

Perbandingan skor gleason biopsi dan paska radikal prostatektomi serta faktor prediksi peningkatan skor : pengalaman di RS Cipto Mangunkusumo Jakarta = Comparison between biopsy and post radical prostatectomy gleason score and its upgrading prediction factor experience in Cipto Mangunkusumo Hospital Jakarta

Dhani Dwi Yunanto

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Abstrak

[Pendahuluan: Sejak tahun 70-an hingga sekarang, skor Gleason merupakan parameter penting pada penatalaksanaan kanker prostat. Biopsi prostat yang umum dipakai untuk membedakan antara kondisi jinak dan ganas semakin menjadikan skor Gleason berperan penting dalam menentukan tatalaksana selanjutnya. Meskipun demikian, terdapat diskrepansi antara skor Gleason yang diambil secara biopsi dan paskaoperasi. Tujuan: Untuk menentukan perbedaan skor Gleason sebelum dan setelah dilakukan prostatektomi radikal, dan untuk mencari faktor-faktor yang berperan dalam peningkatan skor Gleason.

Metode: Dilakukan evaluasi laporan patologi dari spesimen prostat yang didapatkan secara biopsi dan paska prostatektomi radikal antara Januari 2004 sampai Desember 2013. Kriteria eksklusi dari studi ini adalah laporan-laporan yang tidak mencantumkan skor Gleason ataupun diagnosis selain adenokarsinoma prostat.

Hasil: Studi ini menginklusi 36 subjek dengan adenokarsinoma prostat yang telah menjalani prostatektomi radikal. Skor Gleason 6 merupakan skor tersering yang dilaporkan pada biopsi, sedangkan skor Gleason 7 merupakan skor tersering yang dilaporkan pada spesimen prostatektomi radikal. Diantara subjek, 58,3% (n=21) memiliki perbedaan antara skor Gleason biopsi dan prostatektomi radikal; 11,1% (n=4) memiliki penurunan dan 47,2% (n=17) mengalami peningkatan. Dengan menggunakan analisis statistik dijumpai bahwa rendahnya densitas PSA (PSAD) memiliki korelasi dengan likelihood peningkatan ( $r=0,658$ ,  $p=0,006$ ).

Kesimpulan: Sebagian besar pasien memiliki perbedaan antara skor Gleason hasil biopsi dan paskaoperasi dimana terlihat kecenderungan peningkatan dibandingkan dengan penurunan skor. PSAD merupakan faktor yang berkorelasi dengan peningkatan skor Gleason., Introduction: Since its introduction in mid 70 until now, Gleason Score is an important parameter in the treatment of prostate cancer. The common practice of prostate biopsy to differentiate between malignant and benign condition of the prostate, hence makes Gleason score plays important role in determine the next step of treatment. Still there is a discrepancy between Gleason score taken from biopsy and postoperatively.

Aim: To determine the Gleason score difference before and after radical prostatectomy, and to find factors that has a role in the upgrading of Gleason score.

Methods: We evaluated pathology reports of prostate specimens obtained from biopsy and after radical prostatectomy between January 2004 until December 2013. Exclusion criteria of this study were reports that failed to mentioned Gleason score or a diagnosis apart from adenocarcinoma of the prostate.

Results: This study enrolled 36 subjects with adenocarcinoma of the prostate who underwent radical prostatectomy. Gleason score 6 was the most reported score in initial biopsy while Gleason score 7 was the most reported in radical prostatectomy specimen. Among the subjects 58.3% (n=21) had differences of Gleason score between biopsy and radical prostatectomy; 11.1% (n=4) had a downgrading and 47.2%

(n=17) had an upgrading. Using statistical analysis we found out that low prostate specific antigen densities (PSAD) had correlation with upgrading likelihood (r 0.658, p = 0.006)

Conclusion: More than half of our patient had differences between biopsy Gleason score and postoperative scores with majority showed a likelihood of upgrading rather than downgrading, PSAD was the factors that correlates with upgrading in Gleason score.]