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Prostate leiomyo sarcoma and carcino sarcoma: Report of 2 cases

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Introduction: Treatment of prostate sarcom as are still challenging due to the poor prognosis. We here in present a case of prostatic carcino sarcoma and concurrent primary prostatic sarcoma and acinaradeno carcinoma.

Patients & Methods: Case 1: A 40-year-old man presented with complaints of constipation and prostatism. On digital rectal examination, an arrowing rectal lumen with large mass originated from prostate was found. A serum prostate spesific antigen (PSA) was 2, 2 ng/ml. MRI revealed a largemass, 50x51x43 mm in dimensions, arising in left prostate lobe. Rectal wall could not be distinguished from the prostate tissue. 12 cores of prostate biopsies were performed and all of them were reported as leiomyo sarcoma. Thoracal CT showed multiple nodules, compatible with metastasis in bilateral lung. Three cycles of neo adjuvant chemotherapy was implemented and the metastatic foci were quickly regressed. After the chemotherapy, we performed radical prostatectomy, uretrectomy, low anterior resection, vesicostomy and colostomy. Histopathologic examination showed acinaradeno carcinoma with a Gleasonscore 6 (3+3) and primary leiomyo sarcoma extensively infiltrating neighborings of tissues and rectalwall. Case 2: A 63-year-old man was admitted to our hospital with a history of newly diagnosed prostatic acinaradeno carcinoma which was Gleasonscore 8 (3+5). PSA level was 5, 99 ng/ml. Thoraco abdominal CT indicated two enlarged obturator lypmhnodes in abdomen. Bone scan was normal. Cystoscopy revealed extremely large prostate and possible bladder neck invasion. Second TUR-P was performed and histopathologic examination showed carcino sarcoma of prostate. Radical prostatectomy, obturator lymph node dissection, uretrectomy, partial cystectomy and vesicostomy were performed. Histopathologic examination revealed primary prostatic which was located in both lobes of prostate with extensive carcino sarcoma showed all biopsy samples pathology after surgery, radiotherapy was planned.

Conclusion: Leiyomyo sarcoma and carsino sarcoma of the prostate are rare neoplasm which usually presents with metastatic disease. Multi modal treatment options including surgery, pre operative and post operative radiotherapy and chemotherapy can be performed. Despite all treatment options, these neoplasm cause a poor prognosis.

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Is human prostate cancer a truly age related disease?

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Prostate cancer is a major health issue in westernized countries being considered a prototypical age-related, androgen-dependent tumor. However, data on the association between circulating androgens and prostate cancer are inconsistent and not compatible with the androgen/aging hypothesis. Furthermore, plasma androgen to estrogen ratio appears to decrease with age, suggesting that estrogens may have a role. Some studies suggest that circulating steroids cannot be considered representative of their intra-prostatic levels, as a consequence of expression and/or activity of steroid enzymes, including 17β hydroxyl steroid dehydrogenase, 5α-reductase, 3α/3βHSD and aromatase, eventually leading to a differential tissue accumulation of steroid derivatives having distinct biological activities. Furthermore, the time scale of prostate carcinogenesis and cancer progression usually spans 35-40 years or longer. Therefore, the timing for the carcinogenetic impact of androgen and/or estrogen on human prostate should be allocated back to 20-30 years (or earlier) prior to the clinical manifestation of disease, when serum androgens are higher and potentially relevant. There is consistent evidence that exposure of prostate cells to elevated estrogens in uterine or perinatal life (a process referred to as developmental estrogenization) may be responsible for permanent perturbations of prostate development that may eventually result in an increased propensity to develop precancerous or malignant lesions. One could speculate that developmental estrogenization induce changes in a pool of embryonic stem cells that may, in turn, generate a population of adult imprinted prostate stem cells having high susceptibility of developing cancer. Based on this evidence, a hypothetical model of prostate cancer development and progression is presented.

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