

## **The Edmonton Staging System (ESS)**

Our current knowledge of the mechanisms and response of cancer pain to treatments suggest that the simple definition of “pain due to cancer” is not enough to define the pain construct adequately. Although pain is a subjective sensation, and therefore more difficult to assess, a number of definable features are well known to influence its response to different treatments. With this in mind, the Edmonton Staging System, was developed to provide a clinical staging system for cancer pain. This system includes known prognostic factors for the response to treatment. The system is accurate in predicting the outcome of patients with cancer pain. It may also be useful for stratification for patients prior to randomisation and clinical trials in order to secure balance of distribution in the different treatments. Three stages are identified:

Stage 1: indicates a good prognosis

Stage 2: indicates intermediate prognosis

Stage 3: indicates poor prognosis for pain control. Patients with features such as incidental pain, neuropathic pain, tolerance to the present opioid, a past history of alcoholism, severe psychosocial distress and cognitive impairment will put a patient in Stage 3 and, therefore, one can expect a less likelihood of good response to analgesic treatment. Patients with visceral or bone/soft tissue pain, low dose of opioids, intact cognitive status and absence of severe psychological distress are more likely to respond well to analgesic treatment. We stage all patients with cancer pain on admission.

### **EDMONTON STAGING SYSTEM FOR CANCER PAIN**

#### **A Mechanism of Pain**

A1 Visceral Pain

A2 Bone-soft Tissue

A3 Neuropathic Pain

A4 Mixed

A5 Unknown

#### **B Pain Characteristics**

B1 Non-incidental Pain

B2 Incidental Pain

#### **C Previous Narcotic Exposure**

C1 Less than 60 mg of equivalent oral morphine/day

C2 60 - 300 mg of equivalent oral morphine/day

C3 More than 300 mg of equivalent oral morphine/day

#### **D Cognitive Function**

D1 Normal cognitive function

D2 Impaired cognitive function

#### **E Psychological Distress**

E1 Patients without major psychological distress

E2 Major psychological distress

#### **F Tolerance**

F1 Increase of <5% of initial dose/day

F2 Increase of >5% of initial dose/day

**G Past History**

G1 Negative history for alcoholism or drug addiction

G2 Positive history for alcoholism or drug addiction

Stage 1: good prognosis

A1                    C1  
          B1                    D1    E1    F1    G1  
A2                    C2

Stage 2: intermediate prognosis (any patient that is not Stage 1 or 3)

A4  
(if not stage 3). C3 (if not stage 3); D2 (if not stage 3)  
A5

Stage 3: poor prognosis

A3    (any B-C-D-E-F-G)  
B2    (any A-C-D-E-F-G)  
E2    (any A-B-C-D-F-G)  
F2    (any A-B-C-D-E-F)  
G2    (any A-B-C-D-E-F)

**Scoring:** (Results would indicate Stage 1, or 2, or 3)