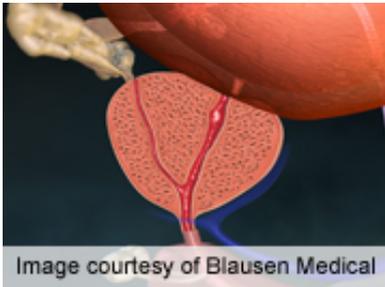


Implications of very low risk prostate cancer assessed

20 September 2013



additional guidance in identifying subjects most appropriate for surveillance and counseling those men considering surveillance as an alternative to immediate curative intervention."

More information: [Abstract](#)
[Full Text](#)

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(HealthDay)—The risk of adverse findings at surgery for men with very low risk (VLR) prostate cancer is significantly lower than for those with low risk (LR), according to research published in the October issue of the *The Journal of Urology*.

Jeffrey J. Tosoian, M.D., of Johns Hopkins Hospital in Baltimore, and colleagues prospectively studied the oncologic outcomes at surgery in 7,486 men with LR (7,333 patients) and VLR (153 patients) prostate cancer who were candidates for active surveillance.

Upon final pathology, the researchers found that 21.8 percent of men with LR prostate cancer had a Gleason score upgrade and 23.1 percent had non-organ confined cancer. However, for men with VLR prostate cancer, only 13.1 percent required a Gleason score upgrade and 8.5 percent exhibited non-organ confined cancer on final pathology. Overall, men with LR prostate cancer were 1.89- and 2.06-fold more likely to experience a Gleason score upgrade or non-organ-confined cancer, respectively, compared with men with VLR prostate cancer.

"The likelihood of a more aggressive pathological phenotype differs among men with LR and VLR [prostate cancer](#) who are eligible for active surveillance," the authors write. "This may provide

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