

Recommendations for coding Bladder Tumours

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All bladder tumours should be registered, whatever the histological type and level of invasion.

Principles

The coding of tumour behaviour (/1, /2, /3) takes into account both the anatomopathological definition and the extent of invasion. It is, therefore, essential to have access to reports of any pathological examinations.

Rules

Tumour behaviour code: /1

Normal or slightly abnormal histology: low grade papillary urothelial tumours, not invasive.

In the various anatomopathological classifications these tumours are called:

- . benign or simple papillomas,
- . papillary urothelial tumours,
- . stage I carcinoma (BRODERS' classification),
- . well-differentiated papillary carcinoma (JEWETT's classification),
- . grade I carcinoma (in the WHO classification), or
- . classes I and IIs (CHOME's classification).

Extent of invasion - none.

Tumour behaviour code: /2

Presence of mitoses and more markedly atypical cells than in the previous categories. It includes both high grade papillary urothelial tumours and flat tumours.

Extent of invasion - none.

Tumour behaviour code: /3

Invasion present, whatever the anatomopathological definition.

Particular cases:

- Carcinoma in situ: /2

The particular entity which consists of carcinoma in situ displaying clear anaplasia of the superficial epithelium without the formation of a papillary structure and without invasion is coded to 8010/2.

- Anatomopathological examination indicates the existence of a tumour, but it is not possible to determine the degree of malignancy on the specimen examined:

Code: /1 tumour benign or of uncertain malignancy

- Anatomopathological proof unavailable, but the clinical appearance is confirmed by the clinician:

8000/0: No microscopical confirmation:

tumour clinically benign.

8000/1: No microscopical confirmation:
tumour clinically of uncertain behaviour.

8000/3: No microscopical confirmation:
tumour clinically malignant.

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