

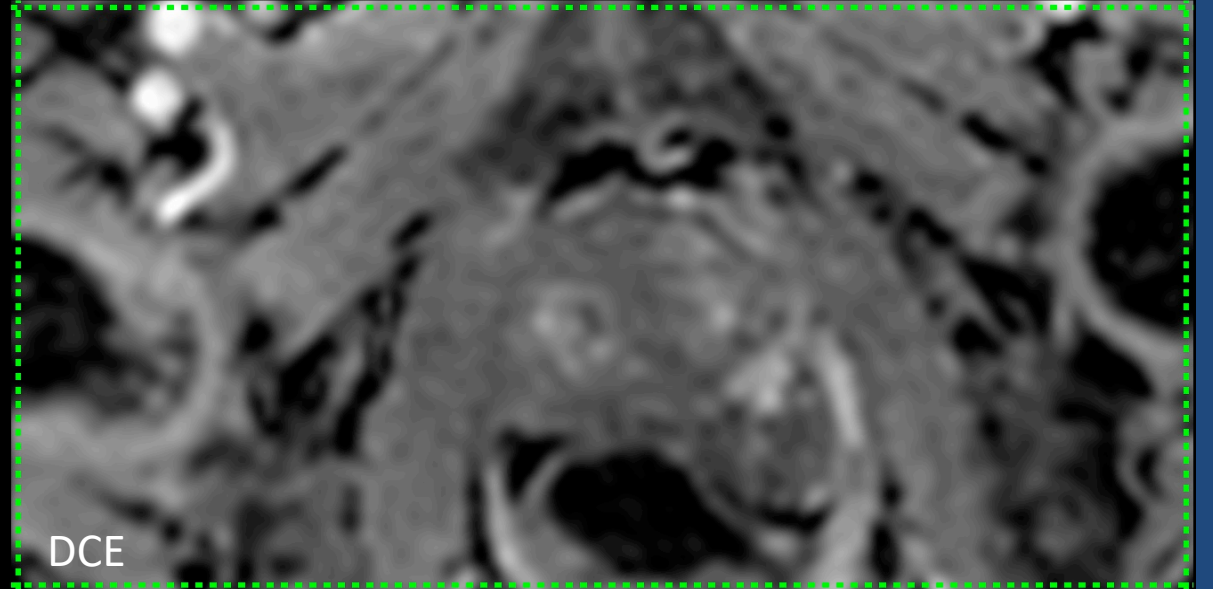
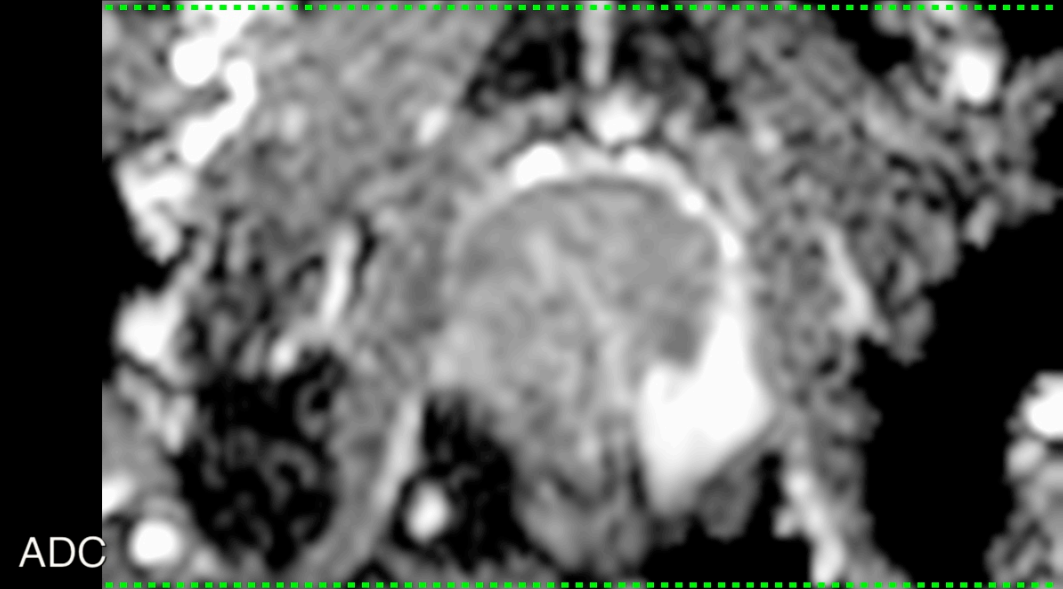
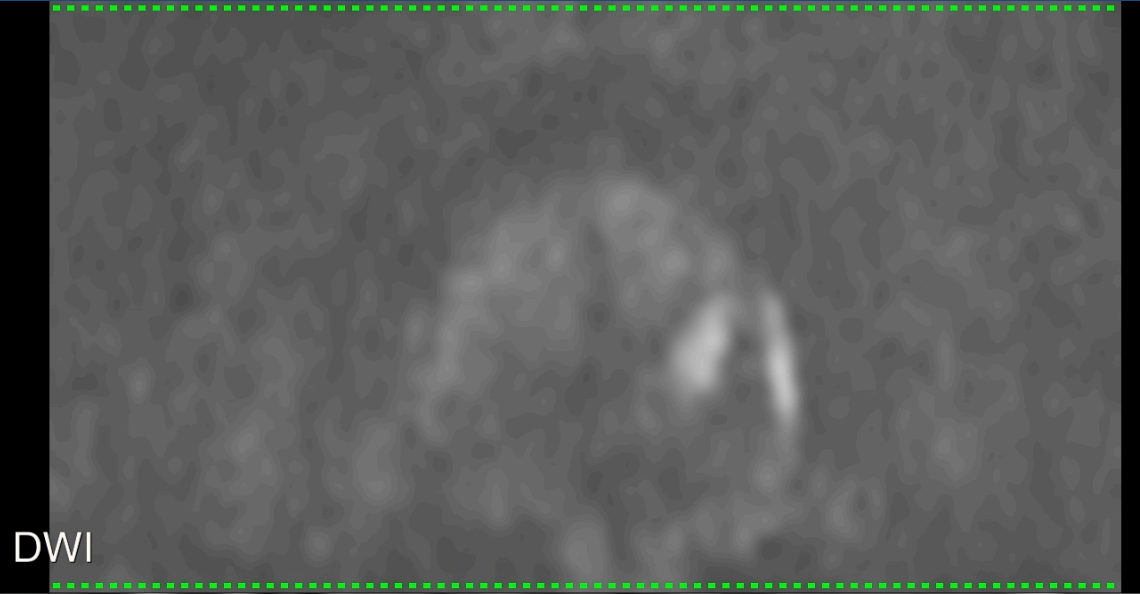
SAR Prostate DFP COTW

Cystic Prostate Cancer

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History: 76 year old man with elevated PSA (3.46) and remote history of prostatitis, no prior biopsy.



Findings

- Cystic lesion effacing the left recto-prostatic angle.
- Solid mural components of the cystic lesion demonstrate T2 hypointensity, marked restricted diffusion and early enhancement.
- This atypical lesion was reported as suspicious for neoplasia (PIRADS wasn't used as lesion is atypical and tissue of origin was not 100% certain) and subsequently biopsied.
- Targeted biopsy was performed - prostate adenocarcinoma with ductal features (Gleason 4+4)

Explanation

- Typical prostate adenocarcinoma is of the “acinar” variant. Multiple variants including “ductal” & “mucinous” can occur.
- Ductal adenocarcinoma can present as a cystic mass and is usually higher grade than typical acinar adenocarcinoma.
- The majority of ductal adenocarcinomas are found in association with an acinar component. Tumors with absolute ductal components are extremely rare.

Further Reading

“Beyond Prostate Adenocarcinoma: Expanding the Differential Diagnosis in Prostate Pathologic Conditions” Yi Li, John Mongan, Spencer C. Behr, Seema Sud, Fergus V. Coakley, Jeffry Simko, and Antonio C. Westphalen *RadioGraphics* 2016 36:4, 1055-1075