

Pathological staging (Required)

Reason/Evidentiary Support

Pathologic staging is considered to be the most significant prognostic parameter for primary carcinoma of the urethra.¹⁻³ Throughout the entire length of the urethra, invasion of the subepithelial connective tissue denotes stage pT1 disease. More advanced T categories are dependent on the location, and whether the patient is male or female.

In the male patient, primary carcinoma of the prostatic urethra is accorded a distinct set of T category definitions.⁴ This reflects the somewhat unique relationship between urothelial carcinoma of the urinary bladder and the prostate gland and the relationship between prostatic gland involvement in those cases and assignment of T-category. For primary urethral carcinomas, the frequent involvement of prostatic ducts by carcinoma in situ results in the occurrence of prostatic stromal invasion directly from within the ducts (pT2) without passing through a pT1 stage as occurs in invasion from the prostatic urethra. In the Seventh edition of the American Joint Committee on Cancer (AJCC) Cancer Staging Manual, carcinoma in situ involving the prostatic ducts (pTis pd) was recognized separately from urethral involvement (pTis pu).⁵ That distinction is no longer applied in the Eighth edition of the AJCC Cancer Staging Manual.⁴

References

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