Researchers confirm IASLC characterization of uncertain R status with prognosis between R0 and R1

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The findings of a recent study confirm the International Association for the Study of Lung Cancer (IASLC)'s proposed criteria for uncertain resection margin status, R(un), in residual tumor (R) classification. Dr. John Edwards of the University of Sheffield in the United Kingdom presented his team's findings today at the IASLC 18th World Conference on Lung Cancer (WCLC) in Yokohama, Japan.

R classification describes the tumor status following treatment, therefore reflecting the treatment's effectiveness, which impacts prognosis and potentially further treatment. Considering the important implications of R classification, the researchers undertook this study to analyze R status criteria using data collected from the IASLC Lung Cancer Staging Project.

The data analyzed included information on full R status and survival data of 14,712 patients undergoing NCSLC surgery. The researchers evaluated R status criteria and other relevant data including the number of N2 stations explored, lobe-specific systematic lymph node dissection (SLND), extra-capsular extension (ECE), status of the highest station, bronchial carcinoma in situ (cis) at bronchial resection margin (BRM) and pleural lavage cytology (PLC). Additionally, the researchers designated and tested revised categories of R0, R(un), R1 and R2 for survival impact.

Based on their results, the researchers confirmed the proposed criteria for R(un), upholding its prognosis between R0 and R1. Further prospective [data collection](#) will be necessary to fully understand the impact of these criteria on prognoses.

"In designing and analyzing clinical trials of adjuvant therapies, undertaking a thorough evaluation and characterization of R status is critical," said Dr. Edwards. "While more data collection will be necessary to see the full impact in a clinical setting, our confirmation of the International Association for the Study of Lung Cancer's proposed criteria is an important step."

Provided by International Association for the Study of Lung Cancer