

## Lymph node status (Core)

The vagina has complex lymphatic drainage. The upper two-thirds of the vagina, the location of the majority of carcinomas, drains into pelvic lymph nodes (obturator, internal iliac/hypogastric and external iliac), and rarely to the para-aortic lymph nodes. The lower one-third drains into the inguinofemoral lymph nodes. Tumours arising in the middle third of the vagina may spread to both pelvic and inguinofemoral nodes and defining 'regional' nodes may not be possible in each case, especially as the pathologist may not be aware of the location of the tumour. This is reflected in the International Federation of Gynecology and Obstetrics (FIGO) Staging System,<sup>1,2</sup> where only involvement of 'nearby lymph nodes', i.e., pelvic or groin, is taken into account.

When lymphadenectomy is performed, one or more sections of all identified nodes should be submitted for histological examination, including sections containing perinodal fat to confirm the presence or absence of extracapsular extension, especially if grossly suspected. For nodes which are grossly involved by tumour, representative sampling is acceptable, whereas nodes which are not suspicious should be submitted in their entirety after sectioning at 2 millimetre (mm) intervals perpendicular to the long axis of the node.

The anatomic location and number of lymph nodes dissected, the number containing tumour, the size of the largest tumour deposit and the presence or absence of extracapsular spread should be accurately documented in the pathology report. According to TNM8,<sup>3</sup> nodal involvement should be recorded as the presence of isolated tumour cells (ITC, <0.2 mm), micrometastases (MIC, 0.2-2 mm) or macrometastases (MAC, >2 mm). MAC are regarded as pN1, MIC as pN1 (mi) and ITCs are pN0 (i+); ITCs do not upstage a carcinoma.

## References

- 1 Adams TS and Cuello MA (2018). Cancer of the vagina. *Int J Gynaecol Obstet* 143 Suppl 2:14-21.
- 2 FIGO Committee on Gynecologic Oncology (2009). Current FIGO staging for cancer of the vagina, fallopian tube, ovary, and gestational trophoblastic neoplasia. *Int J Gynaecol Obstet* 105(1):3-4.
- 3 Brierley JD, Gospodarowicz MK and Wittekind C (eds) (2016). *Union for International Cancer Control. TNM Classification of Malignant Tumours, 8th Edition*, Wiley, USA.