

Giyasov Sh.I., Mukhtarov S, Tukhtamishev M., Inayatov U.

Republican specialized scientific practical medical centre of urology, Urology, Tashkent, Uzbekistan

Introduction & Objectives: Mortality from prostate cancer among cancer ranks second after lung cancer. In the success of treatment patients, the early diagnosis of localized prostate cancer and the setting of the clinical stage of the disease according to the International Society of Urologic Pathology (ISUP) are of great importance.

Objective: To analyze the detectability and clinical stage of adenocarcinoma after a primary transrectal biopsy, depending on the level of total PSA, taking into account DRE and TRUS data.

Materials & Methods: Analysed the results of 203 primary multifocal biopsies of the prostate, performed in Republican specialized centre of urology in the period 2016-2019 years. The average age of patients was 68.94 ± 0.54 (years), the volume of the prostate (gland + adenoma) was 72.69 ± 2.13 (cc), while the average level of total PSA in serum was 29.27 ± 0.08 (ng / ml).

Preparation of patients for biopsy included: discontinuation of antiplatelet drugs for 7 days, the start of ciprofloxacin administration 500 mg x 2 times a day before the procedure. The material for the study was taken by TRUS guided, on the background of local anesthesia, using lidocain gel, using a BIP-high speed multi pistol, 18-20 g x 20 cm. of 10 sites of the prostate gland, with coverage of the peripheral and apical zones.

Results: A total of 203 primary biopsies in 145 (71.4%) patients had adenocarcinoma verified. In 185 (91.1%) patients biopsy was performed only because of the high level of total PSA, of which 134 (72.4%) had adenocarcinoma. 18 (8.9%) patients biopsy performed mainly due to identified suspicious zones in prostate, in 12 (5.9%) according to TRUS data, 6 (3.0%) according to DRE. Of these 18 patients, 11 (61.0%) had adenocarcinoma in the primary biopsy

Table 1. Clinical stage of adenocarcinoma (ISUP) depending on the level of total PSA

PSA	5-10	11-20	21-30	31-40	41-50	51-60	60-100	total
ISUP								
1	0	15	3	8	4	0	0	30
2	0	12	2	7	4	1	0	26
3	0	1	11	15	11	3	2	43
4	2	2	12	4	2	4	3	29
5	0	0	8	3	1	1	4	17
total	2	30	36	37	22	9	9	145

Conclusions: Thus in prostate biopsy performed due to high PSA levels, the detection of adenocarcinoma was higher than the biopsy performed mainly due to suspicious lesions according to TRUS and DRE, with an acceptable increase in PSA to the total gland volume.

Of the 145 patients who had verified prostatic adenocarcinoma, the patients were 61–70 years old, of which 30 (20.7%) were diagnosed with G1 (ISUP), 26 (17.9%) with G2 (ISUP), 43 (29.7%) - G3 (ISUP), 29 (20.0%) - G4 (ISUP), 17 (11.7%) - G5 (ISUP).