

Table 4-1: WHO and RECIST criteria for response

Characteristic	WHO	RECIST
Measurability of lesions at baseline	1. Measurable, bidimensional (product of LD and greatest perpendicular diameter) ^a	1. Measurable, unidimensional (LD only, size with conventional techniques ≥ 20 mm; spiral computed tomography ≥ 20 mm; 10 mm)
	2. Nonmeasurable/evaluable (e.g., lymphangitic pulmonary metastases, abdominal masses)	2. Nonmeasurable: all other lesions, including small lesions. Evaluable is not recommended
Objective response	1. Measurable disease (change in sum of products of LDs and greatest perpendicular diameters, no maximum number of lesions specified)	1. Target lesions [change is sum of LDs, maximum of 5 per organ up to 10 total (more than one organ)]
	CR: disappearance of all known disease, confirmed at ≥ 4 wk	CR: disappearance of all target lesions, confirmed at ≥ 4 wk
	PR: $>50\%$ decrease from baseline, confirmed at ≥ 4 wk	PR $>30\%$ decrease from baseline, confirmed at 4 wk
	PD: $>25\%$ increase of one or more lesions, or appearance new lesions	PD: ≥ 20 mm; 20% increase over smallest sum observed, or appearance of new lesions
	NC: neither PR or PD criteria met	SD: neither PR or PD criteria met
	2. Nonmeasurable disease	2. Nontarget lesions
	CR: disappearance of all unknown disease, confirmed at ≥ 4 wk; PR: estimated decrease of $\geq 50\%$, confirmed at ≥ 4 wk	CR: disappearance of all target lesions and normalization of tumor markers, confirmed at ≥ 4 wk
	PD: estimated increase of ≥ 20 mm; 25% in existent lesions or appearance of new lesions	PD: unequivocal progression of nontarget lesions, or appearance of new lesions
	NC: neither PR or PD criteria met	Non-PD: persistence of one or more nontarget lesions and/or tumor markers above normal limits
Overall response	1. Best response recorded in measurable disease	1. Best response recorded in measurable disease from treatment start to disease progression or recurrence
	2. NC in nonmeasurable lesions will reduce a CR in measurable lesions to an overall PR	2. Non-PD in nontarget lesions(s) will reduce a CR in target lesions(s) to an overall PR
	3. NC in nonmeasurable lesions will not reduce a PR in measurable lesions	3. Non-PD in nontarget lesion(s) will not reduce a PR in target lesions(s)

Duration of response	1.CR	1.Overall CR
	From: date CR criteria first met	From: date CR criteria first met
	To: date PD first noted	To: date recurrent disease first noted
	2. Overall response	2. Overall response
	From: date of treatment start	From: date CR or PR criteria first met (whichever status came first)
	To: date PD first noted	To: date recurrent disease or PD first noted
	3.In patients who only achieve a PR, only the period of overall response should be recorded	3. SD
		From: date of treatment start
		To: date PD first noted

WHO, World Health Organization; RECIST, Response Evaluation Criteria in Solid Tumors; LD, longest diameter; CR, complete response; PR, partial response; PD, progressive disease; NC, no change; SD, stable disease.

^aLesions that can be measured only unidimensionally are considered measurable (e.g., mediastinal adenopathy, malignant hepatomegaly).

From *J Natl Cancer Inst* 2000;92:179–181, with permission.

Bethesda Handbook of Clinical Oncology. Appendix IV. WHO and RECIST criteria for response. Available:

http://www.lwwoncology.com/dynaweb/resources/abraham/80721/@Generic_BookView/80729;cs=chapview.wv;ts=chaptoc.tv