Re: Tracking the Clonal Origin of Lethal Prostate Cancer

Samir S. Taneja, MD

Published Online: February 21, 2014

DOI: http://dx.doi.org/10.1016/j.juro.2014.02.078

Abstract

Full Text
Supplemental Materials

Access this article on ScienceDirect

Article Tools
PDF (0.1 MB)
Email Article
Add to My Reading List
Export Citation
Create Citation Alert
Cited by in Scopus (0)
Request Permissions
Order Reprints
(100 minimum order)

Related Articles
Re: Clonal Origin of Multifocal Renal Cell Carcinoma as Determined by Microsatellite Analysis
Gyula Kovacs
The Journal of Urology, Vol. 170, Issue 4

Clonal Origin of Multifocal Renal Cell Carcinoma as Determined by Microsatellite Analysis
KERSTIN JUNKER, KATHARINA THRUM, ANDREAS SCHLICHTER, GABRIELE MÜLLER, WINFRIED HINDERMANN, JOERG SCHUBERT

Re: Clonal Origin of Multifocal Renal Cell Carcinoma as Determined by Microsatellite Analysis
The Journal of Urology, Vol. 170, Issue 4

View All
Urological Survey

Urological Oncology: Prostate Cancer

Re: Tracking the Clonal Origin of Lethal Prostate Cancer

Slidell Memorial Comprehensive Cancer Center, Department of Pathology and Urology, Northwestern University, Chicago, Illinois, USA

Abstract available at http://jurology.com/

Editorial Comment: The clinical relevance of heterogeneity of cancer within the prostate is a hotly debated topic. Prostate cancer, perhaps more than other solid urological malignancies, carries wide morphological and genetic heterogeneity within the prostate. It has been previously suggested that metastatic disease in the patient with prostate cancer, while highly heterogeneous in and of itself, arises from a single cell population in the prostate. In other words while individual metastases take on new genetic mutations that may make the cells more aggressive, their genetic signature can be traced back to a single cell population in the prostate. This observation has served as the basis for the assertion that destruction of the most aggressive clonal population in the prostate may remove its lethal potential. This concept, often called the index lesion control or ablation, relies on detection of the appropriate index lesion. This case study of 1 individual suggests that metastases can be derived from a low-grade focus in the prostate, even in the presence of higher grade regions of tumor elsewhere. This finding, if true, brings about some confusion not only in focal therapy, but also in risk stratification in patients with prostate cancer in general. Furthermore, the recent reports of gene panels capable of more accurately predicting risk than histological findings alone are drawn into question. If the genetic basis for metastatic progression is not found in all tumors within the gland, then how can random sampling of the gland allow accurate risk assessment?

Samir S. Taneja, MD

Re: Decision Making in Prostate Cancer Screening Using Decision Aids vs Usual Care: A Randomized Clinical Trial

Lombardi Cancer Center, Georgetown University Medical Center, Washington, D.C.

Abstract available at http://jurology.com/

Editorial Comment: Given the recent concerns of the medical community regarding the relative benefit of prostate cancer screening, informed decision making has been strongly advocated by many groups. The process of informed decision making with regard to prostate cancer is difficult, time consuming and limited by the fact that many primary care physicians, who would be making the

To access this article, please choose from the options below

Log In

Email/Username:

Password:

Remember me

Log In

Register
Create a new account

Purchase access to this article
You must be logged in to purchase this article.

Claim Access
If you are a current subscriber with Society Membership or an Account Number, claim your access now.

Subscribe to this title
Purchase a subscription to gain access to this and all other articles in this journal.

Institutional Access
Visit ScienceDirect to see if you have access via your institution.

© 2014 American Urological Association Education and Research, Inc. Published by Elsevier Inc. All rights reserved.