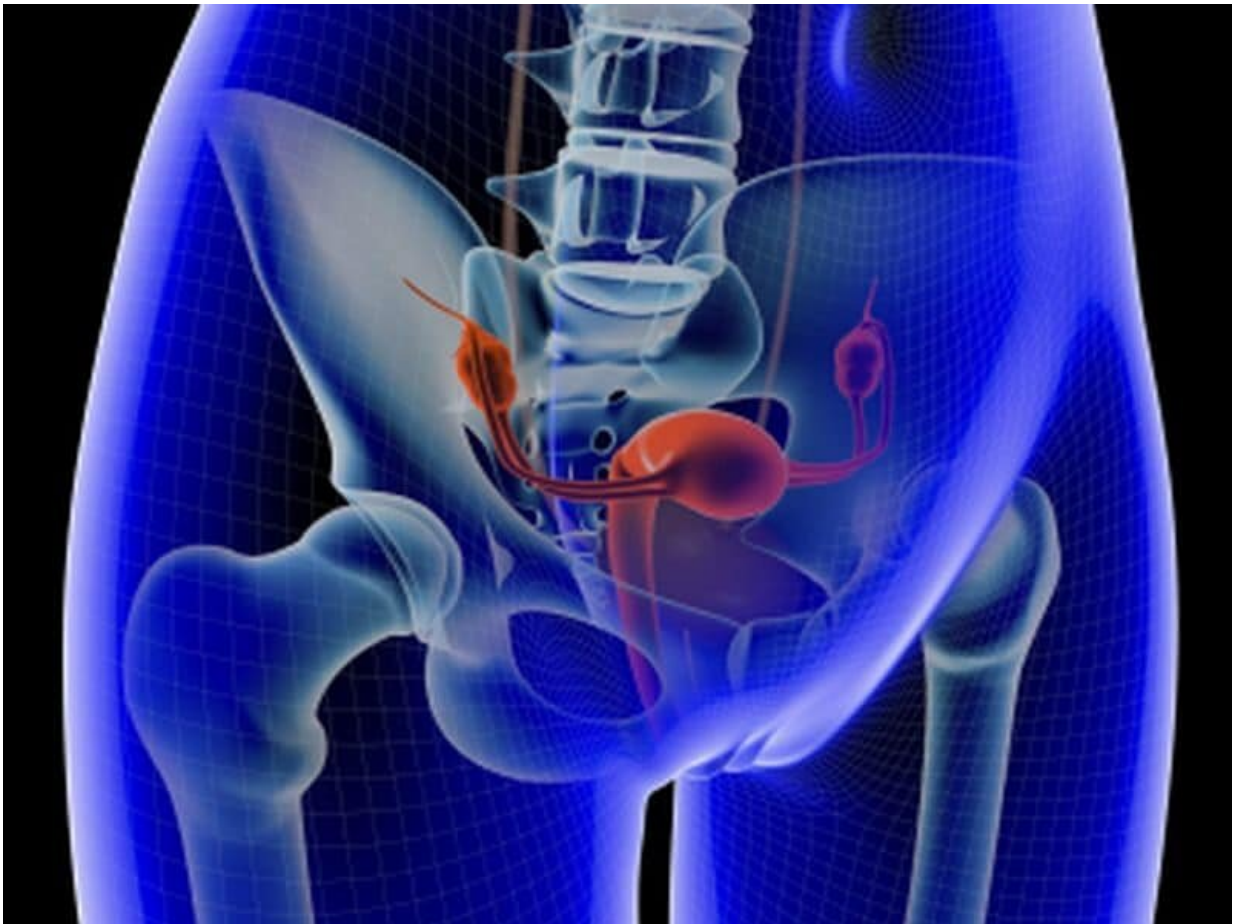


FIGO 2018 staging ups discrimination of stage 1B cervical cancer

June 14 2019



(HealthDay)—The Federation of Gynecology and Obstetrics (FIGO)

2018 staging schema improves discriminatory ability for women with stage IB cervical tumors, according to a study published online June 11 in *Obstetrics & Gynecology*.

Jason D. Wright, M.D., from the Columbia University College of Physicians and Surgeons in New York City, and colleagues identified women with cervical [cancer](#) diagnosed from 2004 to 2015 using the National Cancer Database. Each patient's stage was classified using three staging schemas: American Joint Committee on Cancer 7th edition, FIGO 2009, and FIGO 2018. The FIGO 2018 revised staging classifies stage IB tumors into three substages and classifies patients with positive lymph nodes as stage IIC1 (positive pelvic nodes) or IIC2 (positive paraaortic nodes). For each group, five-year survival rates were estimated.

The researchers identified 62,212 women. Discriminatory ability was improved with classification of stage IB tumors into three substages. In the FIGO 2018 schema, five-year survival was 91.6, 83.3, and 76.1 percent for stage IB1 tumors, IB2 neoplasms, and IB3 lesions, respectively. In contrast, higher FIGO staging was not consistently associated with worse five-year survival rates for women with stage III tumors (40.7, 41.4, 60.8, and 37.5 percent for stage IIIA, IIIB, IIC1, and IIC2, respectively).

"The revised FIGO 2018 staging schema for [cervical cancer](#) improves prognostication for [women](#) with early-stage disease but has significant limitations for the classification of those with nodal metastases," the authors write.

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Citation: FIGO 2018 staging ups discrimination of stage 1B cervical cancer (2019, June 14)
retrieved 18 April 2024 from

<https://medicalxpress.com/news/2019-06-figo-staging-ups-discrimination-stage.html>

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