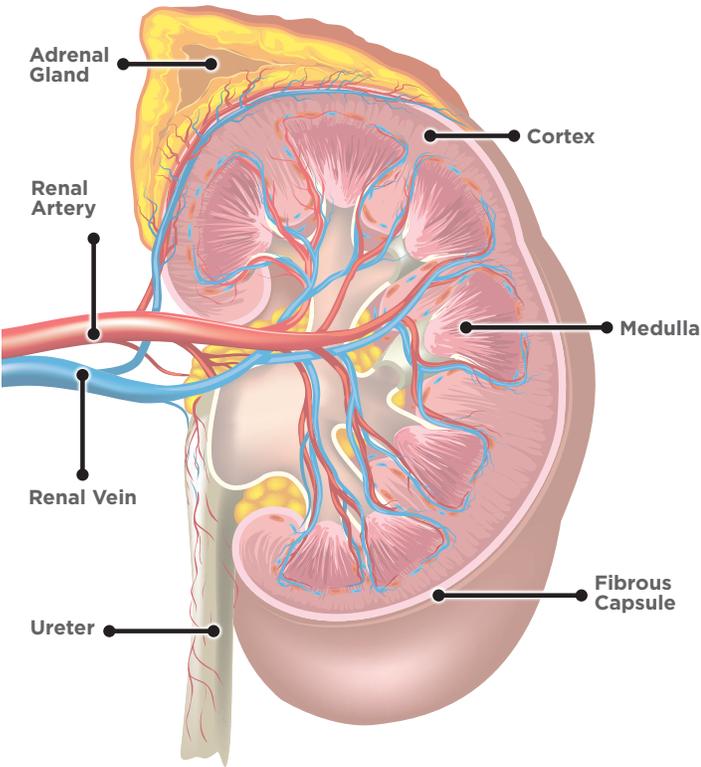
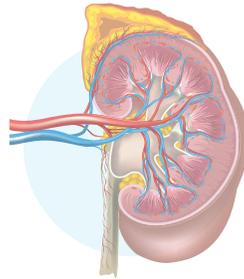


# Understanding Your Kidney Cancer

## Anatomy of a Healthy Kidney

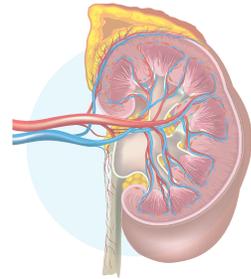


## Stages of Renal Cell Carcinoma



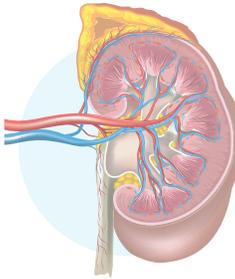
### Stage I\*

The primary tumour is 7 centimeters or less and is confined to the kidney.



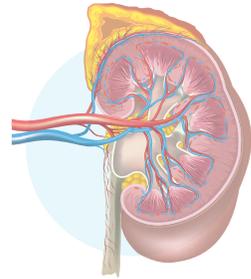
### Stage II\*

The primary tumour is larger than 7 centimeters and is confined to the kidney.



### Stage III\*

The primary tumour has spread to at least one nearby lymph node or into a major neighbouring blood vessel but not to other organs.



### Stage IV\*

The tumour may be any size and may or may not have spread to lymph nodes but has spread to other organs such as the lungs or liver.

\*Health Care Provider to indicate your stage and location of tumour

## Notes

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# Understanding Your Kidney Cancer

## Types of Kidney Cancer

### Renal cell carcinoma (adenocarcinoma)

- Clear cell
- Papillary
- Unclassified renal cell
- Chromophobe
- Collecting Duct
- Other \_\_\_\_\_

### Other cancerous kidney tumours

- Transitional cell carcinoma
- Wilms tumour
- Renal sarcoma

## Tumour Staging (TNM Staging)

Staging is the process of finding out how far the cancer has spread. Your care and prognosis (outlook) depend, to a large extent, on the cancer's stage. The TNM system describes three key pieces of information:

- T** size of the main (primary) tumour.
- N** extent of spread to nearby (regional) lymph nodes. Lymph nodes are small bean-shaped collections of immune system cells, which are important in fighting infections. If the lymph nodes are abnormally enlarged, they may be infiltrated with tumour cells.
- M** whether the cancer has spread (metastasized) to other parts of the body.

Numbers or letters appear after T, N and M to provide more details about each of these factors. The numbers 0 through 4 indicate increasing severity. The letter X means "cannot be assessed because the information is not available."

**T** \_\_\_\_\_      **N** \_\_\_\_\_      **M** \_\_\_\_\_

Once the T, N and M categories have been determined, this information is combined to assign an overall stage of I, II, III or IV. Patients with lower stage numbers tend to have a better prognosis (please see the other side of this sheet).

