

AJCC-Staging for Retinoblastoma: One System Predicts Both Globe Salvage and Patient Mortality



AJCC
American Joint Committee on Cancer



Financial disclosure

- ▶ Supported by:
 - ▶ The Myrna and John Daniels Charitable Trust - Canada
 - ▶ The Eye Cancer Foundation, Inc. - USA
 - ▶ The Paul T. Finger Fund at Princess Margaret Cancer Center, Canada
- ▶ The Registry received funding from these foundations, with no role in the design or conduct of this research
- ▶ The authors had no conflicts of interest.
- ▶ Dr. Ankit Singh Tomar received a Fellowship Grant from The Eye Cancer Foundation, Inc. to study with Dr. Paul T. Finger at The New York Eye Cancer Center.

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Purpose of this Study

- ▶ To evaluate the ability of the 8th edition of the American Joint Committee on Cancer(AJCC) Cancer Staging System¹ to estimate retinoblastoma (RB) metastasis-related mortality and globe salvage.
- ▶ Comparison with existing classification systems (CHLA² and WEH³).

1. **AJCC** = Mallipatna A, Gallie BL, Chévez-Barrios P, et al. Retinoblastoma. In: Amin MB, Edge SB, Greene FL, eds. AJCC Cancer Staging Manual. 8th ed. New York, NY: Springer; 2017:819–831.

2. **CHLA** = Linn Murphree A. Intraocular retinoblastoma: the case for a new group classification. Ophthalmol Clin N Am. 2005

3. **WEH** = Shields CL, Mashayekhi A, Au AK, et al. The International Classification of Retinoblastoma predicts chemoreduction success. Ophthalmology. 2006;113(12):2276-2280.

Why AJCC?

1. Multiple RB classification systems predict local treatment outcomes after chemotherapy and not life prognosis.
2. Lack published multi-center validation.
3. Not periodically updated.
4. Different systems used by different centers complicate clinical/research/literature outcomes.
5. Limited cross-specialty penetration.

1. AJCC: Uses standard TNM (tumor, node, metastasis) framework
2. Union for International Cancer Control (UICC) world-wide accepted method of multispecialty cancer staging
3. Standardized data reporting and case-to-case prognostication enabled
4. “First” heritable trait (H) biomarker
5. Approved by the AJCC Ophthalmic Oncology Task Force.

Methods - AJCC-00TF is “World-Wide”

Internet-based, Retrospective Registry



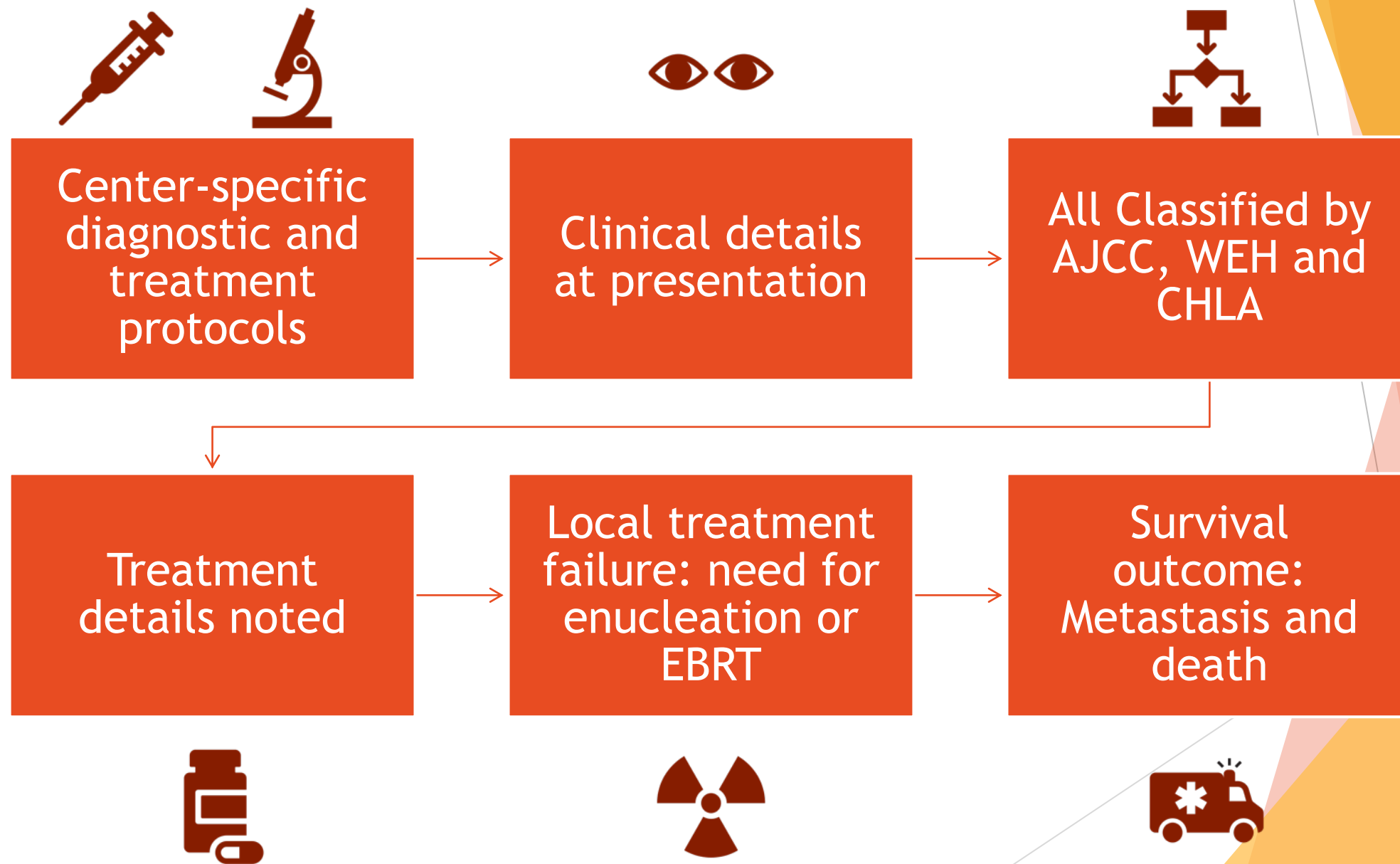
Institutional Review Board and Ethics Approvals were obtained



Study adhered to the Declaration of Helsinki and HIPAA



Methods



Method - Statistical Analysis

- ▶ Patient survival and globe salvage data was estimated with the Kaplan-Meier method.
- ▶ Cox proportional hazards regression models: associations between treatment outcomes and tumor category.



Results

Registry



Eighteen eye cancer specialty centers from 13 countries in over 6 continents

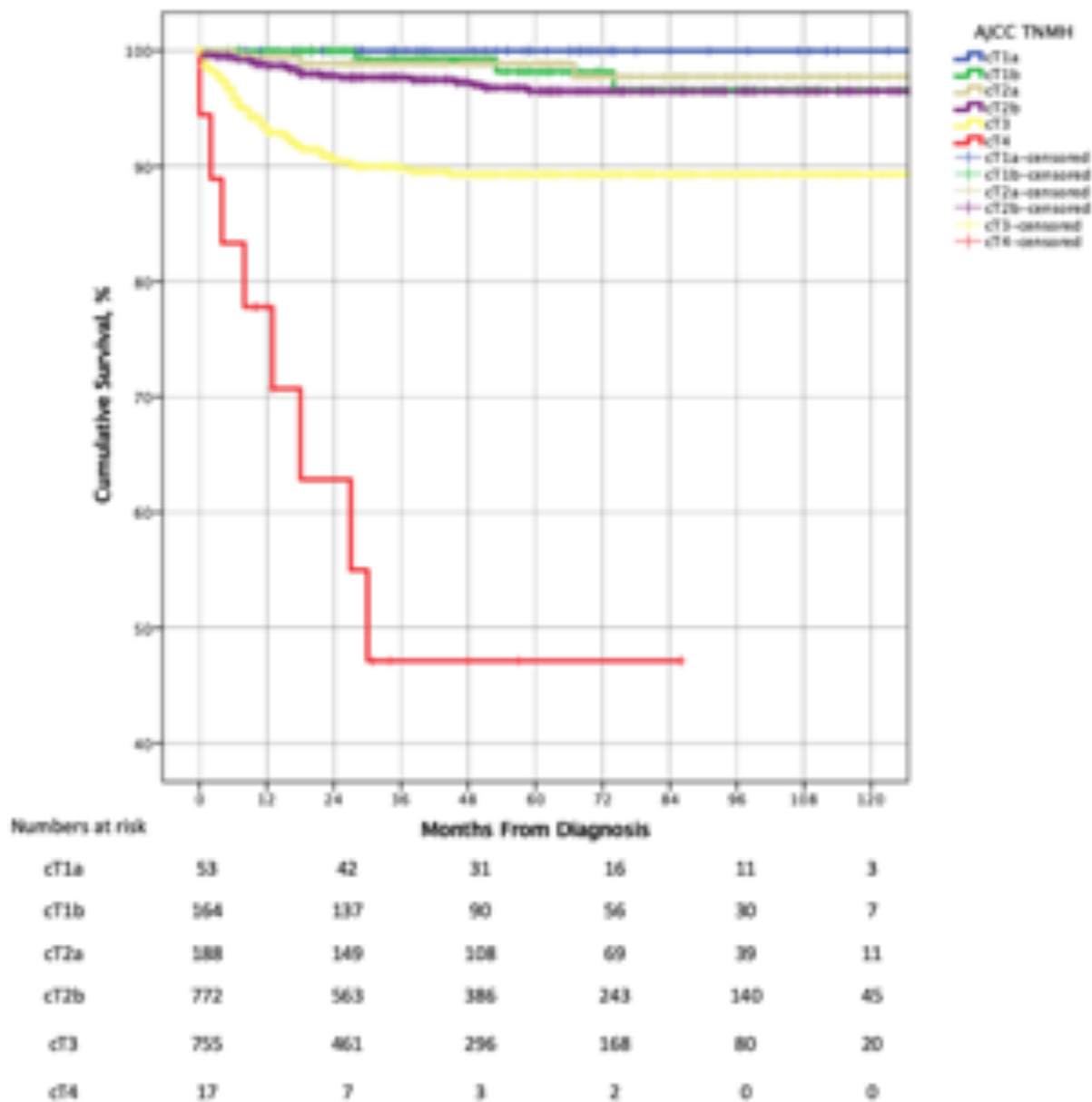
2190 patients were enrolled between January 2001 and December 2013

105 patients excluded from analysis due to incomplete data

Life Prognosis Analysis

- ▶ Median follow-up: 48.0 months
- ▶ 109 (5.2%) children developed metastatic disease over a median time- 9.50 months from presentation.
- ▶ Cumulative Survival Proportion with respect to tumor categories showed a steep decline from cT1a (100%) to cT4 (45%) at 5-year follow-up

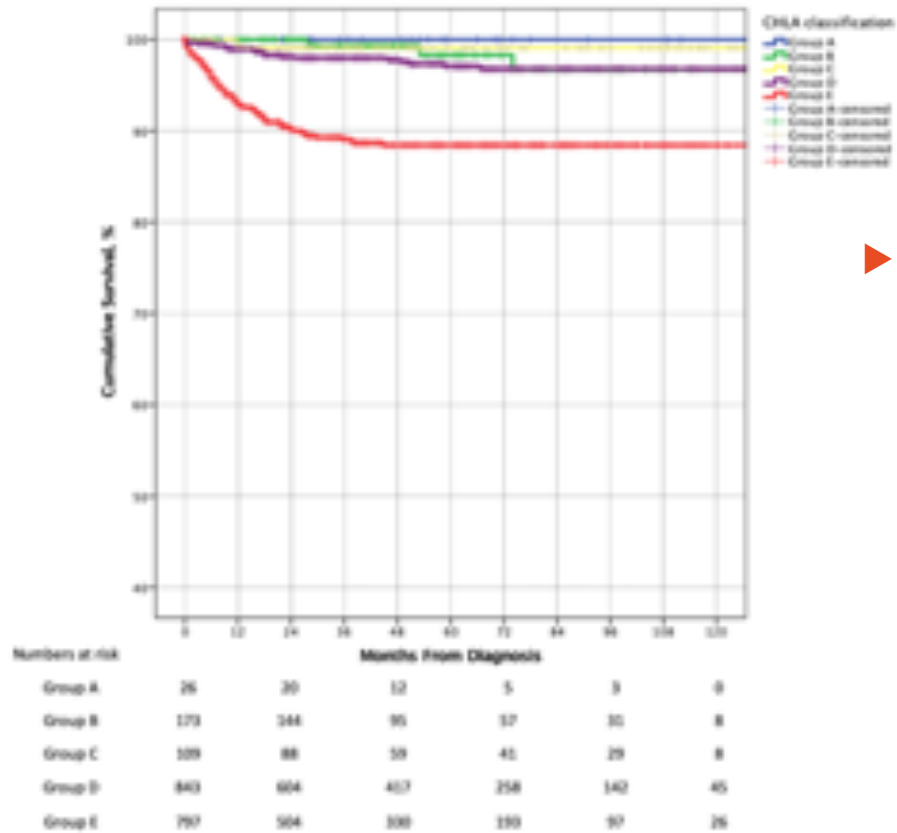
Cumulative Survival of Retinoblastoma Patients Based on AJCC Clinical T Category



| | |
|-----|-----------------|
| cT3 | 8.09-fold risk |
| cT4 | 48.55-fold risk |

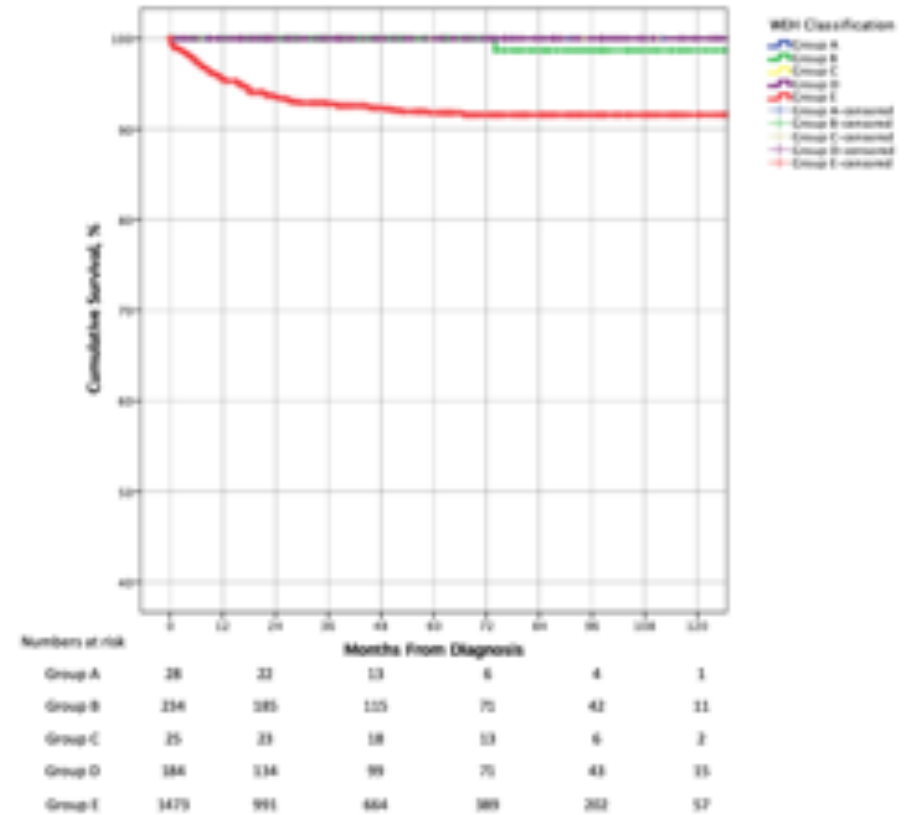
Life Prognosis Analysis

Cumulative Survival of Retinoblastoma Patients Based on Children Hospital Los Angeles Classification



▶ When compared with CHLA and WEH, AJCC TNMH classification shows a better tumor stratification in terms of risk for metastasis-related mortality.

Cumulative Survival of Retinoblastoma Patients Based on Wills Eye Hospital Classification

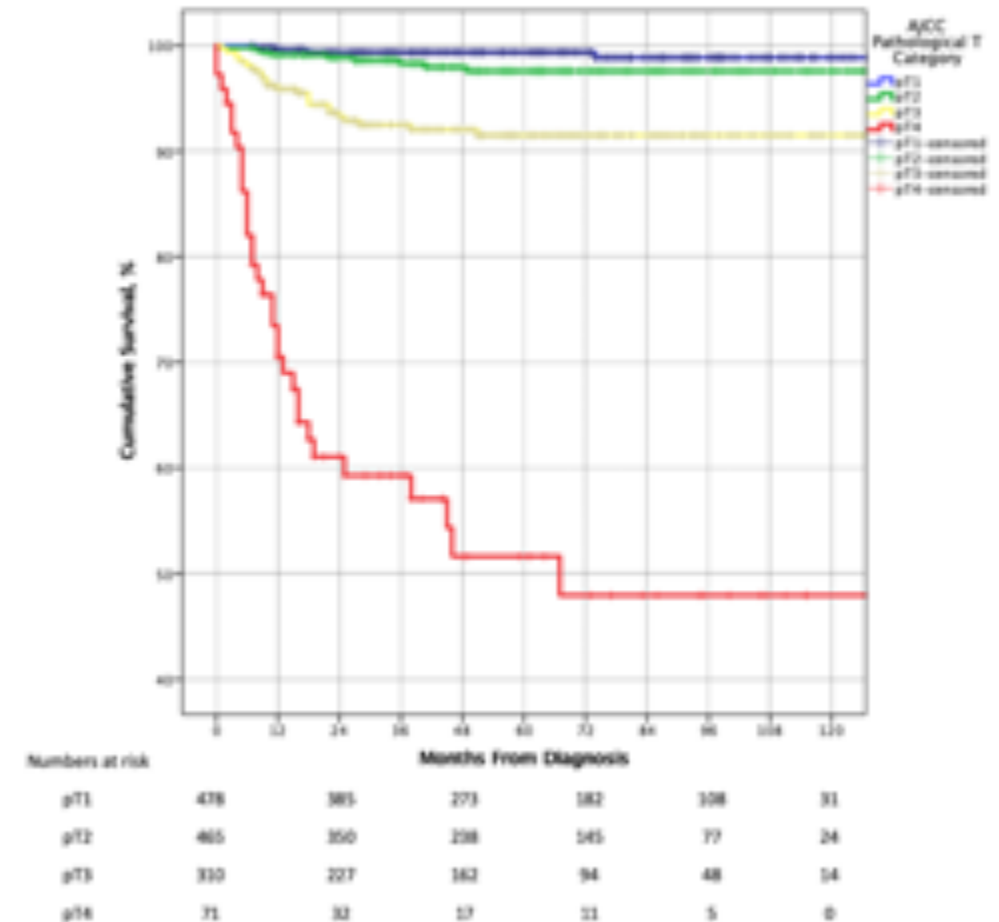


Life Prognosis by Pathological TNM category in Enucleated Eyes

- Cumulative Survival Proportion with respect to tumor categories showed a steep decline from pT1 (99%) to pT4 (48%) at the 5-year follow-up

| | |
|-----|-----------------|
| pT3 | 9.76-fold risk |
| pT4 | 77.26-fold risk |

Cumulative Survival of Patients Based on AJCC Pathological T Category

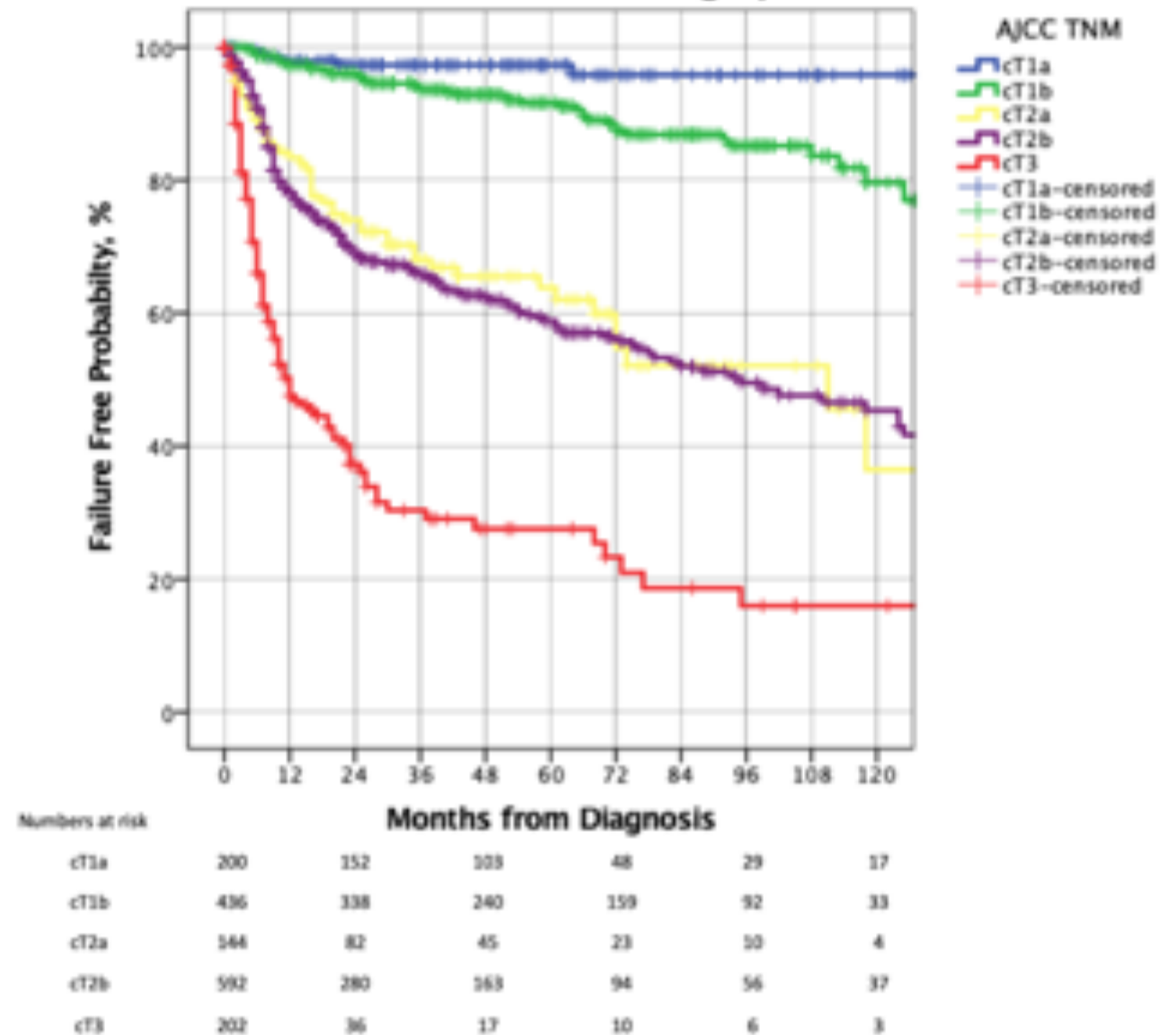


Local Treatment Failure

- ▶ Of the 2854 eyes, 1574 had an attempt at globe salvage.
- ▶ 434 eyes needed enucleation or EBRT.
- ▶ As the cT-categories increased from cT1a to cT3, the hazard of treatment failure increased

| | |
|------|----------------|
| cT1b | 3.5-fold risk |
| cT2a | 15.1-fold risk |
| cT2b | 16.4-fold risk |
| cT3 | 45.0-fold risk |

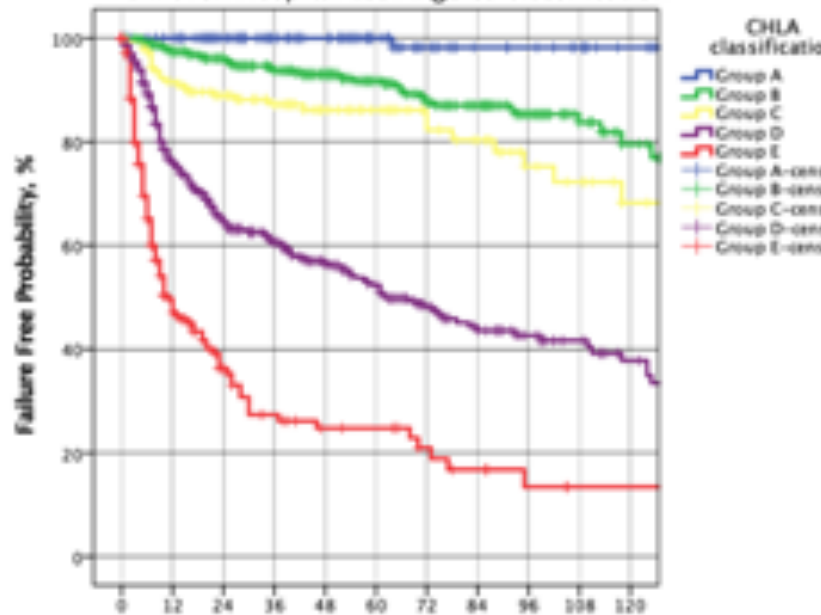
Cumulative Proportion of Salvaged Retinoblastoma Eyes Based on AJCC Clinical T Category



Local Treatment Failure

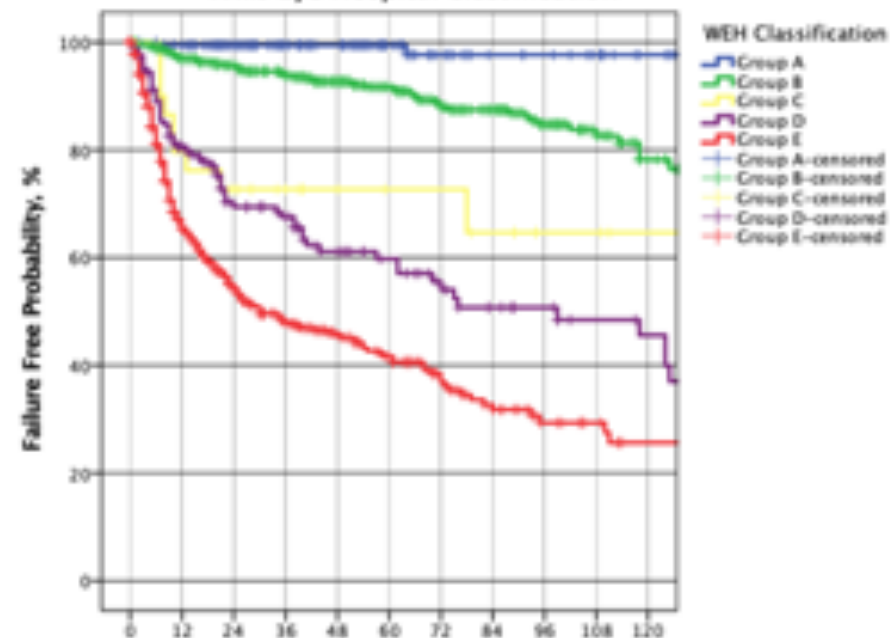
- ▶ Difference in local treatment failure rates was significant in less advanced tumors (cT1a and cT1b) compared to cT3. These results were comparable in CHLA classification.
- ▶ But they were in variance with group E in WEH classification.

Cumulative Proportion of Salvaged Retinoblastoma Eyes Based on Children Hospital Los Angeles Classification



| Numbers at risk | Months from Diagnosis | | | | | |
|-----------------|-----------------------|-----|-----|-----|----|----|
| | 0 | 12 | 24 | 36 | 48 | 60 |
| Group A | 168 | 133 | 90 | 40 | 27 | 16 |
| Group B | 438 | 344 | 244 | 160 | 91 | 30 |
| Group C | 167 | 118 | 72 | 45 | 26 | 15 |
| Group D | 563 | 348 | 137 | 74 | 43 | 27 |
| Group E | 220 | 36 | 17 | 10 | 4 | 2 |

Cumulative Proportion of Salvaged Retinoblastoma Eyes Based on Wills Eye Hospital Classification



| Numbers at risk | Months from Diagnosis | | | | | |
|-----------------|-----------------------|-----|-----|-----|-----|----|
| | 0 | 12 | 24 | 36 | 48 | 60 |
| Group A | 179 | 142 | 95 | 42 | 29 | 17 |
| Group B | 505 | 402 | 302 | 193 | 114 | 47 |
| Group C | 32 | 20 | 11 | 9 | 3 | 1 |
| Group D | 164 | 81 | 53 | 36 | 23 | 16 |
| Group E | 633 | 207 | 102 | 50 | 32 | 11 |

Discussion

- ▶ Multicenter, International, Registry-based studies of rare cancers can be performed using internet-based data sharing. This is the first such study to assess treatment outcome measures in large, heterogenous, real-world retinoblastoma patient population
- ▶ AJCC-RB staging predicted metastasis related mortality.
AND
- ▶ AJCC-RB staging predicted globe salvage.
AND
- ▶ AJCC-UICC staging is the world's multi-specialty cancer language



Summary

- ▶ AJCC RB staging:
 - ▶ is the only comprehensive classification that predicts metastasis and globe salvage.
 - ▶ accounts for both intraocular and extraocular retinoblastoma extent.
 - ▶ has been periodically updated with the latest significant medical evidence.
 - ▶ holistically includes tumor, nodes, metastasis, and heritable trait.
 - ▶ has been adopted by the Union for International Cancer Control (UICC) making it the most common world RB cancer terminology.

53rd Annual Scientific Meeting Retina Society 2020 VR



*The AJCC-00TF
Thanks You.*