

When the Biopsy is Positive



Urology of Indiana approach to patient education and treatment options

By Peter M. Knapp, Jr., M.D.

A positive biopsy report is a cause of concern and anxiety for our patients and their family members. We immediately reassure the patient that prostate cancer is common, often slow growing and treatable at all stages. Arrangements are then made to gather the patient, their family members and significant others together to review the pathology report, further evaluate treatment options, and conduct what we refer to as a “cancer consultation.”

The patient and his family meet with us in a comfortable office setting. Care is given to include everyone in the conversation as treatment decisions can affect other family members.

The discussions begins by pointing out that the treatment decision is based on the following three points of evaluation:

- Pathologic grade and stage of the cancer;
- Patient age, overall health, and life expectancy;
- And, patient preferences and ability to contend with the potential complications associated with each treatment modality.

Pathologic Grade (Gleason Score, Tumor Volume, and Clinical Stage)

Pathologic grade is most often measured by the Gleason score. The Gleason score is a pathologic grading system that grades the cancer histologic pattern from 1 to 5 with the most poorly differentiated cancer receiving the highest

grade. Prostate cancer usually demonstrates a variety of Gleason grades in any one specimen. Therefore, the two most predominant pattern numbers are added together (3+4) to achieve a Gleason score. It is generally accepted that the higher the Gleason score, the more aggressive the cancer.

The volume of cancer in the prostate is also important. Usually 10 to 12 biopsies are taken. The higher the number of positive biopsies the larger the volume of cancer. The individual biopsy specimens are the size of a straight pin. The pathologist routinely reports the percentage of the core that demonstrates cancer to assist in the cancer volume determination.

Clinical stage is assessed by looking for evidence of extracapsular extension on prostate ultrasound or MRI, pelvic lymphadenopathy on pelvic CT scan, and skeletal bone metastases on bone scan. Additional imaging is not always necessary

if there is a low risk of advanced disease. The probability of advanced disease can be assessed by the use of the Partin Table, which uses the level of PSA elevation and the Gleason score to predict the probability of advanced disease.

Patient Age, Overall Health and Life Expectancy

The patient's age, overall health and life expectancy are important factors in treatment selection. It has long been recognized that prostate cancer is common and often slow growing in men of advanced age. On the other hand, some cancers are more aggressive and can be life threatening, which results in 30,000 prostate cancer deaths per year, making prostate cancer the second leading cause of cancer deaths in men. Treatment in patients of advanced age should be geared to slow the growth of the cancer or eliminate the cancer with a low risk of side effects. Younger patients with good health and many years of life expectancy may desire more aggressive treatment and accept a higher risk of complication in order to eradicate the disease and minimize the risk of recurrence.

Patient Preference and Risk Tolerance

Individual patient preferences play a significant role in treatment decision. After reviewing the pathologic rate, clinical stage, and patient age, health and longevity, each treatment option is carefully reviewed to include all benefits and risks. Treatment options vary widely and include radical prostatectomy, external beam radiation therapy – IMRT/IGRT, brachytherapy, cryotherapy, hormone deprivation therapy and observation only. Patients often have very specific preferences or biases based on personal or family experiences that also influence the treatment selection.

Summary

During the cancer consultation, all factors are considered with the patient and family in order to arrive at a treatment plan that accommodates the patient's needs and risk tolerance. The following articles go into further detail regarding the various treatments of prostate cancer.



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