

Six-Year Follow-Up of Untreated T1 Carcinoma of Prostate

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Abstract

Introduction: The management of T1 carcinoma of prostate remains controversial and the critical role of histopathology is often underestimated. **Materials and Methods:** A retrospective review was conducted on 27 cases of T1 prostate carcinoma diagnosed between 1980 and 1992, all of which were managed on a surveillance programme. Pathological material of 24 cases was available for re-examination by a single histopathologist without prior knowledge of the originally assigned grade. Gleason's scoring system was used in the current review. **Results:** Twenty-two (81.5%) were T1a and 5 (18.5%) T1b. Mean duration of follow-up was 77.3 months (1.0 to 159.0) and median age was 72.0 years (61.0 to 84.0). Twenty-five (92.6%) were originally graded as well differentiated, 1 (3.7%) was moderately differentiated and 1 (3.7%) was poorly differentiated. Three of the well-differentiated tumours were upstaged because of tumour volume. On review, differences in grading were noted in 13 cases (54.2%) and 11 (45.8%) were, as a consequence, upstaged. Progression was recorded in 5 cases (18.5%). Mean disease-free interval was 47.6 months (7.0 to 75.0) and mean serum PSA at progression was 34.2 ug/l (2.3 to 62.5). Four responded to delayed therapy. Mortality was recorded in 13 cases (48.1%) but cancer-specific mortality was only 7.7% (1/13). Mean age at death was 78.1 years. **Conclusion:** The importance of accurate grading and staging cannot be overemphasised given its pivotal role in subsequent management. The impact of age is also apparent and surveillance appears a reasonable option for those with limited life expectancy after diagnosis.

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