

# Structured Pathology Reporting of Cancer Newsletter

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PDF versions of this newsletter are available from the structured pathology website.

Welcome to the 30th edition of the Structured Pathology Reporting of Cancer newsletter.

This newsletter is intended to provide information on the project to expand and promote the use of structured pathology reporting of cancer.

## Protocols – forward plan

The Structure Pathology Reporting of Cancer Project (SPRC) is now in planning to update or develop 10 protocols for the next year. There are number of factors which have been taken into account regarding the choice of protocols:

- the publication of new International Collaboration on Cancer Reporting (ICCR) datasets,
- the need to incorporate changes to reflect other recent changes, such as MBS schedule updates, to ensure that the protocols remain contemporary, and
- the need to incorporating Tumour-Node-Metastasis staging 8th edition (TNM8) into applicable protocols.

The main focus initially will be on the genitourinary (GU) protocols; updating the five existing published protocols and adding a further seven new GU protocols based on the upcoming publication of ICCR datasets. In addition, a liver cancer protocol will be undertaken based on the newly published “intrahepatic cholangiocarcinoma, perihilar cholangiocarcinoma and hepatocellular carcinoma” ICCR dataset.

Prof James Kench, clinical lead of the SPRC Project stated, “the release of TNM8 impacts on many of our published protocols and these need to be updated. However we need to balance this against expanding the suite of protocols available to pathologists in Australia. We believe that targeting the GU suite and adding a new Liver Cancer protocol is a good starting point.”

# TNM 8 update

The AJCC TNM8 was published at the end of October and the UICC 8th edition in late November. As previously noted there have been a number of harmonisation issues between the UICC and AJCC versions.

While there has been no previous directive to use either the AJCC or UICC versions of TNM in Australia, most Australian pathologists and clinicians have traditionally used the AJCC version of TNM. RCPA Structured Pathology Reporting of Cancer (SPRC) Protocols also include AJCC TNM definitions. Staging is not routinely captured by cancer registries in Australia however, there are several pilot projects underway to capture stage and AJCC is their preferred option.

Given the impending mandate to implement SPRC and the previously noted issues with the UICC version for GU cancers, the RCPA's Cancer Services Advisory Committee (CanSAC) has developed a position statement recommending the implementation of the AJCC version of TNM8 as soon as possible.

Please take the time to review the position statement which will shortly be available on the RCPA website:

<http://www.rcpa.edu.au/Library/College-Policies/Position-Statements/>

# ICCR progress



## Publication

A dataset for Intrahepatic Cholangiocarcinoma, Perihilar Cholangiocarcinoma and Hepatocellular Carcinoma has now been published to the ICCR website:

<http://www.iccr-cancer.org/datasets/>

The dataset has been developed for resection specimens of the liver. It excludes neuroendocrine carcinomas, hepatoblastoma, carcinomas of the extrahepatic bile ducts, gall bladder and benign lesions such as adenomas.

A journal article on this dataset is now being drafted.

The screenshot shows a detailed reporting form for liver cancer. Key sections include: Patient identifiers (Family/Last name, Date of birth, Given name, Patient identifier, Date of request, Accession/Laboratory number); SPECIMENS SUBMITTED (Liver resection, Segmental resection, Single resection, Extrahepatic bile duct, Gallbladder, Lymph nodes); TUMOR SITE AND NUMBER (Specify site, No./size); MAXIMUM TUMOR DIMENSION (Tumour description, Max dimension); HISTOLOGICAL TUMOR TYPE (Hepatocellular carcinoma, Intrahepatic cholangiocarcinoma, Perihilar cholangiocarcinoma, Combined hepatocellular-cholangiocarcinoma, Metastatic papillary carcinoma, Metastatic cystic neoplasm, Undifferentiated carcinoma, Carcinoma, type cannot be determined); and SPECIAL FEATURES (High nuclei, Bile ducts, Lymph nodes, etc.).

## **Public consultation**

Public consultation for the ICCR Head & Neck dataset suite is fast approaching. Fellows of the College will be notified for feedback once the datasets are posted for comment.

## **TNM8**

As previously reported many of the ICCR datasets are at various stages of development, are impacted by the publication of TNM8. The Dataset Steering Committee (DSC) decided to delay publication of those datasets and incorporate TNM8. However some differences between the UICC and AJCC versions of TNM8, particularly in relation to GU staging, created a number of problems. After working with the organisations involved and reviewing the resultant published errata, the DSC, after careful consideration, have decided to proceed with the AJCC version of TNM staging for the GU suite of datasets as this is the most scientifically correct and contemporary version for GU. Datasets in other anatomical areas are less affected and differences between the two versions of TNM staging, for the most part, appear superficial. However, the two versions will be evaluated as each new dataset is developed.

## **Endocrine**

Planning for datasets in the Endocrine series has commenced with the selection of a Series Champion to oversee the process. The DSC have invited Prof Anthony Gill, a senior staff specialist from Royal North Shore Hospital and Professor of Pathology at the University of Sydney, to undertake the role. ICCR President, David Ellis stated, "Prof Gill is an excellent choice for Series Champion, he is well known in the field of Endocrine pathology and was awarded the Ramzi S Cotran Young Investigator Award at USCAP earlier this year. The ICCR is very pleased that Prof Gill has accepted the role."

## **Breast and Colorectal**

The ICCR is very keen to commence development of breast and colorectal datasets as soon as possible. Whilst the development of these datasets would be out of synch with the WHO Blue book publications, their absence from the suite of ICCR datasets is problematic as these are two of the most common cancers. Therefore the ICCR is actively seeking sponsorship to fund the development effort.

# **Funding**

The federal Department of Health has kindly extended funding for the Structured Pathology Reporting Project for a further 3 years. Our goal will be to:

- Increase the existing number of SPRC Protocols using the ICCR datasets as the foundation,
- Update existing protocols,

- Undertake a series of educational webinars following a very successful pilot in April 2016; and
- Continue to facilitate implementation of SPRC.

**Structured Pathology Reporting Project Manager:**

**Meagan Judge**

The Royal College of Pathologists of Australasia

Phone: +61 2 8356 5854

Mobile: 0402 891031

Fax: +61 2 8356 5808

Address: 207 Albion Street, Surry Hills, NSW 2010, Australia

**WEBSITE:** [www.rcpa.edu.au/Library/Practising-Pathology/Structured-Pathology-Reporting-of-Cancer](http://www.rcpa.edu.au/Library/Practising-Pathology/Structured-Pathology-Reporting-of-Cancer)

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