organs or sites with metastasis

Table 3.2. Estadificación por estadios del cáncer de colon. TNM, AJCC, 8va edición, 2017.

Stage	T	N	M
0	Tis	N0	M0
I	T1 T2	N0	M0
IIA	T3	N0	M0
IIB	T4a	N0	M0
IIC	T4b	N0	M0
IIIA	T1 T2	N1 N1c	M0
	T1	N2a	M0
IIIB	T3 T4a	N1 N1c	M0
	T2 T3	N2a	M0
	T1 T2	N2b	M0
IIIC	T4a	N2a	M0
	T3 T4a	N2b	M0
	T4b	N1 N2	M0
IVA	Any T	Any N	M1a
IVB	Any T	Any N	M1b
IVC	Any T	Any N	M1c

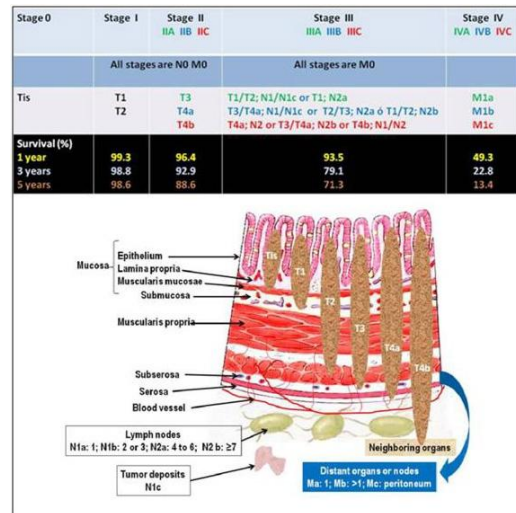


Figure 3.1. Comparative analysis of stages. Adapted from AJCC, 8th edition, 2017.

REFERENCES

1. Amin MB, Edge SB, Greene FL, Byrd DR, Brookland RK, Washington MK, et al. *AJCC Cancer Staging Manual*. Springer; 2018, pag. 1032.
2. Vogel JD, Felder SI, Bhamra AR, Hawkins AT, Langenfeld SJ, Shaffer VO, et al. The American Society of Colon and Rectal Surgeons Clinical Practice Guidelines for the *Management of Colon cancer*. *Dis Colon Rectum*. 2022;65(2):148–77.
3. Argilés G, Taberero J, Labianca R, Hochhauser D, Salazar R, Iveson T, et al. Localised colon cancer: ESMO Clinical Practice Guidelines for diagnosis, treatment and follow-up. *Ann Oncol*. 2020;31(10):1291–305.