Staging laryngeal squamous cell carcinoma in the digital age

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Correct staging of laryngeal cancer is of paramount importance to choose the best-fitting treatment among the several surgical and non-surgical options available. The Tumor Node Metastasis system relies upon clinical and radiological information that ultimately will confront with final pathological report. Left picture shows a left vocal cord lesion abutting on the paraglottic space (red arrow) of a patient with no clinical laryngeal motion impairment, thus classifying the lesion as an advanced stage (cT3). Unexpectedly, only muscular involvement (right picture, blue arrows) is seen on histopathological macrosection, and the tumor was eventually classified as pT2. Despite modern technologies such as high-definition endoscopy, computerized tomography, or magnetic resonance imaging, correct staging is not always feasible, thus hampering the choice of a tailored approach.