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發文日期：中華民國112年2月9日
發文字號：國健癌字第1120360136號
速別：普通件
密等及解密條件或保密期限：
附件：附件1-AJCC第9版、附件2-差異說明各1份

主旨：有關美國癌症聯合委員會(AJCC)癌症分期手冊第9版
(Version 9)最新出版之闌尾、肛門、腦與脊髓等更新內
容，請依說明段辦理，請查照。

說明：

- 一、最新AJCC Version 9於2022年底出版Appendix /Anus /Brain and Spinal Cord Cancer Staging System (請參閱以下網址：<https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/>)，適用於112年1月1日起新診斷之個案，相關TNM與Stage編碼，請見附件1。
- 二、有關Appendix /Anus /Brain and Spinal Cord之AJCC第9版與第8版差異處，詳見附件2說明。

正本：國立臺灣大學醫學院附設醫院、臺北榮民總醫院、三軍總醫院附設民眾診療服務處、臺北市立聯合醫院中興院區、臺北市立聯合醫院仁愛院區、臺北市立聯合醫

院和平院區、基督復臨安息日會醫療財團法人臺安醫院、台灣基督長老教會馬偕醫療財團法人馬偕紀念醫院、臺北醫學大學附設醫院、長庚醫療財團法人林口長庚紀念醫院、國泰醫療財團法人國泰綜合醫院、臺北市立聯合醫院婦幼院區、臺北市立聯合醫院忠孝院區、醫療財團法人辜公亮基金會和信治癌中心醫院、新光醫療財團法人新光吳火獅紀念醫院、振興醫療財團法人振興醫院、臺北市立萬芳醫院—委託財團法人臺北醫學大學辦理、國立臺灣大學醫學院附設醫院癌醫中心分院、長庚醫療財團法人基隆長庚紀念醫院、衛生福利部臺北醫院、天主教耕莘醫療財團法人耕莘醫院、新北市立聯合醫院、醫療財團法人徐元智先生醫藥基金會亞東紀念醫院、天主教耕莘醫療財團法人永和耕莘醫院、行天宮醫療志業醫療財團法人恩主公醫院、佛教慈濟醫療財團法人台北慈濟醫院、國泰醫療財團法人汐止國泰綜合醫院、衛生福利部雙和醫院(委託臺北醫學大學興建經營)、天主教輔仁大學附設醫院、新北市立土城醫院(委託長庚醫療財團法人興建經營)、國立陽明交通大學附設醫院、醫療財團法人羅許基金會羅東博愛醫院、天主教靈醫會醫療財團法人羅東聖母醫院、國立臺灣大學醫學院附設醫院新竹臺大分院新竹醫院、東元醫療社團法人東元綜合醫院、台灣基督長老教會馬偕醫療財團法人新竹馬偕紀念醫院、國泰醫療財團法人新竹國泰綜合醫院、中國醫藥大學新竹附設醫院、國立臺灣大學醫學院附設醫院新竹臺大分院生醫醫院、沙爾德聖保祿修女會醫療財團法人聖保祿醫院、衛生福利部桃園醫院、國軍桃園總醫院附設民眾診療服務處、敏盛綜合醫院、聯新國際醫院、衛生福利部苗栗醫院、大千綜合醫院、衛生福利部臺中醫院、中山醫學大學附設醫院、國軍臺中總醫院附設民眾診療服務處、澄清綜合醫院、臺中榮民總醫院、中國醫藥大學附設醫院、仁愛醫療財團法人大里仁愛醫院、澄清綜合醫院中港分院、林新醫療社團法人林新醫院、光田醫療社團法人光田綜合醫院、童綜合醫療社團法人童綜合醫院、衛生福利部豐原醫院、佛教慈濟醫療財團法人台中慈濟醫院、亞洲大學附屬醫院、衛生福利部彰化醫院、彰化基督教醫療財團法人彰化基督教醫院、秀傳醫療社團法人秀傳紀念醫院、秀傳醫療財團法人彰濱秀傳紀念醫院、彰化基督教醫療財團法人鹿港基督教醫院、彰化基督教醫療財團法人員林基督教醫院、衛生福利部南投醫院、天主教中華聖母修女會醫療財團法人天主教聖馬爾定醫院、臺中榮民總醫院嘉義分院、戴德森醫療財團法人嘉義基督教醫院、佛教慈濟醫療財團法人大林慈濟醫院、長庚醫療財團法人嘉義長庚紀念醫院、國立臺灣大學醫學院附設醫院雲林分院、中國醫藥大學北港附設醫院、彰化基督教醫療財團法人雲林基督教醫院、衛生福利部臺南醫院、奇美醫療財團法人奇美醫院、郭綜合醫院、國立成功大學醫學院附設醫院、台南市立醫院(委託秀傳醫療社團法人經營)、台灣基督長老教會新樓醫療財團法人台南新樓醫院、臺南市立安南醫院—委託中國醫藥大學興建經營、台灣基督長老教會新樓醫療財團法人麻豆新樓醫院、奇美醫療財團法人柳營奇美醫院、財團法人私立高雄醫學大學附設中和紀念醫院、國軍高雄總醫院附設民眾診療服務處、阮綜合醫療社團法人阮綜合醫院、國軍高雄總醫院左營分院附設民眾診療服務處、高雄市立聯合醫院、高雄榮民總醫院、高雄市立小港醫院(委託財團法人私立高雄醫學大學經營)、高雄市立大同醫院(委託財團法人私立高雄醫學大學附設中和紀念醫院經營)、義大醫療財團法人義大大昌醫院、衛生福利部旗山醫院、長庚醫療財團法人高雄長庚紀念醫院、義大醫療財團法人義大醫院、義大醫療財團法人義大癌治療醫院、衛生福利部屏東醫院、輔英科技大學附設醫院、屏基醫療財團法人屏東基督教醫院、安泰醫療社團法人安泰醫院、寶建醫療社團法人寶建醫院、台灣基督長老教會馬偕醫療財團法人台東馬偕紀念醫院、台灣基督教門諾會醫療財團法人門諾醫院、佛教慈濟醫療財團法人花蓮慈濟醫院

副本：

APPENDIX

Identification of Primary Site

C18.1

Histopathologic Type

| Code | Description | Code | Description |
|-------------|--|-------------|--|
| 8000* | <i>Neoplasm, malignant</i> | 8140 | Adenocarcinoma |
| 8010* | <i>Carcinoma, NOS</i> | 8154 | Mixed neuroendocrine-non-neuroendocrine neoplasm (MiNEN) |
| 8012* | <i>Large cell carcinoma, NOS</i> | 8213 | Serrated dysplasia, high grade [#] |
| 8210* | <i>Adenocarcinoma in adenomatous polyp</i> | 8243 | Goblet cell adenocarcinoma |
| 8244* | <i>Mixed adenoneuroendocrine carcinoma</i> | 8246 | Neuroendocrine carcinoma (NEC) |
| 8245* | <i>Adenocarcinoid tumor</i> | 8480 | Low grade appendiceal mucinous neoplasm (LAMN) |
| 8255* | <i>Adenocarcinoma with mixed subtypes</i> | 8480 | High grade appendiceal mucinous neoplasm (HAMN) |
| 8440* | <i>Cystadenocarcinoma, NOS</i> | 8480 | Mucinous adenocarcinoma |
| 8481* | <i>Mucin-producing adenocarcinoma</i> | 8490 | Signet ring cell carcinoma/adenocarcinoma |
| 8013 | Large cell neuroendocrine carcinoma (NEC) | 8510 | Medullary carcinoma |
| 8020 | Undifferentiated carcinoma | 8560 | Adenosquamous carcinoma |
| 8041 | Small cell neuroendocrine carcinoma (NEC) | 8574 | Adenocarcinoma with neuroendocrine differentiation |
| 8070 | Squamous cell carcinoma, NOS | | |

* Histology is not ideal for clinical use in patient care, as it describes an unspecified or outdated diagnosis. Data collectors may use code only if there is not enough information in the medical record to document a more specific diagnosis.

[#]This diagnosis is appropriate for certain pTis diagnoses.

Definition of Primary Tumor (T)

| T Category | T Criteria |
|-------------------|---|
| TX | Primary tumor cannot be assessed |
| | No evidence of primary tumor |
| Tis | Carcinoma <i>in situ</i> (intramucosal carcinoma; invasion of the lamina propria or extension into but not through the muscularis mucosae) |
| Tis(LAMN) | Low-grade appendiceal mucinous neoplasm confined to the muscularis propria; Acellular mucin or mucinous epithelium may invade into the muscularis propria T1 and T2 are not applicable to LAMN; Acellular mucin or mucinous epithelium that extends into the subserosa or serosa should be classified as T3 or T4a, respectively |
| T1 | Tumor invades the submucosa (through the muscularis mucosa but not into the muscularis propria) |
| T2 | Tumor invades the muscularis propria |
| T3 | Tumor invades through the muscularis propria into the subserosa or the mesoappendix |
| T4 | Tumor invades the visceral peritoneum, including the acellular mucin or mucinous epithelium involving the serosa of the appendix or mesoappendix, and/or directly invades adjacent organs or structures |
| T4a | Tumor invades the visceral peritoneum, including acellular mucin or mucinous epithelium involving the serosa of the appendix or serosa of the mesoappendix |
| T4b | Tumor directly invades or adheres to adjacent organs or structures |

Definition of Regional Lymph Node (N)

| N Category | N Criteria |
|-------------------|---|
| NX | Regional lymph nodes cannot be assessed |
| N0 | No tumor involvement of regional lymph node(s) |
| N1 | Tumor involvement of one to three regional lymph nodes (tumor in lymph node measuring ≥ 0.2 mm) or any number of tumor deposits is present with no tumor involvement in all identifiable lymph nodes |
| N1a | Tumor involvement of one regional lymph node |
| N1b | Tumor involvement of two or three regional lymph nodes |
| N1c | No tumor involvement of regional lymph nodes, but there are tumor deposits in the subserosa or mesentery |
| N2 | Tumor involvement of four or more regional lymph nodes |

Definition of Distant Metastasis (M)

| M Category | M Criteria |
|-------------------|--|
| cM0 | No distant metastasis |
| cM1 | Distant metastasis |
| cM1c | Metastasis to sites other than peritoneum |
| pM1 | Microscopic confirmation of distant metastasis |
| pM1a | Intraperitoneal acellular mucin, without identifiable tumor cells in the disseminated peritoneal mucinous deposits |
| pM1b | Intraperitoneal metastasis only, including peritoneal mucinous deposits containing tumor cells |
| pM1c | Microscopic confirmation of metastasis to sites other than peritoneum |

Note : For specimens containing acellular mucin without identifiable tumor cells, efforts should be made to obtain additional tissue for thorough histologic examination to evaluate for cellularity.

Prognostic Factors Required for Stage Grouping

| G | G Definition |
|-----------|---------------------------|
| GX | Grade cannot be assessed |
| G1 | Well differentiated |
| G2 | Moderately differentiated |
| G3 | Poorly differentiated |

Note : In rare cases of discordance in primary and metastatic histological grade, the grade of metastatic disease is utilized for stage group assignment.

AJCC PROGNOSTIC STAGE GROUPS

| When T is... | And N is... | And M is... | And grade is... | Then the stage group is... |
|--------------|-------------|-------------|-----------------|----------------------------|
| Tis | N0 | M0 | Any | 0 |
| Tis (LAMN) | N0 | M0 | Any | 0 |
| T1 | N0 | M0 | Any | I |
| T2 | N0 | M0 | Any | I |
| T3 | N0 | M0 | Any | IIA |
| T4a | N0 | M0 | Any | IIB |
| T4b | N0 | M0 | Any | IIC |
| T1 | N1 | M0 | Any | IIIA |
| T2 | N1 | M0 | Any | IIIA |
| T3 | N1 | M0 | Any | IIIB |
| T4 | N1 | M0 | Any | IIIB |
| Any T | N2 | M0 | Any | IIIC |
| Any T | Any N | M1a | Any | IVA |
| Any T | Any N | M1b | G1 | IVA |
| Any T | Any N | M1b | G2,G3, or GX | IVB |
| Any T | Any N | M1c | Any G | IVC |

References :

<https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/>

<https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920>

ANUS

Identification of Primary Site

C21.0, C21.1 and C21.8

Histopathologic Type

| Code | Description | Code | Description |
|-------|--|------|--|
| 8000* | <i>Neoplasm, malignant</i> | 8085 | Squamous cell carcinoma, HPV-associated |
| 8010* | <i>Carcinoma, NOS</i> | 8086 | Squamous cell carcinoma, HPV-independent |
| 8013 | Large cell neuroendocrine carcinoma (NEC) | 8090 | Basal cell carcinoma |
| 8020 | Undifferentiated carcinoma | 8123 | Basaloid carcinoma |
| 8032 | Spindle cell carcinoma | 8124 | Cloacogenic carcinoma |
| 8033 | Carcinoma with sarcomatoid component | 8140 | Adenocarcinoma |
| 8041 | Small cell neuroendocrine carcinoma (NEC) | 8154 | Mixed neuroendocrine-non-neuroendocrine neoplasm (MiNEN) |
| 8051 | Verrucous carcinoma | 8215 | Adenocarcinoma of anal glands |
| 8070 | Squamous cell carcinoma | 8244 | Mixed adenoneuroendocrine carcinoma (MANEC) |
| 8071 | Squamous cell carcinoma, keratinizing, NOS | 8246 | Neuroendocrine carcinoma (NEC) |
| 8072 | Squamous cell carcinoma, large cell, non-keratinizing, NOS | 8480 | Mucinous adenocarcinoma |
| 8083 | Basaloid squamous cell carcinoma | 8490 | Signet ring cell carcinoma |

* Histology is not ideal for clinical use in patient care, as it describes an unspecified or outdated diagnosis. Data collectors may use code only if there is not enough information in the medical record to document a more specific diagnosis.

Definition of Primary Tumor (T)

| T Category | T Criteria |
|------------|---|
| TX | Primary tumor not assessed |
| T0 | No evidence of primary tumor |
| T1 | Tumor ≤ 2 cm |
| T2 | Tumor > 2 cm but ≤ 5 cm |
| T3 | Tumor > 5 cm |
| T4 | Tumor of any size invading adjacent organ(s), such as the vagina, urethra, or bladder |

Definition of Regional Lymph Node (N)

| N Category | N Criteria |
|-------------------|--|
| NX | Regional lymph nodes cannot be assessed |
| N0 | No tumor involvement of regional lymph node(s) |
| N1 | Tumor involvement of regional lymph node(s) |
| N1a | Tumor involvement of inguinal, mesorectal, superior rectal, internal iliac, or obturator lymph node(s) |
| N1b | Tumor involvement of external iliac lymph node(s) |
| N1c | Tumor involvement of N1b (external iliac) with any N1a node(s) |

Definition of Distant Metastasis (M)

| M Category | M Criteria |
|-------------------|--|
| cM0 | No distant metastasis |
| cM1 | Distant metastasis |
| pM1 | Microscopic confirmation of distant metastasis |

AJCC PROGNOSTIC STAGE GROUPS

| When T is... | And N is... | And M is... | Then the stage group is... |
|---------------------|--------------------|--------------------|-----------------------------------|
| T1 | N0 | M0 | I |
| T2 | N0 | M0 | IIA |
| T1-T2 | N1 | M0 | IIB |
| T3 | N0-N1 | M0 | IIIA |
| T4 | N0 | M0 | IIIB |
| T4 | N1 | M0 | IIIC |
| Any T | Any N | M1 | IV |

References :

<https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/>

<https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920>

BRAIN AND SPINAL CORD

Identification of Primary Site

C71.5 - C71.9

Histopathologic Type

| Code | Description | Code | Description |
|-------------|--|-------------|--|
| 9470 | Medulloblastoma, histologically defined | 9474 | Anaplastic medulloblastoma |
| 9471 | Desmoplastic nodular medulloblastoma | 9475 | Medulloblastoma, WNT-activated |
| 9471 | Medulloblastoma with extensive nodularity | 9476 | Medulloblastoma, SHH-activated and TP53-mutant |
| 9471 | Medulloblastoma, SHH-activated and TP53-wildtype | 9477 | Medulloblastoma, non-WNT/non-SHH |
| 9474 | Large cell medulloblastoma | | |

Definition of primary Tumor (T)

There is no primary tumor (T) category.

Definition of Regional Lymph Node (N)

There is no regional lymph node (N) category.

Definition of Distant Metastasis (M)

The definitions of the M categories for **medulloblastoma** correspond to the Modified Chang system. Both systems are included for comparison.

| M Category (AJCC) | Modified Chang | M Criteria (AJCC) |
|--------------------------|-----------------------|---|
| cM0 | M0 | No distant metastasis |
| cM1 | | Distant metastasis |
| cM1b | M2 | Intracranial spread beyond primary site |
| cM1c | M3 | Gross spinal subarachnoid seeding on MRI |
| cM1d | M4 | Metastasis outside CNS (bone marrow, lungs) |
| pM1 | | Microscopic confirmation of distant metastasis |
| pM1a | M1 | Microscopic confirmation of tumor cells present in CSF by cytology |
| pM1b | M2 | Microscopic confirmation of intracranial spread beyond primary site |
| pM1c | M3 | Microscopic confirmation of gross spinal subarachnoid seeding |
| pM1d | M4 | Microscopic confirmation of metastasis outside CNS (bone marrow, lungs) |

AJCC PROGNOSTIC STAGE GROUPS

No prognostic stage grouping is proposed at this time.

References :

<https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/>
<https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920>

APPENDIX

Summary of Changes :

- Per WHO Classification of Tumors 2021 corrigendum **localized LAMN and HAMN represent /2** behavior codes, while any appendiceal mucinous neoplasm with **extra-appendiceal spread represents** a /3 behavior code.
- Goblet cell carcinoid has been replaced by **goblet cell adenocarcinoma** as per WHO classification of tumors.
- Mixed adenoneuroendocrine carcinoma has been replaced with mixed adenocarcinoma-neuroendocrine carcinoma as per WHO 2019 terminology; and is considered a form of **mixed neuroendocrine-non-neuroendocrine neoplasm (MiNEN)**.

Definition of Distant Metastasis (M) (紅字增修處)

| M Category | M Criteria |
|-------------|--|
| cM0 | No distant metastasis |
| cM1 | Distant metastasis |
| cM1c | Metastasis to sites other than peritoneum |
| pM1 | Microscopic confirmation of distant metastasis |
| pM1a | Intraperitoneal acellular mucin, without identifiable tumor cells in the disseminated peritoneal mucinous deposits |
| pM1b | Intraperitoneal metastasis only, including peritoneal mucinous deposits containing tumor cells |
| pM1c | Microscopic confirmation of metastasis to sites other than peritoneum |

Note : For specimens containing acellular mucin without identifiable tumor cells, efforts should be made to obtain additional tissue for thorough histologic examination to evaluate for cellularity.

References :

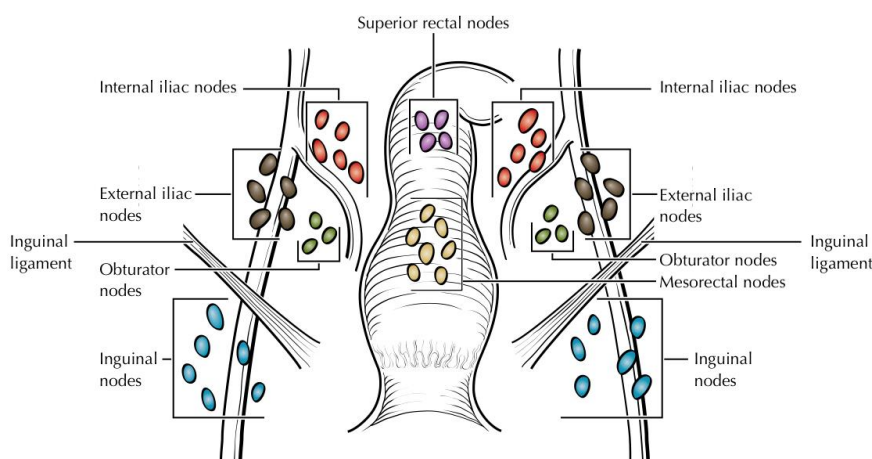
<https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/>

<https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920>

ANUS

Summary of Changes :

- Removal of **Tis** from T category and **Stage group 0** from prognostic stage groups.
There are no reliable data on survival after treatment of Tis lesions. There is no routine, standard of care screening system for Tis lesions and reporting of these lesions is not reliable. Thus, in the AJCC Version 9 of the Anus Protocol, **Stage 0 has been removed**.
Of note, direct invasion of the rectal wall, perianal skin, subcutaneous tissue or the anal sphincter muscles is not classified as T4.
- **Obturator nodal regions** were added to the list of regional nodes. N1a is revised as metastasis in inguinal, mesorectal, **superior rectal**, internal iliac, or **obturator** lymph nodes.



AJCC PROGNOSTIC STAGE GROUPS (紅字增修處)

| When T is... | And N is... | And M is... | Then the stage group is... |
|----------------|---------------|---------------|----------------------------|
| Tis | N0 | M0 | 0 |
| T1 | N0 | M0 | I |
| T2 | N0 | M0 | IIA |
| T1 | N1 | M0 | IIA IIB |
| T2 | N1 | M0 | IIA IIB |
| T3 | N0 | M0 | IIA IIIA |
| T3 | N1 | M0 | IIA IIIA |
| T4 | N0 | M0 | IIIB |
| T4 | N1 | M0 | IIIC |
| Any T | Any N | M1 | IV |

References :

<https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/>
<https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920>

BRAIN AND SPINAL CORD

Summary of Changes :

- An M category is not pertinent to most CNS neoplasms because of the inherent biology that favors local recurrence and regional spread, rather than metastasis outside the CNS. In some instances, spread within the CNS or outside the CNS does alter treatment plans, and this issue has been addressed in the current 9th version for **medulloblastoma** (AJCC M category for staging).

Definition of Distant Metastasis (M) for Medulloblastoma (紅字增修處)

The definitions of the M categories for medulloblastoma correspond to the 「Modified Chang system」. Both systems are included for comparison.

| M Category | <i>Modified Chang</i> | M Criteria (AJCC) |
|-------------|-----------------------|---|
| cM0 | M0 | No distant metastasis |
| cM1 | | Distant metastasis |
| cM1b | M2 | Intracranial spread beyond primary site |
| cM1c | M3 | Gross spinal subarachnoid seeding on MRI |
| cM1d | M4 | Metastasis outside CNS (bone marrow, lungs) |
| pM1 | | Microscopic confirmation of distant metastasis |
| pM1a | M1 | Microscopic confirmation of tumor cells present in CSF by cytology |
| pM1b | M2 | Microscopic confirmation of intracranial spread beyond primary site |
| pM1c | M3 | Microscopic confirmation of gross spinal subarachnoid seeding |
| pM1d | M4 | Microscopic confirmation of metastasis outside CNS (bone marrow, lungs) |

AJCC Prognostic Stage Groups

No prognostic stage grouping is proposed at this time.

References :

<https://www.facs.org/quality-programs/cancer-programs/american-joint-committee-on-cancer/version-9/>

<https://www.facs.org/Quality-Programs/Cancer/news/ajcc-kindle-102920>