# Appendix B TNM classification of malignant tumours of the thyroid (UICC TNM 9)<sup>1</sup>

## **Primary tumour (pT)**

| pTX  | Primary tumour cannot be assessed   |
|------|---|
| pT0  | No evidence of primary tumour   |
| pT1a | ≤10 mm, limited to thyroid  |
| pT1b | ≤20 mm but >10 mm, limited to thyroid   |
| pT2  | >20 mm, ≤40 mm, limited to thyroid  |
| рТ3а | >40 mm, limited to thyroid  |
| pT3b | Tumour of any size with gross extrathyroidal extension invading strap muscles (sternohyoid, sternothyroid or omohyoid muscles)                |
| pT4a | Tumour invades beyond thyroid capsule and invades any of subcutaneous soft tissues, larynx, trachea, oesophagus, or recurrent laryngeal nerve |
| pT4b | Tumour invades prevertebral fascia, mediastinal vessels or encases carotid artery   |
|      |   |

UICC TNM 9 staging applies to carcinomas and includes papillary, follicular, oncocytic (Hürthle cell), poorly differentiated and anaplastic carcinomas.

Multifocal tumours (≥2 foci) of all histological types should be designated (m), the largest focus determining the classification, e.g., pT2(m).

## Regional lymph nodes (pN)

| pNX  | Cannot assess regional lymph nodes   |
|------|--|
| pN0  | No regional nodes involved   |
| pN1a | Metastasis in level VI (pretracheal, paratracheal and prelaryngeal/Delphian) lymph nodes   |
| pN1b | Metastasis in other unilateral, bilateral, or contralateral cervical (levels I, II, III, IV or V) or retropharyngeal or superior mediastinal lymph nodes |

## **Distant metastasis (M)**

M0 No distant metastases

M1 Distant metastases

## Residual primary tumour (R)

RX Cannot assess presence of residual primary tumour

R0 No residual primary tumour

R1 Microscopic residual primary tumour

R2 Macroscopic residual primary tumour Clinical staging

This is mentioned for ease of reference as it may be discussed in the MDT meeting and in relation to clinical trials, but we recommend that pathology reports include only the pathological TNM staging. The translation of the pathological data into staging differs with the tumour type.

In papillary and follicular carcinoma, there is evidence that prognosis is poorer in older patients and therefore different criteria are applied to patients under 55 years from those to patients aged 55 years and older. In medullary carcinoma, no age stratification applies.

All undifferentiated/anaplastic tumours are regarded as categories within stage IV.

#### Papillary or follicular carcinoma\* under 55 years

| Stage I  | Any T | Any N | MO |
|----------|-------|-------|----|
| Stage II | Any T | Any N | M1 |

#### Papillary or follicular carcinoma\* 55 years or over

| Stage I   | T1a, T1b, T2 | N0    | MO |
|-----------|--------------|-------|----|
| Stage II  | Т3           | N0    | MO |
|           | T1, T2, T3   | N1    | MO |
| Stage III | T4a          | Any N | MO |
| Stage IVA | T4b          | Any N | MO |
| Stage IVB | Any T        | Any N | M1 |

#### Medullary carcinoma

| Stage I T1a, T1 | b N0 | MO |
|-----------------|------|----|
|-----------------|------|----|

| Stage II  | T2, T3     | N0    | M0 |
|-----------|------------|-------|----|
| Stage III | T1, T2, T3 | N1a   | MO |
| Stage IVA | T1, T2, T3 | N1b   | MO |
|           | T4a        | Any N | MO |
| Stage IVB | T4b        | Any N | MO |
| Stage IVC | Any T      | Any N | M1 |

### Anaplastic/undifferentiated carcinoma

| All are considered stage IV |               |       |    |
|-----------------------------|---------------|-------|----|
| Stage IVA                   | T1, T2, T3a   | N0    | MO |
| Stage IVB                   | T1, T2, T3a   | N1    | MO |
|                             | T3b, T4a, T4b | Any N | MO |
| Stage IVC                   | Any T         | Any N | M1 |

<sup>\*</sup>Including papillary, follicular, poorly differentiated and Hürthle cell (oncocytic) carcinomas.

#### References

Brierley JD, Giuliani M, O'Sullivan B, Rous B, Van Eycken L (eds.). TNM
 Classification of Malignant Tumours (9th edition). Oxford, UK: Wiley-Blackwell;
 2025.