

Person with cancer—depth of myometrial invasion, total millimetres N[N]

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Person with cancer—depth of myometrial invasion, total millimetres N[N]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Depth of myometrial invasion
Synonymous names:	Depth of myometrial involvement
METEOR identifier:	545243
Registration status:	Health , Standard 08/05/2014
Definition:	The depth of tumour invasion into the myometrium for a person with endometrial cancer, expressed in millimetres.
Data Element Concept:	Person with cancer—depth of myometrial invasion
Value Domain:	Total millimetres N[N]

Value domain attributes

Representational attributes

Representation class:	Total
Data type:	Number
Format:	N[N]
Maximum character length:	2

	Value	Meaning
Supplementary values:	97	Not applicable
	98	Unknown
	99	Not stated/inadequately described

Unit of measure:	Millimetre (mm)
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Collection and usage attributes

Guide for use:	Size in millimetres with valid values from 1 to 96.
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Source and reference attributes

Submitting organisation:	Cancer Australia
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Data element attributes

Collection and usage attributes

Guide for use:

Record the depth of myometrial invasion in millimetres (mm).

The depth of myometrial invasion is assessed on microscopic examination and is measured from the normal endometrium-myometrium interface (not the surface of the intracavity or exophytic tumour) to the deepest tumour infiltrative focus. The depth of myometrial invasion cannot exceed the myometrial thickness. Myometrial thickness ranges from 2 to 40 mm. A myometrial thickness of 5 mm or less is considered to be normal.

Depth of myometrial invasion is a prognostic factor for endometrial cancer. The fractional myometrial invasion by tumour cells, i.e. the ratio of myometrial invasive depth to total normal myometrial thickness, is predictive of lymph node metastases in high risk endometrial cancers.

Source and reference attributes

Submitting organisation:

Cancer Australia

Reference documents:

Hauth EA, Jaeger HJ, Libera H, Lange S, Forsting M 2007. MR imaging of the uterus and cervix in healthy women: determination of normal values. *European Radiology* 17:734

O'Connell LO, Fries MH, Zeringue E, Brehm W 1998. Triage of Abnormal Postmenopausal Bleeding: A comparison of endometrial biopsy and transvaginal sonohysterography versus fractional curettage with hysteroscopy. *American Journal of Obstetrics & Gynecology* 178:956-61

RCPA 2011. Endometrial Cancer Structured Reporting Protocol (1st Edition 2011). Sydney: Royal College of Pathologists of Australasia

Weber AM, Belinson JL, Bradley LD, Piedmonte MR 1997. Vaginal ultrasonography versus endometrial biopsy in women with postmenopausal bleeding. *American Journal of Obstetrics & Gynecology* 177:924-9

Relational attributes

Related metadata references:

See also [Person with cancer—myometrial thickness, total millimetres N\[N\] Health, Standard 08/05/2014](#)

Implementation in Data Set Specifications:

[Gynaecological cancer \(clinical\) DSS Health, Superseded 14/05/2015](#)

Conditional obligation: This data element is only to be recorded for patients with endometrial cancer, as indicated by [Person with cancer—primary site of cancer, topography code \(ICD-O-3\) ANN.N.](#)

[Gynaecological cancer \(clinical\) NBPDS Health, Standard 14/05/2015](#)

Conditional obligation:

This data element is only to be recorded for patients with endometrial cancer, as indicated by [Person with cancer—primary site of cancer, topography code \(ICD-O-3\) ANN.N.](#)