RESIDENT’S FORUM

[Translated article] RF - Brigham and Women’s Hospital Tumor Staging System for Basal Cell Carcinoma: Superior Specificity and Positive Predictive Value

FR - Sistema de estadificación del carcinoma basocelular del Brigham and Women’s Hospital: mayor especificidad y valor predictivo

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KEYWORDS
Basal cell carcinoma; Tumor staging system; Brigham and Women’s Hospital classification; Specificity

PALABRAS CLAVE
Carcinoma basocelular; Estadificación tumoral; Clasificación Brigham and Women’s Hospital; Especificidad

Basal cell carcinoma (BCC) is the most common malignancy in humans. Most BCCs are low risk and portend excellent outcomes. It is important, however, to identify tumors associated with a poor prognosis and an increased risk of local recurrence, metastasis, and death. The National Comprehensive Cancer Network classified BCC as low risk or high risk depending on the likelihood of local recurrence, but it did not consider events such as metastasis or death. The eighth edition of the American Joint Committee on Cancer Staging Manual (AJCC-8) includes a staging system for cutaneous squamous cell carcinoma (SCC) and BCC of the head and neck, but it is based on SCC patient cohorts and has not been validated for BCC.

Morgan et al. from the Brigham and Women’s Hospital (BWH) recently published the results of a retrospective cohort study evaluating predictors of poor prognosis in BCC. They studied 488 tumors (244 ≥ 2 cm and 244 < 2 cm) and observed 12 cases of metastasis or death. The larger BCCs were associated with higher rates of local recurrence (9% vs. 1% for tumors < 2 cm) and higher rates of metastasis or death (6.5% vs. 0%). Additional factors associated with an increased risk of metastasis or death in tumors measuring ≥ 2 cm were a head/neck location, a diameter ≥ 4 cm, and invasion beyond the subcutaneous tissue. The authors’ findings led them to propose a new staging system for BCC that distinguished between BWH T1 (tumors associated with a better prognosis) and BWH T2 (tumors associated with a...
The patients.

Sensitivity than specificity of metastasis or death was calculated using both staging systems. Of the 488 BCCs studied, 439 (all the tumors measuring < 2 cm and 195 of the tumors measuring ≥ 2 cm) were classified as BWH T1, and none of these were associated with metastasis or death. The remaining 49 tumors were classified as BWH T2, and this is where the 12 cases of metastasis or death occurred. There were 23 local recurrences, with a cumulative 10-year incidence of 2.8% for BWH T1 BCCs and 47% for BWH T2 BCCs. On applying the AJCC-8 staging system, none of the T1 (n = 233) or T2 tumors (n = 149) were associated with metastasis or death. The 12 cases of metastasis or death all occurred in patients with T3 or T4a/T4b tumors (n = 106). The cumulative incidence of local recurrence for T1 and T2 tumors according to the AJCC-8 staging system was 2.2%. The corresponding rate for T3/T4 tumors was 25.7%, practically half of that observed for BWH T2 tumors.

The BWH staging system is simple to use and can identify patients with high-risk BCC who might benefit from additional tests and systemic treatments.

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References