

Cancer staging—cancer staging scheme source, code N[N]

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Cancer staging—cancer staging scheme source, code N[N]

Identifying and definitional attributes

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| Metadata item type: | Data Element |
| Short name: | Staging scheme source |
| METEOR identifier: | 393364 |
| Registration status: | Health , Superseded 16/01/2020 |
| Definition: | The reference which describes in detail the methods of staging and the definitions for the classification system used in determining the extent of cancer, as represented by a code. |
| Data Element Concept: | Cancer staging—cancer staging scheme source |
| Value Domain: | Cancer staging scheme source code N[N] |

Value domain attributes

Representational attributes

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| Representation class: | Code | |
| Data type: | Number | |
| Format: | N[N] | |
| Maximum character length: | 2 | |
| | Value | Meaning |
| Permissible values: | 1 | TNM Classification of Malignant Tumours (UICC) |
| | 2 | Durie & Salmon for multiple myeloma staging |
| | 3 | French-American-British (FAB) for leukaemia classification |
| | 4 | Australian Clinico-Pathological Staging (ACPS) System for colorectal cancer |
| | 5 | International Federation of Gynecologists & Obstetricians (FIGO) for gynaecological cancers |
| | 6 | Dukes/Modified Dukes for colorectal cancer |
| | 7 | Ann Arbor staging system for lymphomas |
| | 8 | Binet Staging Classification for chronic lymphocytic leukaemia |
| | 9 | Rai staging system for chronic lymphocytic leukaemia |
| | 10 | Chronic Myeloid Leukaemia (CML) staging system |
| | 11 | International Staging System (ISS) for myeloma |
| | 12 | American Joint Committee on Cancer (AJCC) Cancer Staging Manual |
| Supplementary values: | 96 | Other reference |
| | 97 | Not applicable |
| | 98 | Unknown |
| | 99 | Not stated/inadequately described |

Collection and usage attributes

Guide for use:

CODE 10 Chronic Myeloid Leukaemia (CML) staging system

Criteria for diagnosing the transition from the chronic phase into the accelerated phase in patients with Chronic Myeloid Leukaemia (CML) is variable. The WHO criteria (Vardiman et al. 2002) are perhaps the most widely used and are recommended.

Source and reference attributes

Reference documents:

- American Joint Committee on Cancer 2010. AJCC Cancer Staging Manual, 7th edition. Springer: New York
- Astler VB & Collier FA 1954. The prognostic significance of direct extension of carcinoma of the colon and rectum. *Ann Surg* 139:846
- Australian Cancer Network Colorectal Cancer Guidelines Revision Committee 2005. Guidelines for the Prevention, Early Detection and Management of Colorectal Cancer. Sydney: The Cancer Council Australia and Australian Cancer Network
- Benedet JL & Pecorelli S 2000. Staging classifications and clinical practice guidelines of gynaecologic cancers. FIGO Committee on Gynaecologic Oncology
- Bennett JM et al. 1985. Proposed revised criteria for the classification of acute myeloid leukaemia. French-American-British (FAB) co-operative group. *Ann Intern Med* 103(4):620-625
- Binet JL et al. 1981. A new prognostic classification of chronic lymphocytic leukemia derived from a multivariate survival analysis. *Cancer* 48:198-206
- Binet JL et al. 1981. Proposals for a revised staging system. *Br J Haematol* 48:365-7
- Carbone PA, Kaplan HS, Musshoff K, Smithers, DW, Tubiana M 1971. Report of the committee on Hodgkin's disease staging classification. *Cancer Research* 31:1860-1861
- Davis NC & Newland RC 1983. The reporting of colorectal cancer: the Australian Clinico-pathological Staging (ACPS) System. *Med J Aust* 1(6):282
- Dukes CE 1932. The classification of cancer of the rectum. *J Pathol Bacteriol* 35:323
- Durie BG & Salmon SE 1975. A clinical staging system for multiple myeloma: correlation of measured myeloma cell mass with presenting clinical features, response to treatment, and survival. *Cancer* 36(3):842-54
- Greipp PR et al. 2005. International Staging System for Multiple Myeloma. *J Clin Oncol* 23(15):3412-20
- International Myeloma Working Group 2003. Criteria for the classification of monoclonal gammopathies, multiple myeloma and related disorders: a report of the International Myeloma Working Group. *Br J Haematol* 121:749-757
- Lister TA et al. 1989. Report of a committee convened to discuss the evaluation and staging of patients with Hodgkin's disease: Cotswolds meeting. *J Clin Oncol* 7(11):1630-6
- Rai KR, Sawitsky A, Cronkite EP, Chanana AD, Levy RN 1975. Clinical staging of chronic lymphocytic leukaemia. *Blood* 46(2):219-34
- Rosenberg SA 1977. Validity of the Ann Arbor staging classification for the non-Hodgkin's lymphomas. *Cancer Treat Rev* 61:1023-27
- Sobin LH, Gospodarowicz MK, Wittekind C (Editors) 2009. International Union Against Cancer (UICC): TNM Classification of Malignant Tumours, 7th edition. Wiley-Blackwell
- Vardiman JW, Harris NL, Brunning RD 2002. The World Health Organization (WHO) classification of the myeloid neoplasms. *Blood* 100(7):2292-2302

Data element attributes

Collection and usage attributes

Guide for use:

It is recommended that the TNM Classification of Malignant Tumours (International Union Against Cancer (UICC)) or the American Joint Committee on Cancer (AJCC) Cancer Staging Manual be used whenever it is applicable. The classifications published in the AJCC Cancer Staging Manual are identical to the TNM classifications of the UICC.

TNM is not applicable to all tumour sites. Staging is of limited use in some cancers, for example, haematological malignancies. In these cases use the most appropriate classification system.

The Cancer Council Australia and Australian Cancer Network *Guidelines for the prevention, early detection and management of colorectal cancer* (2005, pp. 159-162) support the use of the Australian Clinico-Pathological Staging (ACPS) System. They recommend that both TNM and ACPS staging data be recorded to enable national and international comparisons. A table of correspondences between ACPS and TNM classifications is available.

The current edition of each staging scheme should be used.

Comments:

Collected to identify which classification system is used to determine the extent of cancer at the time of diagnosis. Cancer stage is an important determinant of treatment and prognosis, and is used to evaluate new treatments and analyse outcomes. Survival analysis is adjusted by stage at diagnosis and distribution of cancer cases by type and stage.

Source and reference attributes**Submitting organisation:**

Cancer Australia

Origin:

International Union Against Cancer (UICC)

FAB (French-American-British) Group

NSW Health Department

National Health & Medical Research Council

Clinical Oncological Society of Australia

Australian Cancer Network

Relational attributes**Related metadata references:**

Supersedes [Cancer staging—cancer staging scheme source, code N](#)
[Health](#), Superseded 07/12/2011

Has been superseded by [Cancer staging—cancer staging scheme source, code N\[N\]](#)
[Health](#), Standard 16/01/2020

See also [Cancer staging—cancer staging scheme source edition number, code N\[N\]](#)
[Health](#), Standard 07/12/2011

See also [Person with cancer—extent of primary cancer, stage grouping other, code X\[XXXXX\]](#)
[Health](#), Standard 07/12/2011

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| Implementation in Data Set Specifications: | <p>Bowel cancer diagnosed cluster Health, Superseded 06/09/2018 DSS specific information: The data element is used to derive a value describing the patient's colorectal cancer clinico-pathological stage.</p> <p>Bowel cancer diagnosed cluster Health, Superseded 16/01/2020 DSS specific information:</p> <p>The data element is used to derive a value describing the patient's colorectal cancer clinico-pathological stage.</p> <p>Cancer (clinical) DSS Health, Superseded 08/05/2014</p> <p>Cancer (clinical) DSS Health, Superseded 14/05/2015</p> <p>Cancer (clinical) NBPDS Health, Standard 14/05/2015</p> |
| Implementation in Indicators: | <p>Used as Numerator</p> <p>National Bowel Cancer Screening Program: PI 08-Cancer clinico-pathological stage distribution Health, Superseded 06/09/2018</p> <p>National Bowel Cancer Screening Program: PI 08-Cancer clinico-pathological stage distribution Health, Standard 06/09/2018</p> |