The series *International Histological Classification of Tumours* consists of the following volumes. Each of these volumes – apart from volumes 1 and 2, which have already been revised – will appear in a revised edition within the next few years. Volumes of the current editions can be ordered through WHO, Distribution and Sales, Avenue Appia, CH-1211 Geneva 27.

4. Histological typing of oral and oropharyngeal tumours (1971)
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20. Histological typing of tumours of the liver, biliary tract and pancreas (1978)

A coded compendium of the International Histological Classification of Tumours (1978).

The following volumes have already appeared in a revised edition with Springer-Verlag:

- Histological Typing of Thyroid Tumours, 2nd edn. Hedinger/Williams/Sobin (1988)
- Histological Typing of Oesophageal and Gastric Tumours, 2nd edn. Watanabe/Jass/Sobin (1990)
- Histological Typing of Tumours of the Upper Respiratory Tract and Ear, 2nd edn. Shanmugaratnam/Sobin (1991)
- Histological Typing of Female Genital Tract Tumours, 2nd edn. Scully et al. (1994)
Histological Typing of Female Genital Tract Tumours

R. E. Scully, T. A. Bonfiglio, R. J. Kurman, S. G. Silverberg, and E. J. Wilkinson

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General Preface to the Series

Among the prerequisites for comparative studies of cancer are international agreement on histological criteria for the definition and classification of cancer types and a standardized nomenclature. An internationally agreed classification of tumours, acceptable alike to physicians, surgeons, radiologists and statisticians, would enable cancer workers in all parts of the world to compare their findings and would facilitate collaboration among them.

In a report published in 1952,1 a subcommittee on the World Health Organization (WHO) Expert Committee on Health Statistics discussed the general principles that should govern the statistical classification of tumours and agreed that, to ensure the necessary flexibility and ease of coding, three separate classifications were needed according to (1) anatomical site, (2) histological type, and (3) degree of malignancy. A classification according to anatomical site is available in the International Classification of Diseases.2

In 1956, the WHO Executive Board passed a resolution3 requesting the Director-General to explore the possibility that WHO might organize centres in various parts of the world and arrange for the collection of human tissues and their histological classification.

The main purpose of such centres would be to develop histological definitions of cancer types and to facilitate the wide adoption of a uniform nomenclature. The resolution was endorsed by the Tenth World Health Assembly in May 1957.4

Since 1958, WHO has established a number of centres concerned with this subject. The result of this endeavour has been the International Histological Classification of Tumours, a multivolumed series whose

4 WHO (1957) WHO Official Records, No. 79, p. 467 (resolution WHA 10.18)
first edition was published between 1967 and 1981. The present revised second edition aims to update the classification, reflecting progress in diagnosis and the relevance of tumour types to clinical and epidemiological features.
Preface to Histological Typing
of Female Genital Tract Tumours,
Second Edition

The first edition of *Histological Typing of Female Genital Tract Tumours* was the result of a collaborative effort organized by WHO and carried out by the Collaborating Center for the Histological Classification of Female Genital Tract Tumours at the Institute of Pathological Anatomy, Kommunehospitalet, Copenhagen, Denmark. The classification was published in 1975.

The task of updating the classification was given to the Classification and Nomenclature Committee of the International Society of Gynecological Pathologists and its four subcommittees listed on pages V–VIII. Classification proposals were discussed during meetings of the subcommittees and presented orally to the members of the Society during their general meetings. The classifications were finally circulated to the Society members for their suggestions, which were considered and discussed at the final meetings of the subcommittees.

The final classification reflects the present state of knowledge, and modifications are almost certain to be needed as experience accumulates. It is therefore expected that some pathologists may dissent from certain aspects of the classification or terminology adopted in this volume. It is nevertheless hoped that, in the interests of international cooperation and comparability of data, all pathologists will use the classification as put forward. Criticisms and suggestions for its improvement will be welcomed; these should be sent to the World Health Organization, Geneva, Switzerland.

Since many of the tumours and tumour-like conditions in the classification occur in several sites in the female genital tract cross-referencing from one site to another has been done in illustrating these lesions.

The editors and authors are grateful to the International Society of Gynecological Pathologists for its generous financial support for the publication of many of the color photographs.

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