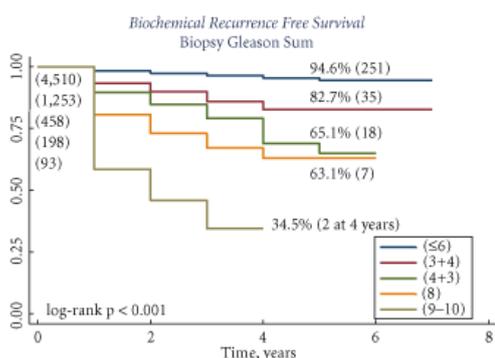
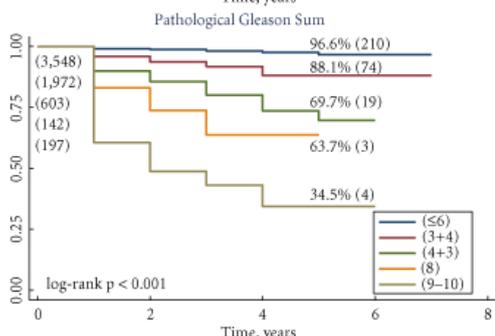


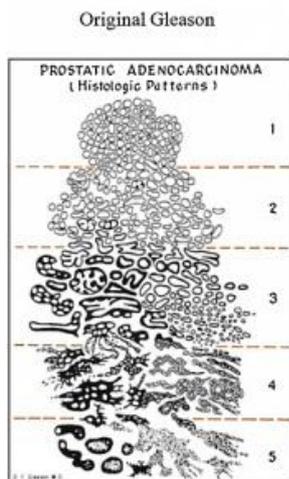
Gleason Score. A quick reminder.



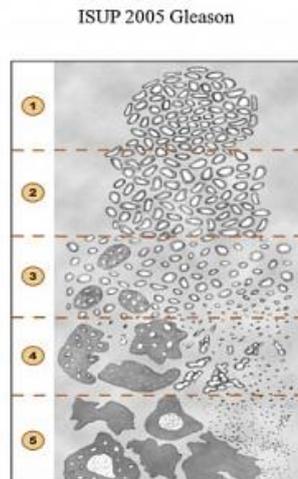
Gleason score 2-6	Prognostic Grade Group I/V
Gleason score 3+4=7	Prognostic Grade Group II/V
Gleason score 4+3=7	Prognostic Grade Group III/V
Gleason score 8	Prognostic Grade Group IV/V
Gleason score 9-10	Prognostic Grade Group V/V



Prognostic Gleason grade grouping: data based on the modified Gleason scoring system
BJU International Volume 111, Issue 5, pages 753-760, 6 MAR 2013 DOI: 10.1111/j.1464-410X.2012.11611.x
<http://onlinelibrary.wiley.com/doi/10.1111/j.1464-410X.2012.11611.x/full#bjui11611-fig-0001>

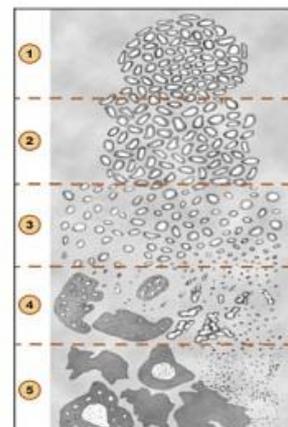


Hum Pathol 23;273-79, 1992



Am J Surg Pathol 29;1228-42, 2005

Gleason with proposed refinements and modifications to ISUP 2005



J Urol 183;433-40, 2010

Pattern 1:

Closely packed medium sized uniform glands forming a circumscribed rounded nodule.

Very rarely used in radical prostatectomy specimen reports.

Do **not** use for needle biopsy specimens

Pattern 2:

Glands more loosely arranged; not quite as uniform as Gleason pattern 1;

Fairly circumscribed but may have minimal infiltration at margins.

May be used in radical prostatectomy and TURP specimen reports.

Do **not** use for needle biopsies

Pattern 3

Discrete glandular units with **marked** variation in size and shape;

Typically smaller than Gleason pattern 1 or 2;

Infiltrates in and amongst benign prostatic tissue.

CAREFUL - Overgrading occurs with:

Tangential sectioning – looks like 4

Thick, overstained sections

Perineural invasion – glands develop a more complex architecture

Collagenous micronodules (fibroplasia) – looks cribriform

Pattern 4

Fused micro acinar glands;

Ill-defined glands with poorly formed lumina;

Large cribriform irregular glands;

Hypernephroid (Glomeruloid)

Pattern 5

Minimal if any glandular differentiation

Solid sheets, cords or single cells

Comedonecrosis

Biopsy tips

Grade each core separately

If the core is fragmented give an overall score as if it were one core.

If patterns 3, 4, 5 are present give the primary and highest grade

If patterns 2,3,4 are present ignore 2

Any amount of high grade tumour should be included in the score.

If the lower grade occupies < 5%, ignore it.

Resection tips

Assign a tertiary grade if:

The third component is the highest and is <5% of the whole tumour (if it is more >5% make it the secondary)

Grading Variants

Adenocarcinoma with cytoplasmic vacuoles AND foamy gland adenocarcinoma (grade both as per architecture)

Ductal adenocarcinoma 4+4 =8 (if necrosis then 5)