Histological tumour type (Required)

Reason/Evidentiary Support

The vast majority (>95%) of prostate cancers are acinar adenocarcinomas. Other types of carcinoma are rarer but must be recorded if present, since some variants, such as ductal adenocarcinoma, small cell carcinoma, sarcomatoid carcinoma and urothelial-type adenocarcinoma, have a significantly poorer prognosis. The tumour type should be assigned in line with the 2016 World Health Organisation (WHO) classification and mixtures of different types should be indicated. Subtypes of prostate carcinoma are often identified in combination with acinar type and in such cases the tumour type should be classified according to the subtype.

WHO classification of tumours of the prostate^{a1}

Descriptor	ICD-O codes
Glandular neoplasms	
Acinar adenocarcinoma	8140/3
Atrophic	
Pseudohyperplastic	
Microcystic	
Foamy gland	
Mucinous (colloid)	8480/3
Signet ring-like cell	8490/3
Pleomorphic giant cell	
Sarcomatoid	8572/3
Prostatic intraepithelial neoplasia, high-grade	8148/2
Intraductal carcinoma	8500/2
Ductal adenocarcinoma	8500/3
Cribiform	8201/3
Papillary	8260/3
Solid	8230/3
Urothelial carcinoma	8120/3
Squamous neoplasms	
Adenosquamous carcinoma	8560/3
Squamous cell carcinoma	8070/3
Basal cell carcinoma	8147/3
Neuroendocrine tumours	
Adenocarcinoma with neuroendocrine differentiation	8574/3
Well-differentiated neuroendocrine tumour	8240/3
Small cell neuroendocrine carcinoma	8041/3
Large cell neuroendocrine carcinoma	8013/3

a The morphology codes are from the International Classification of Diseases for Oncology (ICD-O). Behaviour is coded /0 for benign tumours; /1 for unspecified, borderline, or uncertain behaviour; /2 for carcinoma in situ and grade III intraepithelial neoplasia; and /3 for malignant tumours.

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Urothelial carcinomas arising in the bladder or urethra are dealt with in separate datasets; however, those rare urothelial carcinomas arising within the prostate are included in this dataset.

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