

Rajal B. Shah
Ming Zhou

Prostate Biopsy Interpretation: An Illustrated Guide

 Springer

Prostate Biopsy Interpretation: An Illustrated Guide

Rajal B. Shah • Ming Zhou
Authors

Prostate Biopsy Interpretation: An Illustrated Guide

 Springer

Authors

Rajal B. Shah, M.D.
Director, Urologic Pathology
Caris Life Sciences
6655 North MacArthur Boulevard
Irving, Texas 75039
USA
rshah@carisls.com

Ming Zhou, M.D., Ph.D.
Associate Professor
Director of Surgical Pathology, Tisch Hospital
Director of Genitourinary Pathology, Tisch Hospital
New York University
550 First Avenue
New York, NY 10016
USA
Ming.zhou@nyumc.org

ISBN 978-3-642-21368-7 e-ISBN 978-3-642-21369-4
DOI 10.1007/978-3-642-21369-4
Springer Heidelberg Dordrecht London New York

Library of Congress Control Number: 2011937719

© Springer-Verlag Berlin Heidelberg 2012

This work is subject to copyright. All rights are reserved, whether the whole or part of the material is concerned, specifically the rights of translation, reprinting, reuse of illustrations, recitation, broadcasting, reproduction on microfilm or in any other way, and storage in data banks. Duplication of this publication or parts thereof is permitted only under the provisions of the German Copyright Law of September 9, 1965, in its current version, and permission for use must always be obtained from Springer. Violations are liable to prosecution under the German Copyright Law.

The use of general descriptive names, registered names, trademarks, etc. in this publication does not imply, even in the absence of a specific statement, that such names are exempt from the relevant protective laws and regulations and therefore free for general use.

Product liability: The publishers cannot guarantee the accuracy of any information about dosage and application contained in this book. In every individual case the user must check such information by consulting the relevant literature.

Cover design: eStudioCalamar, Figueres/Berlin

Printed on acid-free paper

Springer is part of Springer Science+Business Media (www.springer.com)

*To my wife, Ami Shah, and sons Ansh and Alay, for their unconditional love, support, and constantly reminding me that there is life beyond work.
To my parents, Bipin Shah and Sharmishtha Shah, for their genes, sacrifice, and motivation.*

Rajal B. Shah, M.D.

To my wife, Lan Zhou, and daughters Grace and Rebecca, for their unwavering support.

Ming Zhou, M.D., Ph.D.

Preface

This book is the product of a prostate biopsy course that we taught at several national pathology meetings over a period of 5 years. After the lectures, attendees of different levels – residents, fellows, pathologists in private practice and academia – came to us to compliment the practicality and timeliness of our course and encouraged us to turn it into a handy reference book. When Melissa Ramondetta, Executive Editor at Springer, approached us for writing a book on prostate biopsy, we enthusiastically agreed to her proposal.

Prostate needle biopsy specimens constitute a significant portion of a surgical pathologist's daily work. However, prostate biopsy specimens are not every pathologist's darling. There is a significant error rate on diagnosing prostate cancer in needle biopsy, slow adoption of the modified Gleason grading system, and considerable variation in reporting. This book aims to cover all the practical issues related to interpretation of prostate biopsies in day-to-day practice, including diagnosis of limited cancer and its distinction from common benign mimickers; diagnosis and the clinical significance of “atypical glands suspicious for cancer” and high-grade prostatic intraepithelial neoplasia; prostate cancers mimicking benign lesions and other variant histologies of prostate cancer; recently described new entities; contemporary approaches to Gleason grading; application of immunohistochemical and emerging molecular markers in diagnosis and differential diagnosis of prostate cancer; and reporting of prostate biopsy. In addition, we discuss several other timely topics and issues, including prostate biopsy sampling techniques and its impact on pathologic diagnosis; molecular biology of prostate cancer; and specimen handling, processing, and quality assurance measures.

This book is structured in a way that engages its readers. Chapters are comprehensive yet concise, with numerous illustrations of real cases. Many algorithms, flow charts, and tables are used to illustrate the thought and decision-making process during sign-out of prostate biopsies. Dr. Levin, one of our reviewers, agrees: “I feel like I am on my microscope and signing out those difficult prostate biopsies when I am reading this book.”

It is our hope that readers will not only use this book to look up a specific prostate lesion but also to learn the most effective way to evaluate a prostate biopsy and formulate a diagnostic approach upon encountering a specific clinical and pathological problem.

Irving, Texas, USA
New York City, New York, USA

Rajal B. Shah, M.D.
Ming Zhou, M.D., Ph.D.

Acknowledgments

The authors wish to express their profound appreciation to Dr. Howard Levin, Cleveland, Ohio, and Dr. Kirk Wojno, Royal Oak, Michigan, for their critical reading, and to many of their colleagues who have generously provided material presented in this book. Dr. Huiying He, Beijing, China, photographed many images used in this book. The secretarial support of Ms. Margaret LaPlaca and Ms. Georgene Hockey shall also be gratefully acknowledged.

Our thanks are also extended to Lee Klein for his stellar administrative assistance, and to Melissa Ramondetta, who saw the value of putting a practical prostate biopsy atlas on busy practicing pathologists' desks and initiated this project.

About the Authors

Rajal B. Shah is Director of Urologic Pathology at Caris Life Sciences in Dallas, Texas. Previously, he served as Clinical Associate Professor of Pathology and Urology, Director of the Urologic Pathology Division and Director of Urologic Pathology Fellowship program at the University of Michigan in Ann Arbor, MI.

Dr. Shah's clinical expertise and research focus include prostate, bladder, kidney, testis, and penile neoplasms. He has been active in translational research and frequently presents at national and international meetings on urologic pathology. He has authored more than 100 peer-reviewed journal publications and book chapters and was among a group of scientists awarded the inaugural "Team Science Award" from the American Association of Cancer Research for the discovery of recurrent gene fusions in prostate cancer.



Ming Zhou is an Associate Professor and Director of Surgical Pathology and Genitourinary Pathology, Tisch Hospital, New York University, New York, USA. He was previously at the Pathology and Laboratory Medicine Institute, Cleveland Clinic, Ohio. As an expert in genitourinary pathology, Dr. Zhou has authored more than 100 research articles and 12 book chapters, and he also co-edits a textbook, *Genitourinary Pathology*. He frequently lectures at national and international meetings on urological pathology, and currently serves on several editorial boards, including those for *Modern Pathology* and *Advances in Anatomic Pathology*.



Contents

1	Anatomy and Normal Histology of the Prostate Pertinent to Biopsy Practice.....	1
1.1	Anatomy of Normal Prostate.....	1
1.2	Anatomy and Disease Preference of Three Zones of the Prostate	1
1.3	Histology of Normal Prostate.....	2
1.4	Immunophenotype of Prostate Glandular Cells	5
1.5	Histology of Three Zones of Normal Prostate Glands, Other Intraprostatic Structures, and Their Mimics.....	6
1.6	Histologic Variations of Normal Prostate Tissue	8
	References	9
2	Prostate Needle Biopsy Sampling Techniques: Impact on Pathological Diagnosis	11
2.1	Biopsy Techniques for Prostate Cancer Detection and Its Impact on Pathological Diagnosis	11
2.2	Transrectal and Transperineal Biopsy Approaches for Prostate Cancer Detection	12
2.3	Biopsy Parameters That Impact Prostate Cancer Detection Rate in Prostate Needle Biopsy	13
2.4	Future Trends in Prostate Biopsy Sampling and Its Clinical Applications.....	13
	References	13
3	Diagnosis of Limited Cancer in Prostate Biopsy	15
3.1	General Approach to Prostate Needle Biopsy Evaluation.....	15
3.2	Histological Features Considered Specific for and Diagnostic of Cancer	15
3.3	Major and Minor Histological Features of Prostate Cancer in Biopsy	17
3.4	Benign Conditions That Cause Architectural and Cytological Atypia	23
3.5	Quantitative Threshold for Diagnosing Limited Cancer in Biopsy.....	24
3.6	Histological Features For and Against Cancer Diagnosis in Biopsy	26
3.7	A Practical Approach to Diagnosis of Limited Cancer in Needle Biopsy	26
	References	27
4	Immunohistochemistry in Prostate Biopsy Evaluation	29
4.1	Commonly Used Immunohistochemical Markers for Diagnosis of Prostate Cancer in Biopsy	29
4.2	Basal Cell Markers	30
4.3	α -Methyacyl-coA-Racemase (AMACR, P504S).....	34
4.4	ERG Protein	37
4.5	Antibody Cocktails.....	38
4.6	Differential Diagnosis of Prostate Cancer by Immunohistochemistry.....	38

4.7	Practical Guideline for Using Immunohistochemistry in Workup of Prostate Biopsies	39
	References	39
5	Contemporary Approach to Gleason Grading of Prostate Cancer	41
5.1	Significance of Gleason Grading in Prostate Cancer Management	42
5.2	Prostate Cancer Nomograms Recurrence Categories and Prediction Models	42
5.3	Current Concepts of Gleason Grading	44
5.4	Contemporary Gleason Pattern 1	44
5.5	Contemporary Gleason Pattern 2	44
5.6	Contemporary Gleason Pattern 3	45
5.7	Contemporary Gleason Pattern 4	46
5.8	Gleason Grading of Cribriform Carcinomas	48
5.9	Contemporary Gleason Pattern 5	48
5.10	Gleason Grading of Unusual “Variant” Histology Types and Patterns	49
5.11	Gleason Grading in the Setting of Multiple Cores with Prostate Cancer of Different Gleason Patterns	52
5.12	Tertiary Pattern 5 in Prostate Biopsy	52
5.13	Recommendations for Gleason Grading in the Post-therapy Setting	52
5.14	Impact of ISUP-modified Gleason Grading System	52
5.15	Problem Areas in Gleason Grading and Future Trends	54
	References	54
6	Histologic Variants of Prostate Carcinoma	57
6.1	Histological Variants of Prostate Carcinoma	57
6.2	Histologic Variants of Prostate Carcinoma Mimicking Benign Lesions	57
6.3	Foamy Gland Carcinoma	57
6.4	Pseudohyperplastic Carcinoma	59
6.5	Prostate Adenocarcinoma with Atrophic Features	61
6.6	Prostate Adenocarcinoma with Glomeruloid Features	63
6.7	Ductal Adenocarcinoma	64
6.8	Mucinous (Colloid) Carcinoma	66
6.9	Small Cell Neuroendocrine Carcinoma	68
6.10	Approach to Neuroendocrine Differentiation in Prostate Cancer	70
6.11	Sarcomatoid Carcinoma (Carcinosarcoma)	71
6.12	Urothelial Carcinoma	72
6.13	Squamous and Adenosquamous Cell Carcinoma	73
6.14	Signet Ring Cell Carcinoma	75
6.15	Adenoid Cystic Basal Cell Carcinoma	76
	References	77
7	Benign Mimics of Prostate Carcinoma	79
7.1	Classification of Benign Mimics of Prostate Carcinoma using Architectural Pattern-Based Approach	80
7.2	Histological Features Commonly Associated with Benign Mimics	81
7.3	Atypical Morphological Features Commonly Encountered in Various Benign Mimics of Prostate Cancer	82
7.4	Seminal Vesicle/Ejaculatory Duct Epithelium	82
7.5	Verumontanum Mucosal Gland Hyperplasia	83
7.6	Cowper’s Glands	84
7.7	Mesonephric Remnant Hyperplasia	85